Speaking Up for Health Care Reform
During the past year, health care reform has been the focus of much discussion and debate in homes, offices, and town halls across the country as Congress and the White House have considered a massive overhaul of our current system.

Institutions of higher learning, including the University of Maryland School of Pharmacy, have played host to forums and seminars that generated new ideas and ignited a passion in students and faculty that I would like to share with you, our alumni and friends.

The School of Pharmacy has taken a firm stance on health care reform. Pharmacists must play a key role in the planning process being undertaken by the federal government. The health care reform principles being considered are well grounded in developing strategies to promote the prevention and management of chronic diseases. Essential to the success of those strategies is the fully integrated role of pharmacists, the country’s most accessible health care professionals.

Based in community pharmacies on street corners in nearly every town in the country, and in hospitals, clinics, and long-term care settings, pharmacists have clearly demonstrated their impact on improving health and reducing costs.

Successful health care reform must include insurance reimbursement for pharmacist services beyond dispensing of medicine, including chronic disease management, medication therapy management, and administration of life-saving immunizations.

A successful health care reform package must also include community-based programs delivered by pharmacists with proven track records, programs that have amassed evidence-based data on pharmacy services’ impact on those goals of improving health care and reducing costs.

The stories in this issue of Capsule provide examples of how the School of Pharmacy is putting these ideas into action. Here you will read about how we are developing innovative practice and continuing education programs and learn about our educational emphasis on producing graduates who will be advocates for the pharmacy profession. You’ll also learn more about our expertise in areas of health policy such as Medicare Part D and substance abuse, both hotly debated topics in reform discussions.

As alumni of the School of Pharmacy, I hope you are proud of the leadership role your alma mater has taken in promoting health care reform conversation, and in advocating for reform that recognizes pharmacists as reimbursable providers while providing patients with unrestricted access to these services.

That’s it for now,

Natalie D. Eddington, PhD ’89, BSP
Dean
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On the cover: Students from the School of Pharmacy’s Effective Leadership and Advocacy course make an annual trip to Capitol Hill to visit with their representatives for conversations on pharmacy-related issues.

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Revised Curriculum Launched

Members of the Class of 2013 started the fall semester under a revised and enhanced curriculum, one that promises to prepare them for the expanding scope of pharmacy practice.

For the first time since 1993, when it was the first pharmacy school on the East Coast to launch an all PharmD program, the School of Pharmacy has made major revisions to its curriculum to embrace the broader role that U.S. pharmacists now play on the health care team.

“One motivating force for this revision was new criteria from the Accreditation Council for Pharmacy Education that requires our students to have 1,440 advanced pharmacy practice experience hours in settings outside of the classroom. These experiences are offered in community, hospital, and long-term care pharmacies, ambulatory clinics, industry, the federal government, and other sites,” says Raymond Love, PharmD ’77, associate dean for curriculum, instructional design and technology and a professor in the Department of Pharmacy Practice and Science.

“Under those new criteria, which were launched in 2007, our students will now spend their entire final year of pharmacy school on advanced rotations. As a result, we've adjusted our curriculum to fit more than 300 hours of introductory pharmacy practice experiences and all didactic coursework such as lectures, discussion groups, and labs into the first three years. Beginning with their first semester, our students spend nearly one-third of their education on rotations in real-world pharmacy settings.”

Additionally, after conferring with faculty, alumni, and preceptors who oversee students on rotations, the School decided to further emphasize the management of complex patients with multiple therapeutic problems, which many practicing pharmacists encounter.

“This resulted in a new pharmacotherapy course in the third year that gives our students practice in integrating therapeutics for multiple disease states,” Love says. “We've also added an abilities laboratory to every semester, integrated our offerings in pathophysiology, pharmacology, and therapeutics in the first year, and expanded our offerings in pharmacy practice management and administrative sciences.”

New students at the School of Pharmacy are now expected to have completed several basic science requirements that were previously taught in the first year of pharmacy school.

“Now our first-year students will concentrate on pharmaceutical sciences and general principles in pharmacy practice in the first semester,” says Love. “In the second semester, they'll begin learning about diseases, pharmacology, and treatment, all of which were second- and third-year topics previously. There will be much more lab time with an emphasis on communicating with and monitoring patients. Students will be responsible for a lot more earlier in the program.”

The revision process began in 2005 with evaluation of each course’s Terminal Performance Outcomes and then two years’ worth of work in the School’s Curriculum Committee. Once that framework was approved by the School’s Faculty Assembly, instructional planning teams spent a year “creating” each course.

“While our curriculum was excellent, it became apparent in discussions with others that there were challenges we needed to address,” says Love. “The ultimate benefit of this revised curriculum is that our students will be more confident in performing the complex tasks they will need to master to practice pharmacy, in whatever role they choose.”

Students currently in their second, third, and fourth years at the School of Pharmacy will finish their degrees under the existing curriculum, while the first-year students will be taught the revised curriculum.

“Revising the School of Pharmacy curriculum to maximize the expertise of our faculty and preceptors was a massive undertaking,” says Natalie D. Eddington, PhD ’89, dean of the School of Pharmacy. “The revised curriculum not only gives our student pharmacists the building blocks they need to practice, but it shows them how to apply those building blocks. I am extremely proud of the contributions every faculty member made to this revision and am confident that the University of Maryland School of Pharmacy will continue to graduate outstanding leaders in the pharmacy profession under this new curriculum.”

Balassone Memorial Lecture

Roger Merrill, MD, chief medical officer at Perdue Farms in Salisbury, Md., presented the School’s annual Francis S. Balassone Memorial Lecture on Nov. 2. Merrill discussed how pharmacists are a critical element in medical home models of care for companies. 

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Addition Construction Progresses

Construction of Pharmacy Hall Addition is moving forward at a brisk pace, with the School on track to occupy the building in August 2010. Exterior brickwork was completed over the summer, windows were placed in the fall, and furniture and equipment have been purchased.

Contractor Whiting-Turner placed a steel beam in the lobby of Pharmacy Hall for faculty, staff, students, alumni, and friends to sign in order to become a permanent part of the building. The beam will be placed in the Addition during construction.

DuMez Memorial Lecture

The School of Pharmacy welcomed Thomas Menighan, Pharmacist, MBA, FAPhA, executive vice president and chief executive officer of the American Pharmacists Association, as its keynote speaker at the annual Andrew G. DuMez Memorial Lecture on Oct. 12. Menighan spoke to a capacity crowd of faculty, staff, and students about how pharmacy can answer the medication use crisis in health care reform.
Laurels

Lisa Aukland, PharmD, CSPI, a poison information specialist at the Maryland Poison Center, ranked fourth in the International Federation of Bodybuilders’ 2009 Ms. Olympia competition.

Melissa Badowski, PharmD, published “The Impact of Reduced Immunosuppression on Graft Outcomes in Elderly Renal Transplant Recipients” in the July 2009 issue of Clinical Transplantation.

Nancy Bowers, director of finance and administration, was named the University of Maryland, Baltimore (UMB) Employee of the Month for June 2009.

Cynthia Boyle, PharmD ’96, FAPhA, received the 2009 Seidman Distinguished Achievement Award from the Maryland Pharmacists Association (MPhA).

Amy Davidoff, PhD, was promoted to research associate professor in the Department of Pharmaceutical Health Services Research (PHSR) and was named the department’s graduate program director.


Darren Freeman, PharmD ’05, BCPP, Bethany DiPaula, PharmD ’95, BCPP; and Raymond Love, PharmD ’77, BCPP, FASHP, published “IM Haloperidol vs. IM Olanzapine in Acute Agitation: A Cost Minimization Study” in the August 2009 issue of Pharmacotherapy.


Stephen Hoag, PhD, has been elected a fellow of the American Association of Pharmaceutical Scientists (AAPS). He was also promoted to professor in the Department of Pharmaceutical Sciences (PSC).

Donna Huynh, PharmD ’01, BCPS, MA; Stuart Haines, PharmD, FCCP, FASHP, FAPhA; Deborah Sturpe, PharmD, BCPS; Magaly Rodriguez de Bittner, PharmD ’83, BCPS, CDE, FAPhA; and David Roffman, PharmD, BCPS, published “The Impact of Advanced Pharmacy Practice Experiences on Students’ Readiness for Self-directed Learning” in the American Journal of Pharmaceutical Education.

Wendy Klein-Schwartz, PharmD ’77, MPH, wrote a chapter on poisoning in the Handbook of Nonprescription Drugs published by the American Pharmacists Association.

David Knapp, PhD; David Roffman, PharmD ’73, BSP ’70; and William Cooper, MBA, published “Growth of a Pharmacy School Through Planning, Cooperation, and Establishment of a Satellite Campus” in the October 2009 issue of the American Journal of Pharmaceutical Education.

Raymond Love, PharmD ’77, BCPP, FASHP, received the 2010 Judith J. Saklad Award from the College of Psychiatric and Neurologic Pharmacists.


Connie Mitchell, a program administrative specialist in the Maryland Poison Center, was named the UMB Public Servant of the Year and received the 2008-2009 University System of Maryland Regents’ University System Staff Award for Extraordinary Public Service to the University or the Greater Community.

Jason Noel, PharmD, BCPP, has been named the School’s director of continuing education.

Gail Rattinger, PharmD, PhD, received the Best New Investigator Podium Presentation award for her paper “Prescribing Patterns Among Dementia Patients at the Veterans Affairs Maryland Health Care System” at the 14th annual International Society for Pharmacoeconomics and Outcomes Research international meeting.

Charmaine Rochester, PharmD, BCPS, CDM, CDE, received the 2009 Innovative Pharmacy Practice Award from the MPhA. She was also elected vice president of the UMB Faculty Senate, and promoted to associate professor in the Department of Pharmacy Practice and Science (PPS).

Fadia Shaya, PhD, MPH, was promoted to associate professor in PHSR.

Linda Simoni-Wastila, PhD, BSpPharm, was promoted to professor in PHSR and was named the department’s vice chair of research.

Deborah Sturpe, PharmD, BCPS, was promoted to associate professor in PPS.

Peter Swaan, PhD, has been elected a fellow of AAPS and was appointed to a three-year term as a permanent member on the National Institutes of Health (NIH) Xenobiotic and Nutrient Disposition and Action Study Section.

Hoi An Truong, PharmD ’05, MPH; Cherokee Layson-Wolf, PharmD ’00; and Magaly Rodriguez de Bittner, PharmD ’83, BCPS, CDE, FAPhA, published “Perceptions of Patients on Medicare Part D Medication Therapy Management Services” in the Journal of the American Pharmacists Association.

Hoi An Truong, PharmD ’05, MPH, was installed as a trustee of the MPhA.

Mona Tsokleris, PharmD ’87, BCPS, published “Factors Affecting Primary Care Provider and Caregiver Concordance for Pediatric Asthma Medications” in the Journal of Asthma.

Hongbing Wang, PhD ’03, was promoted to associate professor in PSC.

Jia Bei Wang, PhD ’92, has been appointed to a four-year term as a permanent member of the NIH Molecular Neuropharmacology and Signaling Study Section.
Student, Faculty Receive Stimulus Funds for Research

School of Pharmacy faculty and students submitted more than 20 applications for funding from the National Institutes of Health (NIH) through the American Recovery and Reinvestment Act. Four faculty members and one graduate student received funds for their projects.

Alexander MacKerell Jr., PhD, the Grollman-Glick professor in the Department of Pharmaceutical Sciences (PSC), received $47,019 from the National Institute of General Medical Sciences to improve computational models of DNA and RNA, facilitating the rational design of agents targeting these biological molecules, including novel antibiotics.

Antonia Tolson, a graduate student in PSC, received $50,928 from the National Institute on Drug Abuse to study the interaction between methadone and drugs to treat illnesses such as HIV and Hepatitis C.

Angela Wilks, PhD, a professor in PSC, received $300,000 from the National Institute of Allergy and Infectious Diseases (NIAID) to develop a new class of antibacterials by blocking the action of heme oxygenase, which is required to acquire iron from heme during infections. She also received $750,000 from the NIAID to study the mechanisms by which bacteria such as Shigella dysenteriae acquire heme and to identify new strategies for antimicrobial drug development.

Bruce Yu, PhD, an associate professor in PSC, received $228,180 from the National Institute of Biomedical Imaging and Bioengineering to study fluorinated biomaterials that can be used as tissue repair scaffolds and drug delivery matrices.

Amy Davidoff, PhD, a research associate professor in the Department of Pharmaceutical Health Services Research (PHSR), received a prestigious Challenge award for $777,137 from the National Cancer Institute for “Comparative Effectiveness: Erythropoietic Stimulating Agents in Treatment of MDS.” Myelodysplastic syndromes (MDS) are the most common hematologic malignancy in the elderly, with at least 10,000 new cases diagnosed each year. Erythropoietic stimulating agents (ESAs) are effective in treating the symptomatic anemia that affects MDS patients, but little is known about long-term effects of ESAs, compared to supportive care with repeated blood transfusions. In her study, Davidoff will use data from regional cancer registries that are linked to Medicare enrollment and insurance claims data, and will examine the characteristics of Medicare beneficiaries with MDS, patterns of treatment, safety and effectiveness of ESA use, and costs of care. Davidoff will be collaborating with Sheila Weiss Smith, PhD, a professor in PHSR and director of the School’s Center for Drug Safety, and researchers from the University of Maryland Greenebaum Cancer Center and the Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins. The NIH received 20,000 submissions for Challenge grants, which are two-year awards for highly innovative projects. The NIH awarded 840 Challenge grants to researchers across the country. Davidoff’s is one of four at the University of Maryland, Baltimore and the only one at the School of Pharmacy.

Fedder Retires

After 35 years of service, Professor Emeritus Donald Fedder, DrPH, MPH, BSP ’50, FAPhA, of the Department of Pharmaceutical Health Services Research (PHSR) retired on Nov. 20 at a special ceremony attended by family, friends, and colleagues that also celebrated his birthday.

Former Dean Honored

William J. Kinnard, PhD, dean of the School of Pharmacy from 1968 to 1989, was recognized on Nov. 19 with the Theodore E. Woodward Award from the University’s Health Sciences and Human Services Library (HS/HSL). The award is given in acknowledgment of a significant contribution of resources or exemplary service in support of the library’s mission.

From left, Ilene Zuckerman, PharmD ’83, PhD, chair of PHSR, Donald Fedder and Dean Eddington

M.J. Tooey, MLS, executive director of the HS/HSL, presents former Dean Kinnard with the Woodward Award.
Visiting the FDA

Faculty from the School of Pharmacy visited the Office of Clinical Pharmacology (OCP) at the Food and Drug Administration (FDA) in July to discuss potential collaborations in the areas of pharmacogenomics, drug safety, pharmacometrics, and drug and transporter interactions. There was also conversation about fellowships at the FDA for the School’s PharmD and graduate students.

Shown at the meeting are, from left, Ilene Zuckerman, PharmD, PhD, professor and chair of the Department of Pharmaceutical Health Services Research (PHSR); Gail Rattinger, PhD, research assistant professor in PHSR; Emily Reese, a PHSR graduate student; Sheila Weiss Smith, PhD, professor in PHSR and director of the Center for Drug Safety; Federico Goodsaid, PhD, associate director for operations in genomics, OCP; Shiew-Mei Huang, PhD, deputy director of OCP; Darrell Abernathy, MD, PhD, visiting professor, OCP; Andrew Coop, PhD, professor and chair of the Department of Pharmaceutical Sciences (PSC); Paul Shapiro, PhD, the School’s associate dean for research and graduate studies; Lawrence Lesko, PhD, director of OCP; Thomas Dowling, PharmD, PhD, associate professor in the Department of Pharmacy Practice and Science; Hongbing Wang, PhD, associate professor in PSC; and Gil Burkhart, PharmD, associate director for regulatory policy, OCP.

MedImmune, School Launch Fellowship Program

A joint fellowship program has been created by the School of Pharmacy and the biotechnology company MedImmune, LLC to help produce future clinical scientists with leadership skills for the pharmaceutical and biotechnology industries. The program will provide a pipeline for the development of highly qualified researchers who will be on the forefront of creating new medicines to treat a variety of diseases. The first fellow, John Blake-Haskins, PharmD, a 2009 graduate of the School of Pharmacy, began his two-year appointment in July.

The fellowship is designed to be an innovative educational and research experience for recent pharmacy school graduates. It will provide an environment conducive to intellectual growth and scientific development through hands-on experience and supervised research projects. The program’s aim is to develop scientists who would like to pursue careers in clinical drug development. Companies like MedImmune, which is based in Gaithersburg, value the pursuit of scientific endeavors through academic and professional experience.

According to Toni Stiefel, MedImmune’s director of corporate responsibility and community affairs, “This program is an example of our commitment to ongoing education, science, and patient health. We are excited to be working with the caliber of talent at the University of Maryland School of Pharmacy as we partner to develop future leaders in the biotech industry.”

Adds Natalie D. Eddington, PhD, dean of the School of Pharmacy, “This fellowship provides an additional avenue for partnering the clinical skills of the School’s graduates with the basic science expertise needed in the pharmaceutical industry. Our hope is that, through this fellowship, we will produce a field of highly trained clinical researchers, a significant need in the region, that will support the development of new medication therapies critical to improving health in our state and nationally.”

The objectives for fellows in the new program are to understand:
- the pathways for preclinical research
- the link between preclinical research and clinical development
- the toxicology requirements to enable clinical development plans
- the relationship between regulatory and clinical development
- the value of health economics and patient-reported outcomes on clinical development activities

“In 2007, the School of Pharmacy expanded its Doctor of Pharmacy program to the Universities at Shady Grove in Rockville,” says Eddington. “From the beginning, we’ve been extremely interested in relationships with the numerous biopharmaceutical companies in Montgomery County as a means of establishing research collaborations and as a way to offer an even more dynamic educational experience for both our PharmD and PhD students.”

As the first School of Pharmacy/MedImmune fellow, Blake-Haskins will be working to help bring one of MedImmune’s investigational drugs through clinical trials. “I am honored to be the first fellow selected for this program,” he says. “My work experience prior to pharmacy school included analytical support in the biotech industry, but with this fellowship, I will be able to focus on the clinical development of drugs. I hope to contribute to the team and hone my research skills as I move from postdoctoral fellow into a career in this area.”
Although there is copious rhetoric attended to health care reform, the outcry on behalf of pharmacy interests might be described more as a whisper than a roar. When numbers of the uninsured are passionately disputed, along with consequences to those without access to care, relatively few voices are heard arguing the impact on people without access to medication—the primary therapy for most illness. The voices that are raised, though not the loudest on Capitol Hill, resonate with experience, research, and common sense. Among them are faculty members in the School of Pharmacy’s Department of Pharmaceutical Health Services Research (PHSR).

“In the debate in Washington, drug issues are explored by implication,” Professor Frank Palumbo, PhD, JD, reports. “But they need to be explored more explicitly, with regard to their overall importance in health care reform.”

Palumbo, executive director of PHSR’s Center on Drugs and Public Policy, says a major issue being confronted by pharmacy leaders is Medication Therapy Management (MTM), and the need to take full advantage of the high level of education and expertise pharmacists contribute beyond being dispensers of pills. MTM is included in Medicare
Can you imagine calling 1-800-DOCTOR every time you had a question about your health? Drug management shouldn’t be reduced to that level. It needs to be done exclusively by pharmacists, with a mechanism for the personal touch when needed.

—Frank Palumbo, PhD, JD

Part D, with a provision that it can be provided by pharmacists or other professionals to patients with multiple chronic conditions.

Palumbo makes the point that pharmacists are the ones best equipped to help patients manage drug therapy. However, the way in which the law is written now, others with less training and considerably less knowledge about drugs are providing MTM. In some cases, prescription drug programs contract with a 1-800 referral number that patients can contact for information.

“Can you imagine calling 1-800-DOCTOR every time you had a question about your health?” Palumbo asks. “Drug management shouldn’t be reduced to that level. It needs to be done exclusively by pharmacists, with a mechanism for the personal touch when needed.”

As for the economics involved, he reasons that an insurance company might easily pay $5,000 for a diagnosis leading to a prescribed medication that, if not taken effectively, lacking the guidance of a pharmacist-directed MTM, could result in additional costs for physician visits or hospitalization. While Palumbo agrees managed care entities might resist paying for a higher level of MTM, he says the argument on behalf of patients getting well-rounded care—from diagnosis to drug management—is a strong one that deserves support. Professional medication management affects more than just the elderly. It touches the lives and pocketbooks of almost everyone.

Palumbo points out that prescription drug manufacturers are strongly opposed to any price negotiations in Medicare, and appear eager to offer concessions to the Obama administration. The pharmaceutical industry has pledged $80 billion to be put on the table and is seeking ways to expand coverage by closing the “doughnut hole”—the gap that exists for patients who have expended their drug coverage.

ALIGNED WITH MEDICARE

Bruce Stuart, PhD, professor and executive director of PHSR’s Peter Lamy Center on Drug Therapy and Aging, claims health reform is so closely tied to Medicare, it’s impossible to talk of adding or subtracting health insurance products without discussing the implications for Medicare.

“Medicare will be the primary source of revenue for whatever bill is passed in the sense that the bill will be funded largely through savings in the Medicare program,” he says.

It figures there will be a greater use of medication, and perhaps a change in the kinds of medication people use. One plan under consideration would increase eligibility for Medicaid. This has implications for pharmacy in that Medicaid typically is more generous than managed care programs in payment to pharmacies.

Medicare recipients, on the other hand, often get drug coverage through Medicare Advantage programs. These plans provide higher levels of coverage, often including protection from the Part D “doughnut hole.” Such increased benefits are made possible through payments that exceed the cost of providing care through the traditional fee-for-service system. All five health reform bills under consideration in late 2009 will remove or reduce the additional payments to managed care, using the revenues to fund reform.

“When that happens, there will be a dual impact,” Stuart reports. “Medicare Advantage will no longer be able to provide the same benefits to subscribers, and some plans will discontinue offering benefits to Medicare enrollees.”

He adds this has become a huge component in the debate,
positive change, we don’t yet know how it will affect insurers for psychiatric conditions,” she says. “While this is an extremely ed for arthritis, but would place limits on medications and care “In the past, many insurers would cover all the drugs need-

“In the past, many insurers would cover all the drugs needed for arthritis, but would place limits on medications and care for psychiatric conditions,” she says. “While this is an extremely positive change, we don’t yet know how it will affect insurers

with some saying it will amount to a tax increase for those insured by Medicare Advantage plans, and others pointing out such plans offer benefits not available to every Medicare recipient.

Stuart serves as one of 17 members of the Medicare Payment Advisory Commission (MedPAC), a congressional group reporting to the Senate Finance and House Ways and Means committees. “The commission has a long-standing recommendation that Medicare Advantage plans be paid at the same level as fee-for-service,” he says. “Our research has shown these plans to be an expensive way of getting extra benefits that are not commensurate with the additional cost to government.

“The argument that this would impose an added tax implies it’s possible to improve the position of some people without impairing the position of others. That concept is nonsense. The real issue comes down to a tradeoff, and whether or not gains offset the losses,” Stuart says.

Palumbo reports the School’s impact on policy is evident in its Maryland P3 (Patients, Pharmacists, Partnerships) Program, an initiative modeled after one in Asheville, N.C. The program provides pharmacist services to directly manage the drug therapy of patients with chronic diseases such as diabetes in selected self-insured companies. Currently there are seven self-insured employers in Maryland and Virginia participating.

“The program has proved enormously successful in managing a serious chronic disease like diabetes,” Palumbo says. “One measure of that success is that we’re now expanding to other employers and other disease states.”

Although the annual cost in lost productivity due to psychiatric illness and drug abuse exceeds $170 billion, mental health and substance abuse parity remains a sidebar in the health care debate. Linda Simoni-Wastila, PhD, BSPharm, a professor in PHSR, is committed to changing that dynamic.

“Most of the focus is on non-psychiatric illness,” she says. “However, there are a few advocacy groups, such as Mental Health America, with which I’m affiliated, that are raising awareness.”

Simoni-Wastila reports a new bill, the Mental Health Parity and Addiction Equity Act of 2008, to be implemented in 2010, is a step in the right direction. The law dictates that any private insurance provider that covers psychiatric and/or substance abuse must reimburse those services at the same level as any physical condition.

“In the past, many insurers would cover all the drugs needed for arthritis, but would place limits on medications and care for psychiatric conditions,” she says. “While this is an extremely positive change, we don’t yet know how it will affect insurers

that previously provided no mental health services.”

The problem is a complex one, Simoni-Wastila explains. Many disabled people become heavy users of mental health services and are addicted to drugs and alcohol. They are exempt from the Mental Health Parity Act because it covers only private insurance programs, not Medicare or Medicaid. The challenge for these enrollees is finding a mental health provider that accepts those government programs.

Reform efforts by Simoni-Wastila involve moving mentally ill and substance abuse patients with no insurance into the umbrella being designed by Congress. So far, the House bill has a parity provision that covers all, while the Senate is still looking at a few approaches, some that include exemptions not only for small but also for even larger employers.

How critical is such coverage to health care reform? “One in four persons with no current health insurance struggles with mental illness or substance abuse,” Simoni-Wastila says.

“These people die on average 25 years earlier than others. They haven’t been treated for their depression, bipolar disorder or cocaine habit. But these aren’t the conditions that kill them. They die from cancer, heart disease, and diabetes, just like the rest of us—simply because they don’t have any way to take care of themselves.”

The School’s program on behalf of reforms benefiting those with substance use and psychiatric disorders will be expanded by the 2010 opening of a School-based center for addiction research and education excellence that will bring together the policy expertise in PHSR with that of the practicing pharmacists in the School’s Department of Pharmacy Practice and Science and the basic scientists in its Department of Pharmaceutical Sciences.

Chair of the center’s PHSR division, Simoni-Wastila says the center, which will be co-chaired by a member from each department, will undertake an ambitious agenda establishing the School as the primary leader in the substance abuse field throughout the state. Nationally, the School also will remain engaged in the health care reform debate.

Stuart contends that Medicare has an enormous cost problem that will be eased but by no means eliminated by reducing payments to Medicare Advantage providers.

“Our current emphasis at the MedPAC commission is to determine the future of Medicare once reforms are in place,” he says. “That’s not easy to do when the ink is still wet, in fact invisible, in some important elements of the plans.”

Meanwhile, voices on behalf of pharmacy, perhaps not as loud as others, have taken a persuasive advocacy position in the debate, one determined to ensure equitable drug coverage as an integral component of health care reform. ✪
Imagine for a moment a recently diagnosed asthmatic. After leaving the physician’s office, she picks up her inhaler from the pharmacy and goes home. But when she needs to use the inhaler, she does it incorrectly, making the medicine ineffective. So the patient finds herself struggling to breathe as she is driven to the emergency room of her local hospital. Afterward, she is saddled with an enormous hospital bill that might have been avoided by a short conversation with her pharmacist on how to properly use her inhaler.

As the nation debates health care reform, pharmacists are the best health care professionals for the government and patients to look to for affordable access to health care solutions. Pharmacists are an often underutilized resource for education, disease state, and medication use management. Empowered to offer more patient education on issues such as medication compliance and adherences and administration of preventive medicine like the flu vaccines, pharmacists can play a vital role in decreasing visits to emergency rooms and creating healthier communities. In this way, pharmacists are essential to creating a more efficient, cost-effective, and egalitarian health care system.

The University of Maryland School of Pharmacy is training future and practicing pharmacists to be at the forefront of this dynamic health care climate through two approaches: a course in Effective Leadership and Advocacy (ELA) for emerging practitioners and with advanced practice continuing education for those already in practice.

The School of Pharmacy is proactively tackling the issue of advocacy at both the state and the federal levels, particularly through its ELA course, taught collaboratively with Virginia Commonwealth University’s (VCU) School of Pharmacy. This course shapes a new generation of leaders who draw attention to the importance of the pharmacy profession and the impact it can have on major issues such as the national health care debate.

“The need for pharmacists and nonpharmacists alike to take on leadership and advocacy roles has never been more acute,” says William Lang, MPH, vice president of policy and advocacy for the American Association of Colleges of Pharmacy. “The pharmacist can do much to create support for a reorganized system that is team-based and patient-centered through the dissemination of evidence to policymakers, as long as that evidence is well-grounded within an appropriate research methodology. Pharmacists must prove that they add value to the health care equation in a manner that cannot be substituted by another health professional.”

The School created the ELA course in 2002 to give students the voice that will awaken lawmakers and community members to the broadening role of pharmacists. Maryland’s program was one of the first of its kind, and its creators often mentor other schools as they develop similar curriculums. In 2007, School of Pharmacy faculty Cynthia Boyle, PharmD ’96, FAPhA, and Robert Beardsley, RPh, PhD, MS, and VCU Associate Professor David Holdford, PhD, MS, BSPharm, co-authored *Leadership and Advocacy for Pharmacy* to assist fellow educators.

In the class, students explore different leadership styles and
Each year we offer the course and it is always timely. Last year [it was] national elections. This year it’s health care reform.

—Cynthia Boyle, PharmD, FAPhA

assess their personal approach to leading. In addition, students learn about the legislative process. They draft unsent letters to state and federal representatives and practice properly greeting and addressing public figures, even participating in an etiquette dinner to learn proper table manners for large receptions.

Taking advantage of the School’s close proximity to Washington, D.C., the course welcomes legislators and pharmacy lobbyists as guest speakers. Students go to the nation’s capital in the fall to meet with members of Congress. Then in February, they head to Annapolis, the state capital, for Maryland Pharmacy Legislative Day to meet with members of the General Assembly.

“Each year we offer the course and it is always timely,” notes Boyle, an associate professor in the Department of Pharmacy Practice and Science (PPS) and director of the School’s Office of Experiential Learning. “Last year people were in the middle of campaigning for national elections, so the candidates were the focus. This year it’s health care reform. More than ever legislators want to meet with their constituents.”

A ‘VIGILANT’ PURSUIT

The course looks at leadership and advocacy as broad principles, acknowledging that someone joining a Parent/Teacher Association can be just as effective an advocate for pharmacy as someone who writes a letter to his or her legislator. Hence, ELA has a service-learning component that gives students the chance to interact at a community level. In recent years, students have led health promotion activities at an elementary school and volunteered at health education seminars throughout the community.

When they leave the class “the students are aware that they have to be constantly vigilant,” says Boyle. “As a health professional that means being a member of an organization, paying attention to government list-servs, being active in a local association, being known to their legislators, and being a resource for them.”

According to Beardsley, co-course master and a professor in the Department of Pharmaceutical Health Services Research, many budding pharmacists want to enact change, but don’t know how. “I think students leave the class more willing to get involved because they understand the process better,” he says. “They understand how relatively easy it is to have an impact.”

Brittany Farrugia, a third-year PharmD student, took the ELA course in 2008 to pursue her interest in leadership and to refine her knowledge of advocacy. She’s now a teaching assistant for the class. Visiting Capitol Hill and speaking to legislative aides about pharmacy ignited Farrugia’s interest in leading a call for change.

“Advocacy has become a passion of mine since I took this class,” she says. “I want so much for our profession. I understand the potential pharmacists have to make a huge impact in people’s lives, but unfortunately we can’t make that impact if the law won’t allow us to. The fact that it’s so easy to make a difference has made me want to make a mark on the profession.”

The course has been taught in collaboration with VCU’s School of Pharmacy for several years. This partnership brings together faculty with diverse backgrounds. For example, Gary Matzke, PharmD, FCCP, FCP, FASN, a professor and associate dean for clinical research and public policy at VCU, lends the added credential of having served as a congressional health policy fellow on the Senate Committee on Health, Education, Labor, and Pensions from 2003 to 2005. He also helped found the country’s first pharmacy health care policy fellow program in 2006.

“The [University of Maryland] faculty have been outstanding contributors and they have worked diligently to synergize this process,” says Matzke. “At any institution, it’s unusual for so many folks to be focused on leadership and advocacy. Maryland is clearly at the forefront of that process.”

FRONT-LINE REFORM

A result of advocacy and outreach is that the definition of “pharmacy” is changing and growing. As pharmacists gain experience in directed services, the School is committed to providing continuing education in areas that support this expanding practice.

“Any meaningful reform will involve changes to how medi-
cations are used and how they are being paid for, both by uninsured as well as federally and privately insured individuals, and pharmacists will need to be aware of all those areas,” says Jason Noel, PharmD, an assistant professor in PPS and director of the continuing education program.

“The strategic goal for continuing education is to advance the practice of pharmacy in the health care setting,” explains David Roffman, PharmD ’73, BSP ’70, a professor in PPS and past associate dean of academic affairs.

The School is breaking the model of traditional continuing education courses, which typically are content-oriented with lectures on disease states, and moving toward certificate programs in areas such as immunization and medication therapy management that impart knowledge and skill sets that participants can perform in their practice.

Perhaps the most successful example of this is the Pharmaceutical Care for Patients with Diabetes program offered by the School. This certificate course, approved for 23 hours of continuing education credit by the American Pharmacists Association, teaches pharmacists how to counsel patients about managing their diabetes and teaches skills such as how to show a patient the proper usage of a glucose meter.

“The diabetes model is the best model to talk about reform,” Roffman continues. “Demonstration projects have shown that if pharmacists get involved with patients—to help them more tightly control their blood sugar, to talk to them about diet, to talk to them about the best way to administer their medication, and how often they should monitor their blood sugar—they can decrease the rate of hospitalization for diabetic patients. It’s hospitalization that’s the most expensive part of delivering health care in this country.”

Similar positive results have been found in demonstration projects involving pharmacists’ intervention in patients with heart failure.

While the School moves forward with advanced practice certificate programs, it continues its commitment to providing basic information that affects daily pharmacy operations. This is perhaps most notable with regard to recent concerns about influenza. In October, the School co-sponsored an influenza training program for pharmacists at the Universities at Shady Grove with the Montgomery County Department of Public Health to discuss preparedness for a flu pandemic. The program drew an audience of 100 pharmacists.

“The goal was to explain to pharmacists what their role can be in the event of an outbreak,” says Noel. “In the community setting, it can involve serving as front-line immunizers, especially to high-risk patients, or providing education to patients on influenza prevention. In a hospital setting, pharmacists can ensure that patients and essential employees receive the vaccine by procuring enough supply in the event of a shortage.”

Noel points out that continuing education is not only about improving care to pharmacy patients, but also expanding it, thereby reducing the strain on the broader health care system.

“As pharmacists gain practical skills in disease and medication management and are more competent to deliver those services and know how to market those services, that will increase health care to many individuals who would not normally have access to those services.”

As pharmacists gain these advanced practice skills, the next step is to improve reimbursement to pharmacists for the delivery of this level of care. According to Roffman, this reimbursement would still be cost-efficient and go a long way toward reducing the expensive major medical interventions that weigh heavily on the current health care system.

“The recognition that there are clear demonstration projects like the diabetes initiative that show cost savings, that needs to be raised to the level where legislators see the importance of pharmacists providing these services and the benefit that would have on the cost of health care,” says Roffman. “If the profession could mobilize better, pharmacists could be a big help to many of the problems we’re facing in health care today.”

With the simplest of interventions—explaining to a patient the importance of staying on a medication or administering an influenza vaccine—pharmacists help create healthier communities that spend fewer dollars on expensive interventions. Through its programs, the School of Pharmacy is ensuring that the contributions of pharmacists also stay at the forefront of the national agenda.

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Front and Center

CIPS fortifies pharmacists’ case for larger role in health care.

BY ROBYN FIESER

From helping patients manage chronic diseases to vaccinating the elderly against seasonal flu, pharmacists have long been more than medication dispensers. Now, a School of Pharmacy center is demonstrating that pharmacists may also be key to solving the nation’s health care cost crisis, the issue at the center of the health care reform debate.

With reform-minded lawmakers and government officials looking for innovative ways to increase access to health care services and cut the nation’s health care bills, little focus has been paid to the role pharmacists can play. But Magaly Rodriguez de Bittner, PharmD ’83, BCPS, CDE, chair of the Department of Pharmacy Practice and Science (PPS), says research housed at the School’s Center for Innovative Pharmacy Solutions (CIPS) proves pharmacists can play a major role in increasing access to care, cutting health care expenditures, and improving patients’ clinical outcomes.

“We know drugs are an effective way of treating diseases, and we also know that pharmacists can make significant contributions to make them even safer and more effective while decreasing the cost of health care,” says Rodriguez de Bittner, interim director of the center.

Take diabetes, for example, which costs an estimated $174 billion a year and affects about 24 million people. Traditional treatment may cost about $6,650 per patient each year. But under the Maryland P3 (Patients, Pharmacists, Partnerships) Program, administered by CIPS, pharmacists help patients manage the disease by coaching them through diet, exercise, regular testing, and medication management. Data from the Diabetes Ten City Challenge, of which P3 was a site, shows the total average health care cost per patient dropped by nearly $1,100.

The Maryland P3 Program is an example of how pharmacists can become the point of contact for patients dealing with lifelong ailments. Across the country, 92 percent of the population lives within five miles of a community pharmacist. Unlike physicians’ offices or hospitals, which may be towns away, local pharmacies are in a patient’s neighborhood.
“The pharmacist is the most accessible health care provider in the community, people go to their pharmacist,” says Rodriguez de Bittner. “Pharmacists are drug experts and can be a solution to the management of chronic diseases. So why not create innovative health care models in which patients get assigned to a pharmacist who, in collaboration with the patient’s health care provider, becomes their coach? This way pharmacists make sure they stay on track, are adherent to their medications, get their lab tests, see their podiatrist, and have their eyes checked.”

Rodriguez de Bittner believes CIPS has a handful of programs, such as P3, that fit squarely in the national debate on how to reform the health care system. CIPS is “filling the gaps” in the health care system, she says. “Health care reform is not going to be effective unless patients have access to services that are a team approach that includes pharmacists.”

CRITICAL COMPONENT

One of the biggest expenses incurred by patients across the country and a flashpoint in the debate over how to cut health care costs is the management of medication. As Americans suffer from more chronic illnesses than ever before, medication use is on the rise. Seniors, for example, use an average of eight medications. Medication errors injure 1.5 million people and cost billions of dollars annually.

A number of CIPS faculty play a vital role in ensuring patient wellness while reducing costs and preventing medication error through collaborative drug therapy management with physicians.

For example, Charmaine Rochester, PharmD, BCPS, CDM, CDE, an associate professor in PPS, manages patients with metabolic syndrome and tobacco use and dependence. She runs a smoking cessation program under collaborative protocols with physicians at the Joslin Diabetes Center and the People’s Community Health Center in Baltimore, which cares for underserved city residents. Pharmacists work with patients in both programs to develop an individualized treatment plan that includes everything from medication and laboratory monitoring to weekly support groups that encourage lifestyle and behavioral changes.

“Our group classes are very practical. We bring in grocery items and teach patients to read the labels and make healthy choices,” says Rochester. “We talk about the importance of exercise and how to reduce stress. And we monitor, discontinue or change their medications to avoid dangerous drug interactions or inappropriate or ineffective therapies.”

Patients in the program have lost significant weight, quit smoking, and improved their cholesterol, blood pressure, and blood sugar readings over a three- to six-month period. Patients receive certificates at the end of each six-month period for achieving or maintaining their treatment goals.

The School of Pharmacy also is spearheading a multi-faceted approach to improve medication management and care to residents in assisted living facilities (ALFs) throughout the state. A work group led by Nicole Brandt, PharmD ’97, CGP, BCPP, an associate professor in PPS, is measuring the effectiveness of a new state law that requires pharmacists to conduct medication reviews at Maryland’s assisted living facilities. The group—composed of faculty from the School of Pharmacy and the University of Maryland School of Nursing and representatives from the state boards of pharmacy and nursing—was brought together to evaluate whether a pharmacist’s involvement can reduce medication-related problems while also cutting costs at the facilities.

The group has worked with the state Office of Health Care Quality, which has been essential in the development of the regulations and in assisting with the education of the ALFs in order to ensure compliance with the regulations. To date, the work group has conducted numerous educational programs on the regulations for pharmacists, nurses, and ALFs. The next step is to develop a standardized data collection tool for pharmacists to share their recommendations and their impact on patient and medication safety.

“This project is a culmination of the impact health care policy has on the growing role of the pharmacist in health care reform,” Brandt says.

CIPS provides potential models for the state and beyond by positioning pharmacists at the center of improved patient care. Vaccines, for example, have been shown to cut the prevalence of common illnesses—such as the flu—which can be costly
and burdensome to employers, insurers, patients, and their families. Despite their successful track records, only 60 percent of people age 65 and older receive a flu vaccine. Experts say access is a major reason why.

The School of Pharmacy immunization program shows that pharmacists can fill in where traditional medical outlets don’t always reach. Under the program, hundreds of students and practicing pharmacists are trained to administer the three vaccines permitted under Maryland state law—for influenza, pneumococcal, and herpes zoster (shingles).

The training, which will soon become a part of the required coursework for new pharmacy students, involves an eight-hour live course that provides an overview of vaccine-preventable diseases in addition to the regulatory, legal, and financial aspects of implementing vaccinations in a pharmacy practice. To be able to immunize, students must complete an additional 12 hours of self-study and become certified in CPR.

The training “is pretty popular considering most chains have really delved into providing immunizations in their pharmacies. Since we started in 2005 we have trained more than 500 pharmacists,” says Cherokee Layson-Wolf, PharmD ’00, an assistant professor in PPS who oversees the immunization program.

Chain pharmacies now routinely offer vaccines. But the trend began with independent pharmacies as a way for pharmacists to expand their business. The immunization program demonstrates how pharmacies can become the hub for a myriad of services.

“Usually there are two counters between you and the pharmacist, but providing immunizations really puts the pharmacist front and center in terms of making patients see that they have a wider role than just dispensing medications. All of a sudden, their pharmacist starts immunizing, and I think that blows the patient’s mind because they think, ‘I didn’t know you could do this,’” says Layson-Wolf. “They just don’t realize what pharmacists can do.”

Layson-Wolf coordinated the School’s efforts to organize seasonal influenza vaccine clinics on the University of Maryland, Baltimore campus. Approximately 450 faculty, staff, and students from the professional schools on campus were vaccinated at two clinics held in September and October in cooperation with Walgreens and Shoppers.

ADVOCATING FOR A SEAT AT TABLE

For its part, CIPS is not only trying to change the perception of the pharmacist for patients. The center also is working with lawmakers, health insurance companies, and other health care providers to push for an expanded role for pharmacists through research and innovative program design.

The center is planning conferences to make the case with state legislators and health care plan officials that pharmacist-provided care is a crucial component of health care reform. Rodriguez de Bittner, in partnership with the American Pharmacists Association, has sent letters and provided research on Capitol Hill to push for an expanded role of pharmacists in health care reform.

CIPS also is working to find alternative ways for its vital services to be compensated. In doing so, it has a concrete example of how a system might work.

As a cornerstone program of CIPS, the Maryland P3 Program already has proven effective in treating cardiovascular diseases and diabetes in the state, where it started with just one employer four years ago in Western Maryland. The program, which now has six employers and more than 400 participating patients, is being expanded throughout the mid-Atlantic region.

It works through an agreement between public and private employers, local pharmacists, and diabetes patients who go directly to pharmacists for diabetes management. The School’s PPS department coordinates the partnership, manages the program, and trains the pharmacists. Employers, instead of incurring health insurance cost increases, pay a fee directly to the pharmacists (through a network run by the Maryland Pharmacists Association) to defray costs. In one year, one of the employers, which now has 35 participants in the program, saved $62,336, about $3,280 per patient for its first 19 enrollees.

CIPS, Rodriguez de Bittner says, is poised to become a state-of-the-art center where hospitals, health care plans, and employers can come looking for health care solutions and develop innovative programs, such as P3, that utilize pharmacists to address a wide range of illnesses.

“From medication management therapy to chronic disease management, pharmacists provide critical services that need to be a part of any health care plan,” she says. “I know that CIPS will be nationally recognized as the place at the forefront of solving health care issues by utilizing the knowledge and skills of pharmacists as medication experts.”

Photograph by Robert Burke

PharmD student Matthew Way vaccinates Maria Schwartz at a UMB flu shot clinic under the direction of Walgreens pharmacist Amy Vu, PharmD.
Connie Mitchell, the indefatigable program administrative specialist of the School of Pharmacy’s Maryland Poison Center (MPC), has an irrepersible urge: “I must do something for the community to help those less fortunate, those kids who are at risk and who might lose their lives because of a reckless, split-second decision,” she says.

Mitchell, who joined the MPC in 1998, skillfully handles her many work responsibilities providing administrative support to MPC’s faculty and staff, supervising support staff, maintaining financial records, overseeing daily operations, volunteering at health fairs, and “putting out fires.”

She also works tirelessly for community outreach programs through the University of Maryland, Baltimore (UMB) and its surrounding community.

As a member of the UMB Outreach Council, Mitchell helps plan activities linking public school children with UMB’s health education and career exploration programs. She mentors teens in YouthWorks and in Start on Success, programs offering work-based opportunities for youths; collects gifts for community and prisoners’ families at Christmas; and serves dinner with the MPC at the Ronald McDonald House.

Hold on, there’s more ...

In the Baltimore community, Mitchell has founded a prison ministry at Ark Church in East Baltimore, organized workshops for families who have a relative in prison, and coordinated community health fairs and annual cookouts. She is an advocate for several organizations that address violence in Baltimore City, such as Survivors Against Violence Everywhere and Take Back the City. In addition, she is a member of Families Against Mandatory Minimums, a group lobbying for the rights of first-time offenders, particularly women, who are jailed for extended periods of time.

“Perhaps her greatest achievement is the establishment of the Darrell DeShawn Mitchell Memorial Scholarship Foundation,” says longtime friend and colleague Lisa Booze, PharmD, clinical education coordinator for the MPC.

“This scholarship program was created in memory of Connie’s 16-year-old son who was murdered in 2003.”

Since 2004, Mitchell has raised more than $9,500 in scholarship funds to help with the cost of college or higher education for high school seniors in Baltimore.

“My goal is to be able to raise enough yearly funds to help at least 10 students per year from all over Maryland,” says Mitchell, who donates every penny of the monies to recipients. “Youngsters need to know there’s more to life than just the corners or their neighborhood. They need opportunities,” she says.

Despite all these efforts, Mitchell says she was surprised when she was honored with the 2008-2009 University System of Maryland Board of Regents’ Staff Award for Extraordinary Public Service to the University or the Greater Community, as well as with the 2009 UMB Public Servant of the Year Award.

“I never expected such recognition,” she says.

Mitchell has another son, Ronald Mitchell, age 37; a daughter, Terrell Mitchell, 39; and a grandson, Ronald Mitchell III, 18. For fun she loves to dance—especially line dancing—and read books about health and spiritual encouragement.

Says Booze: “Connie is an outstanding asset to the MPC, the School of Pharmacy, the University, and the Baltimore community.”

Award winner Mitchell (center) poses at the Founders Gala with, from left, UMB President David J. Ramsay, DM, DPhil; Lisa Booze, PharmD; Dean Eddington, PhD; and Bruce Anderson, PharmD.
Mainstays

A Breath of Fresh Air
BY LYDIA LEVIS BLOCH

Mona (Gold) Tsoukleris, PharmD, BCPS, never imagined that a continuing education class she took after she was already practicing would change her life. But following her instructor’s advice, Tsoukleris, an associate professor at the School of Pharmacy, asked her next asthma patient how he used his inhaler.

“My patient, a 60-year-old veteran, laughed, saying he’d been using his inhaler longer than I was alive,” recalls Tsoukleris. However, he was making every mistake possible, so she showed him how to use the device properly.

At his next visit, the patient exclaimed, “The inhaler’s been working much better. I feel great.” It was at that moment that Tsoukleris knew she had found her calling. “Fixing one little mistake can make the difference between life and death,” she says.

Since that day, Tsoukleris’ research in the Department of Pharmacy Practice and Science (PPS) has focused on optimizing the use of asthma medication, particularly among underserved urban children with the disease. Her goal is to improve medication use and inhaler technique through patient-focused and health care provider-focused interventions.

Tsoukleris is collaborating with Mary Bollinger, DO, an immunologist at the University of Maryland School of Medicine, and Arlene Butz, RN, ScD, MSN, a professor at the Johns Hopkins University Schools of Medicine and Nursing, on research grants to evaluate adherence and communication interventions in asthma.

“Considering that almost all deaths from asthma can be prevented, it is heartbreaking seeing a child die from asthma,” she says of the disease, which claims more than 3,000 U.S. lives a year.

This year, Tsoukleris, who received her PharmD degree from the School of Pharmacy in 1987, marks her 20th year working in PPS. She says her most rewarding experiences so far are: helping students overcome their occasional lack of confidence; feeling she has made a difference in the life of a patient; and participating in the establishment of the University of Maryland Breathmobile. The fully equipped van brings asthma specialty care to Baltimore public school children during school hours.

“Those of us who know Dr. Tsoukleris admire her passion for patient care and the education of students and health care professionals,” says Magaly Rodriguez de Bittner, PharmD ’83, BCPS, CDE, professor and chair of PPS. “She’s a dedicated teacher, practitioner, scholar, and colleague who has impacted the care of patients with asthma and chronic obstructive pulmonary disease through her research and service.”

Tsoukleris has worked on countless University committees and has lectured extensively on asthma at national and international venues. She also has served on the Maryland Department of Health and Mental Hygiene’s Asthma Task Force, as well as with the Baltimore City Health Department’s Asthma Surveillance System Team.

In 2002, she was selected by her colleagues to receive the American Association of Colleges of Pharmacy’s Teacher of the Year award for the School of Pharmacy. She won the Volunteer Service Award for Excellence from the Asthma and Allergy Foundation of America, Maryland Chapter several times in the 1990s.

Outside of work, Tsoukleris enjoys life with her husband and two cats, and her hobbies are water- and snow-skiing.

Lynn McPherson, PharmD, the vice chair of education in PPS, says, “Dr. Tsoukleris is a role model to our younger faculty members because of her obvious commitment to her profession, patients, and students.”
Laurels

Department of Pharmaceutical Sciences (PSC) graduate students Lisa Bareford, Tatiana Claro da Silva, and Wenchi Hsu received Ment Awards from the department’s Graduate Program Steering Committee.

Yang Chang, a first-year PharmD student, completed an internship at the J. Craig Venter Institute.

Ilani Cheng, a third-year PharmD student, co-authored the article “The effects of nanoparticle aggregation processes on aggregate structure and metal uptake” in the Journal of Colloid and Interface Science.

Gaurav Deshpande, a graduate student in the Department of Pharmaceutical Health Services Research (PHSR), gave a poster presentation on “Thiazolidinediones and Bone Loss: A Systematic Review” at the annual meeting of the International Society of Pharmacoeconomics in Providence, R.I.

Emily Dotter, a third-year PharmD student, gave a poster presentation on “Outcomes Associated With Inhaled Polymyxin B for Treatment of Acinetobacter baumannii and Pseudomonas aeruginosa Respiratory Tract Infections” at the 49th annual Interscience Conference on Antimicrobial Agents and Chemotherapy in San Francisco.

Brian Elsworth Jr., a fourth-year PharmD student, received the CVS Caremark Outstanding Intern award for 2008-2009.

PSC graduate student Runyan Jin presented “Population Pharmacokinetics of Ribavirin in Patients With Chronic Hepatitis C Viral Infection Genotype 1” at the 2009 American College of Clinical Pharmacology meeting in San Antonio, Texas.

Nicholas Laughton, a fourth-year PharmD student, has accepted a senior Commissioned Officer Student Training and Extern Program position with the U.S. Public Health Service.

PSC graduate students Seung Jae Lee and Xiao Zhu received fellowships from the department’s Graduate Program Steering Committee.

Ameet Joshi, a fourth-year PharmD student, and James Wang, a third-year PharmD student, were selected for the Baltimore Schweitzer Fellowship Program for their project “One Less, One More—Health Care for Elementary and Middle School Children.”

PSC graduate students Hanpin Lim, Kerrick Nevels, Rana Rais, and Xiao Zhu received Teaching Scholarship Awards from the department’s Graduate Program Steering Committee.

Kelly Martin, a fourth-year PharmD student, and Katie Morneau, a third-year PharmD student, have been selected to serve on the 2009-2010 American College of Clinical Pharmacology Student National Advisory Committee.

Andy Michaelson, a fourth-year PharmD student, was named Student of the Year for the Maryland chapter of the American Society of Consultant Pharmacists. He also received the GGEEAR Award for Excellence in Geriatrics and Gerontology from the University of Maryland, Baltimore.

Hannah Parsons and Amber Todd, both second-year PharmD students, received the Greater Washington Institute of Chemists Student Award.

Jingjing Qian, a PHSR graduate student, completed an internship in the Worldwide Epidemiology Department at the GlaxoSmithKline research and development center.

Emily Reese, a PHSR graduate student, completed an internship in the Office of Clinical Pharmacology at the Food and Drug Administration.

Samantha Shoemaker, a PHSR graduate student, presented “Predicting Enrollment Into the Medicare Part D Low Income Subsidy Program Using Enhanced Financial Indicators” at the Gerontological Society of America’s 62nd annual scientific meeting in Atlanta.

Andrew York, a fourth-year PharmD student, was selected for the Baltimore Schweitzer Fellowship Program for his project “Mini Pharmacy/Health Education.”

Xiaowan “Swan” Zheng, a PSC graduate student, published “Computational Models for Drug Inhibition of the Human Apical Sodium-dependent Bile Acid Transporter” in the journal Molecular Pharmacology.

Class of 2011 Visits Caremark

In September, members of the Class of 2011 visited Caremark in Chicago as part of their class trip to the Windy City. Thirty-five student pharmacists enjoyed a riverboat tour through the city and lots of sightseeing, but also made time to visit Caremark’s mail-order facility.
PSC Team Races for the Cure

Graduate students, faculty, staff, and postdoctoral fellows from the Department of Pharmaceutical Sciences (PSC) ran in the Susan G. Komen Race for the Cure in Hunt Valley, Md., in October in memory of PSC graduate student Brandy Alford, who died in 2009 after a battle with breast cancer. Twenty-eight people, including family and friends, raised $2,687 for the Susan G. Komen Breast Cancer Foundation. Aaron Smith, a graduate student and the team captain, won his age bracket in the race. **

Among those participating in the Komen race were: (back row) Kate Fraser, Abby West, Aaron Smith, Joe Stanton, Sarah Evans, Katherine Joyner and (front row) Jamie Michalek, Angelique Besold, Maura O’Neil.

Students Volunteer at Local School

Members of the School of Pharmacy’s student chapter of the American Society of Health-System Pharmacists partnered with students from the School of Law in September to touch up Diggs-Johnson Middle School in Baltimore as part of a University of Maryland, Baltimore community outreach program. The students painted classrooms, lockers, doors, and more. They also organized a supply room to make it easier for teachers to find their supplies. **

Shown at cleanup day are, from left, Christian Talla, Class of 2013; Margaret Welling, daughter of School of Law faculty member Teresa Schmiedeler; and Caroline Song and Katie Bales of the Class of 2011.

ISPE Conference Scavenger Hunt

Several graduate students from the Department of Pharmaceutical Health Services Research attended the annual meeting of the International Society for Pharmacoepidemiology (ISPE) in August in Providence, R.I. While there, students participated in a scavenger hunt sponsored by the School’s Center for Drug Safety. One of the items on the hunt was to take a photograph with a faculty member from another university. **

Tom MacDonald, MD, of the University of Dundee in Scotland (middle) is flanked by students, from left, Massayo Sato, Xuehua Ke, Guarav Deshpande and Kevin Lu.
Students Celebrate American Pharmacists Month

The School of Pharmacy’s student pharmacists planned a variety of activities in October to celebrate American Pharmacists Month. From health fairs to the annual diabetic Halloween event, student pharmacists were out in full force spreading the word about the expanding role of the profession.

On Oct. 2, 14 of the School’s American Pharmacists Association (APhA) Academy of Student Pharmacists participated in a health fair at APhA headquarters in Washington, D.C. They conducted blood pressure screenings and provided education on the importance of immunizations, proper hand-washing techniques, asthma and smoking cessation, and proper medication disposal. In addition to APhA staff members, staff from the U.S. State Department stopped by the fair.

The Student Government Association arranged for a banner to be hung on the University’s Health Sciences and Human Services Library in October. Students, faculty, and Dean Eddington posed for a commemorative photo.

Class of 2013 Welcomed to the School

The 160 members of the Class of 2013 joined the School of Pharmacy family in August and were welcomed at New Student Orientation, where several members enjoyed lunch with Dean Natalie D. Eddington, PhD ’89 (left). The School’s annual White Coat Ceremony for the incoming first-year class was held in September. Each student received the traditional white coat, symbolic of the health professions, and recited the pharmacist’s pledge of professionalism. Keynote speaker Stephen Wienner, BSP ’91, owner of Mt. Vernon Pharmacy in Baltimore, said the white coat “symbolizes the trust that your patients have in you and your responsibility to uphold that trust.”

Jacquelyn Dempsey and Stephan Cremo recite the pharmacist’s pledge.

Nousheen Nadjmabadi receives her coat from Meghan Sullivan, PharmD, an assistant professor of pharmacy practice and science.
SGA Fall Formal and Picnic

Two autumn traditions for School of Pharmacy students are the annual Fall Formal and Fall Picnic. This year’s formal was held in October at the historic Hippodrome Theatre in Baltimore. With a Roaring '20s theme, students donned flapper gear and celebrated the start of a new academic year. The picnic, also held in October, took place at Cedar Lane Park in Columbia, Md., and featured food grilled by Gary Buterbaugh, PhD, a professor in the Department of Pharmaceutical Sciences (PSC).

Kappa Psi Steps Out to Fight Diabetes

Nearly 81 brothers and pledges from pharmaceutical fraternity Kappa Psi volunteered at Step Out: Walk to Fight Diabetes at Rash Field in Baltimore’s Inner Harbor on Oct. 3.

Students Attend AAPS Annual Meeting

More than 10 graduate students from the Department of Pharmaceutical Sciences attended the annual meeting of the American Association of Pharmaceutical Scientists (AAPS) in Los Angeles in November. Many gave formal presentations or displayed posters on their research.
ASHP Clinical Skills Competition

The School of Pharmacy’s student chapter of the American Society of Health-System Pharmacists (ASHP)/Maryland Society of Health-System Pharmacists hosted its annual Clinical Skills Competition on Oct. 26. The competition facilitates clinical skill development for pharmacy students by encouraging cooperation and teamwork. It is comprised of an interactive, team-based analysis of clinical scenarios for hospital and health system pharmacists to help patients make the best use of their medications. Local competitions are held each fall on college campuses around the nation. Eight teams of two, a mix of second- through fourth-year students, competed this year. The winning team was Mohamed Mohamoud-Haliyeh and Lorena Bagain, both of the Class of 2010, who represented the School at the ASHP Midyear Clinical Meeting in Las Vegas in December.

Shown from the competing teams are, back row from left, Lindsay McCann, Katie Morneau, Erica Swanson, Brian Ellsworth, David Burke, Mike Akers, and Mohamed Mohamoud-Haliyeh. In the front row, from left, are Sheryl Thedford, Allen Tran, Jen Stevens, Lorena Bagain, Allison Kobin, and Ashleigh Vines.

Shady Grove Students Bond at After-School Activities

With 120 students spread over three years at the School of Pharmacy’s Shady Grove campus, extracurricular activities have seen a jump in attendance. Students enjoyed happy hour at Clyde’s restaurant in Rockville and a trip to see the Washington Nationals play, an outing sponsored by Shoppers.

Enjoying the Nationals game, from left, are Vitaliy Nikitenko and Chris Geik of the Class of 2013.

Shown at Clyde’s, left to right in the front row, are Czarlite Ricasa and Deborah Wang of the Class of 2012, and left to right in the back row are Chris Geik, Vitaly Nikitenko, Karen Partlow, Alex Rouse, and Aila Spiegel, all of the Class of 2013.
Two decades ago, Joanne Chang, MD, PhD, was a 29-year-old pediatrician treating some 100 patients a day in her home country of China and wondering how to revolutionize that country’s health care system. Twenty years after she came to the United States with no friends and no grasp of English, she’s at the center of a scientific field that’s changing the way the U.S. treats patients.

The improbability of Chang’s journey, from foreign doctor to U.S. health care specialist, is not lost on her. She says a chance conversation with Donald Fedder, DrPH, MPH, BSP, FAPhA, who recently retired after 35 years as a professor and professor emeritus at the University of Maryland School of Pharmacy, changed her career trajectory.

Chang came to the U.S. to enhance her pediatric training and learn about the health care system as a postdoctoral fellow at the Johns Hopkins University School of Medicine with plans of taking the knowledge back to China. But after talking to Fedder, who would ultimately become her mentor, she pursued a doctoral degree in epidemiology from the Department of Pharmaceutical Health Services Research at the School of Pharmacy, a program that combines science, policy, economics, and a host of other topics.

Today, Chang is a vice president at Novartis, where she heads the company’s evidence-based medicine department. With a team of more than 30 researchers, she is working on comparative effectiveness research and promoting medical innovations with the objective of improving patient outcomes. The research is having a major impact on the way health care decisions are made in the country today.

“The research we do is what is not included in Food and Drug Administration [FDA] trials,” Chang says. “With the FDA, for example, the requirements for approval are safety and efficacy, but what a drug might mean to patients in the long term or in high-risk populations is not evaluated. We do the studies that show what will happen in the real world.”

For example, Chang and her team researched why hypertension patients are prone to not adhering to the medications prescribed to them. Their findings were simple: people who are prescribed multiple medications, as hypertension patients often are, are less likely to take them routinely. Their blood pressure is therefore often not under control and they incur higher health care costs. But the research was instrumental in developing single-pill combination therapies and in developing materials that educate the health care community.

Since graduating from the School of Pharmacy in 1995, Chang has taken on increasingly complex roles within the pharmaceutical industry. She began by conducting clinical trials at Abbott Laboratories and moved quickly to Aventis Pharmaceuticals, where she oversaw the company’s global health economics and outcomes research group. At Bayer/Berlex Laboratories, Chang established the corporation’s U.S. health economics and outcomes research team.

The team she created supported the company’s product development and marketing. In doing so, the team members conducted a comparative study for Kaiser Permanente that looked at Bayer’s new IUD (intrauterine device), a small plastic instrument that contains a progesterone-like hormone. Although more expensive than traditional birth control, it is more effective in preventing unwanted pregnancies and less costly in the long run. The data helped persuade Kaiser to waive the patient’s co-pay for access to the product.

During the course of her career, Chang has published more than 20 articles in peer-reviewed journals and won praise from industry leaders.

“Joanne is super smart, intuitive, and analytical,” says Fedder. “She can see through the issue to guide policy and research.”

Yet Chang, who credits the School of Pharmacy and Fedder for her success, has not forgotten why she first came to Baltimore.

“I loved Baltimore,” says Chang, who is trying to establish a fellowship at Novartis for School of Pharmacy students looking for on-the-job research experience. “And the Maryland program was so attractive because it gave me the research side and the policy side. That was something which I could never have learned in China.”

She still plans on returning to China in the near future to help improve access to health care.
Donor Profile

Terry Crovo, BSP ’80, was an excellent pharmacist who specialized in the practice of oncology pharmacy. With the help of a student award recently endowed by his widow, Patricia Barditch-Crovo, MD, BSP ’78, he will be remembered not just for his knowledge and skills, but also for the passion and humanity he brought to his work.

The memorial award will be presented each year to a graduating senior who best exemplifies Terry Crovo’s qualities: professionalism, a strong work ethic, dedication to pharmacy practice, and sensitivity to the needs of patients.

The Crovos met while both were working at what is now the School of Pharmacy’s Maryland Poison Center, Pat Crovo recalls. “I thought he was just about the kindest, sweetest person I had ever met,” she says. “He was just a wonderful person with a great sense of humor, a good heart, and very smart.” In fact, the year he graduated, Terry Crovo won the School’s Pharmacognosy

Remembering Crovo’s Compassion

By Christine Stutz
(“Weeds and Seeds”) Award for exceptional work in medicinal chemistry and pharmacognosy.

Early in their relationship, she learned that Terry had been diagnosed with Hodgkin’s lymphoma at age 12, a condition that was treated at the time with large doses of radiation. The radiation did considerable damage to his body, and his health deteriorated to the point that he was in need of a heart and lung transplant when he died in July 2007.

Pat Crovo, a physician specializing in HIV/AIDS clinical medicine at the Johns Hopkins School of Medicine, said her late husband’s illness made him a more sensitive and understanding pharmacist. “He went out of his way to make things easier for patients,” she says. “He had real empathy and compassion for his patients.”

When cancer patients were too sick to come into the pharmacy to pick up their medicine, Pat Crovo says, Terry Crovo made a point of going out to the car to speak with them and see if they had questions. He also advocated for patients, assisting them with often time-consuming and frustrating insurance issues. He always took the time to make sure his patients understood complex medication instructions.

As a medical colleague, she says, Terry Crovo was more than willing to answer questions from doctors, nurses, and other pharmacists about drug dosing and drug interactions.

Kelly Shaner-Miller, BSP ’92, met Terry Crovo as a student and went on to work with him in the pharmacy at the Medical Center of Dundalk and Church Hospital. “He was a fabulous teacher and mentor,” says Shaner-Miller, who is now manager of the outpatient pharmacy at Union Memorial Hospital. “Everyone who worked with him loved him. He went out of his way to be helpful.”

Pat Crovo hopes the memorial award will encourage future pharmacists to embrace a collaborative approach to patient care. “The way medicine has evolved over the years, it really requires a team approach,” she says. “There are so many chronic illnesses requiring a myriad of potentially interacting medications, and often more than one physician is involved in prescribing medications.

“The pharmacist sees the big picture and knows what medications the patient is getting. It’s one more level of checks and balances. There are certain things a patient might not ask or tell the physician,” she says, “but they will confide in the pharmacist, especially someone who is kind, accommodating, and knowledgeable—all attributes that Terry embodied.”
If I could use one word to describe our Alumni Association this past fall it would be B-U-S-Y! It seems that no matter where you look, alumni are busy—providing community outreach, sharing professional experience as preceptors, interviewing and mentoring students, serving on alumni panels at School open houses, and participating in career fairs.

It all began in July when the Alumni Association Executive Committee gathered to discuss our goals and plans for the year. One important goal was to involve more students in the association. I am happy to report that at the Alumni Association’s first full meeting in September, each class had a student representative: Kasey Taylor, Class of 2013; Grace Potente, Class of 2012; Katie Morneau, Class of 2011; Erica Swanson, Class of 2010; and Student Government Association President Chai Wang, Class of 2011.

Besides delivering alumni news to their respective classes, these students provide insightful feedback into the programming of alumni events and activities. I welcome them and am delighted that they will be joining us for the year.

In October, Lt. Cmdr. Rebecca DeCastro, BSP ’95, and Cmdr. Catherine Chew, PharmD ’99, chaired a well-attended back to school happy hour at T.G.I. Friday’s in Silver Spring for alumni employed by the U.S. Public Health Service. This event, co-sponsored by the Maryland Pharmacists Association and the School of Pharmacy’s Office of Development and Alumni Affairs, is sure to become an annual activity and is one that I know alumni will look forward to each year.

October also was a time to celebrate American Pharmacists Month and the launch of the first-ever online Alumni Association survey, which many of you completed. The data captured from this survey will serve as a valuable tool for planning the alumni program for 2010. This project was funded by a grant from Alumni Association International. I want to thank our survey committee, Lynette Bradley-Baker, PhD ’99, BSP ’92; Capt. James Bresette, PharmD ’97; Hoai An Truong, PharmD ’05, MPH; and Mandy Kwong, PharmD ’01, for their diligence and dedication in completing this project.

November began with the third annual thank-a-thon hosted by the Alumni Association Executive Committee. Approximately 150 calls were made to thank alumni for their support during Fiscal Year 2009. That support has meant so much to the School during this very difficult time in our economy. Later in the month, alumni gathered to reconnect and reminisce during the American Association of Pharmaceutical Scientists’ (AAPS) Alumni and Friends Reception held at AAPS’ annual meeting in Los Angeles.

Following the final event of the year, the American Society of Health-System Pharmacists’ Alumni and Friends Reception that was held in December in Las Vegas, we began the process of planning for the Alumni Association Graduation Banquet that will be held on May 20. Mark your calendars now. This year’s banquet program will be highlighted by the return of formal recognition for individuals who have been named to receive the annual Evander Frank Kelly Honored Alumnus and B. Olive Cole Honorary Alumnus awards.

Yes, alumni are busy. Even with your commitments to family, friends, and the pharmacy profession, you still manage to find time to demonstrate your pride, dedication, and support for your alma mater. For all you do, I say—thank you!

Sincerely,

Doris Voigt, PharmD ’04
President
**Annual Thank-a-thon**

In November, members of the Alumni Association Executive Committee spent an evening calling alumni who had made a gift to the School within the last six months to thank them for their support.

**Back to School Happy Hour**

It was an evening for relaxation and trivia games for alumni working for the U.S. Department of Health and Human Services at a Back to School Alumni Happy Hour in October at T.G.I. Friday’s in Silver Spring, Md. This event was jointly sponsored by the Maryland Pharmacists Association and the School of Pharmacy’s Office of Development and Alumni Affairs.

**Dean’s Welcome Dinner for the Executive Committee**

In October, Dean Natalie D. Eddington, PhD ’89, hosted a Welcome Dinner for the Alumni Association Executive Committee at Clyde’s in Columbia, Md. At the dinner, the dean expressed her appreciation for the group’s valuable contributions to the School.

**Annual Thank-a-thon**

Alumni Association representatives Chai Wang of the Class of 2011 and Kasey Taylor of the Class of 2013 make calls.

**Wayne Dyke, BSP ’68, mans the phone.**

**Dean’s Welcome Dinner for the Executive Committee**

Members at large Terry Gyi, PharmD ’06, BSP ’83, and Matt Shimoda, PharmD ’84.

**Back to School Happy Hour**

From left, Huijeong “Ashley” Jung, PhD ’02, PharmD ’98, and Misu Ahn, PharmD ’98.

**From left, Hyon-Zu Lee, PharmD ’04; Katie Klemm, PharmD ’08; and Thuyanh Vu, BSP ’94.**

**From right, Bradley Thomas, BSP ’82; Doris Voigt, PharmD ’04; Matt Shimoda, PharmD ’84; Lynette Bradley-Baker, PhD ’99, BSP ’92; Hoai An Truong, PharmD ’05, MPH; and Katie Morneau of the Class of 2011 make calls.**

**From left, Capt. James Bresette, PharmD ’97, member at large, and Michael Steinberg, PharmD ’00, co-treasurer.**

Mandy Kwong, PharmD ’01, member at large, with Lynette Bradley-Baker, PhD ’99, BSP ’92, past president.

Members at large Terry Gyi, PharmD ’06, BSP ’83, and Matt Shimoda, PharmD ’84.

**From right, Bradley Thomas, BSP ’82; Doris Voigt, PharmD ’04; Matt Shimoda, PharmD ’84; Lynette Bradley-Baker, PhD ’99, BSP ’92; Hoai An Truong, PharmD ’05, MPH; and Katie Morneau of the Class of 2011 make calls.**

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AAPS Alumni and Friends Reception

More than 40 PhD alumni and friends joined the School in November at a reception at the annual meeting of the American Association of Pharmaceutical Scientists (AAPS) in Los Angeles. Those in attendance had the opportunity to learn more about the School’s research successes and the vision for the Department of Pharmaceutical Sciences.

Founders Gala

Several alumni and friends joined the School of Pharmacy at the annual University of Maryland, Baltimore Founders Gala on Oct. 19. The event was held at the Hilton Baltimore and recognized the contributions of outstanding faculty and staff and those who support the campus and its schools.

NCPA Alumni Dinner

The School of Pharmacy hosted a special dinner for alumni attending the annual meeting of the National Community Pharmacists Association (NCPA) in October in New Orleans.
In Memoriam

This section is dedicated to School of Pharmacy alumni who passed away between April 9, 2009, and Oct. 3, 2009. The Maryland pharmacy profession is a close-knit community, and we are honored to share the names of recently deceased alumni who have in some way impacted the profession and practice of pharmacy. 🌟

Maurice J. Berman, MD, BSP ’53
Otto K. Boellner Jr., BSP ’47
Jerome S. Friedman, BSP ’48
Bernard F. Grabowski, PhD ’59
James E. Kenny Jr., BSP ’68
Stacy Pass, BSP ’58
Vithalbhai C. Patel, PhD ’63, MS ’59
Karen B. Presswood, BSP ’85
Irving W. Robbins, BSP ’37

If you would like to make a memorial gift, please use the enclosed envelope or call 410-706-5893.

ASHP Annual Meeting

Faculty, alumni, and students gathered in Las Vegas in December for a reception during the annual meeting of the American Society of Health-System Pharmacists (ASHP). 🌟

Karen Nishi, BSP ’80, chats with Robert Beardsley, PhD, a professor in the Department of Pharmaceutical Health Services Research.

From left, Charlene Celano, BSP ’80; Moneil Angeles, Class of 2010; and Alumni Association President Doris Voigt, PharmD ’04.

From left, Ganesh Kumarachandran, PharmD ’09; Kinjal Patel, PharmD ’09; Meera Embran, PharmD ’09; Jae Ryu, PharmD ’08; and Lakshmi Potti, PharmD ’09.

The School’s newest alumni—members of the Class of 2009—catch up during the reception.

WINTER 2010 29
Class Notes

1983
Thomas Patrick Evans, BSP, has been appointed by Gov. Martin O’Malley to the Harford County Board of Education. Evans previously served as the pharmacist representative on the State Advisory Council on Medical Privacy and Confidentiality. He is married to Carolyn Evans and resides in Fallston, Md.

1984
Matt Shimoda, PharmD, has recently joined SuperFresh pharmacies as the pharmacy manager and immunization coordinator.

1988
Butch Henderson, BSP, was installed as president of the Maryland Pharmacists Association (MPhA) at its annual meeting in June 2009.

Wayne VanWie, BSP, was elected vice speaker of the MPhA’s House of Delegates during the annual meeting.

1992
Denise (Seldon) Penn, BSP, is employed with the U.S. Food and Drug Administration and lives in Columbia, Md.

1994
Cheryl (Smith) Melvin, BSP, and her husband, Dana, announce the birth of their first child, Sterling James Melvin, born in August 2008. The family resides in Atlanta, where Cheryl has been employed for the past 10 years as an investigational and staff pharmacist for Piedmont Hospital.

1997
Thomas Cargiulo, PharmD, has been appointed director of the Maryland Department of Health and Mental Hygiene’s Alcohol and Drug Abuse Administration. He is a member of the Institutional Review Board for the National Institute on Drug Abuse and has authored and co-authored several publications about the effects of drug and alcohol addiction and treatment intervention.

1999
Dennis Killian, PharmD ’99, PhD ’01, has been named the director of pharmacy at Peninsula Regional Medical Center in Salisbury, Md.

2002
Carol Stevenson, PharmD, received the 2009 Mentor Award from the MPhA.

Trinh Keelin, PharmD, lives in Columbia, Md., where she is employed as a clinical manager for Catalyst RX.

2005
Shelly Dhir, PharmD, has accepted a position as a regional medical scientist with the HIV division at GlaxoSmithKline.

2007
Latasha Weeks, PharmD, received the Young Pharmacist Award at the National Pharmaceutical Association’s 62nd annual convention in July 2009 in Chicago. The award recognizes eager and effective participation in the affairs of the association and contributions to the profession among pharmacists with five or fewer years of experience.

2008
Marie Ofori, PharmD, married Oluromise Akonai in August 2009. The ceremony took place at the Ghana College of Physicians & Surgeons in Accra, Ghana. The newlyweds currently reside in Frederick, Md.

Save the Date!

2010 Alumni Association Graduation Banquet and Celebration of the 50-Year Reunion Class of 1960

Monday, May 17, 2010 | 7 p.m. – midnight

Martin’s Valley Mansion | 594 Cranbrook Road | Hunt Valley, Md. 21030

Online registration is available at www.pharmacy.umaryland.edu/alumni/. For more information, call 410-706-8019.

We want to know what’s happening with you!

Please send us information about your personal and professional life. Have you changed jobs, had a recent promotion, received an honor or appointment? Did you recently get married or celebrate the birth of a child? Do you have an interesting hobby or participate in community service projects?

Please let us know by completing the School of Pharmacy’s online class notes form at www.pharmacy.umaryland.edu/alumni.
The University of Maryland School of Pharmacy strives to provide you with useful and interesting information in Capsule magazine. We need your feedback in order to make this publication even more effective. Please take a moment to complete this two-page readership survey. It can be returned to: Becky Ceraul, director of communications and marketing, University of Maryland School of Pharmacy, 20 N. Pine St., Room 746, Baltimore, MD 21201. It can also be completed online at: http://www.surveymonkey.com/s/V6YB83N, and will be available until March 16.

1. Please complete the following:
   Name (optional): _____________________________________________________________________________________
   E-mail Address (optional): ______________________________________________________________________________
   Country/postal code:  _________________________________________________________________________________

2. Tell us about yourself.
   You are: ❏ an alumnus/alumna  ❏ a student  ❏ a resident  ❏ a faculty member  ❏ a staff member
   ❏ a donor  ❏ a preceptor

3. What is your graduation year/s (if applicable)?
   Year(s):  _________________________________

4. Gender:  ❏ Male  ❏ Female

5. In what format do you receive Capsule magazine?
   ❏ Print copy via U.S. mail  ❏ E-mail with PDF attachment  ❏ The School of Pharmacy Web site

6. What is your preferred format to receive Capsule?
   ❏ Print copy via U.S. mail  ❏ E-mail  ❏ Web/PDF
   ❏ Through a social media networking site such as Facebook, MySpace or LinkedIn
   ❏ Through a micro-blogging site such as Twitter or an RSS feed

7. We are interested in your online communications preferences for receiving information from the School of Pharmacy. Please check all that apply.

   I prefer to receive information from the School by:
   ❏ E-mail  ❏ The School of Pharmacy Web site  ❏ Networking sites (e.g., Facebook, MySpace, LinkedIn)
   ❏ Micro-blogging sites (e.g., Twitter, RSS feeds)

8. What is your overall impression of the quality of Capsule magazine?
   ❏ Excellent  ❏ Good  ❏ Satisfactory  ❏ Substandard

9. How would you rate the overall length of the articles in Capsule?
   ❏ Just right  ❏ Too short  ❏ Too long
   Comments?  _________________________________________________________________________________________

10. How much of each issue of Capsule do you read?
    ❏ Most of the articles/sections  ❏ Half of the articles/sections  ❏ Few of the articles/sections  ❏ None
    Comments?  _________________________________________________________________________________________

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11. How interested are you in each of the following sections of Capsule?

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12. Would you like any of these categories covered more extensively in Capsule? Check all that apply.
- Dean's Message
- School News
- Basic science stories
- Clinical stories
- Mainstays—faculty and staff profiles
- Donor Profile
- Alumni News
- Development News

13. What, if any, other topics/types of news would you like to see covered in Capsule?

14. What is your impression of the presentation of text, photos, and graphic elements in Capsule?
- Balanced
- Too much text, not enough graphics
- Too many graphics, not enough text

Comments?
____________________________________________________________________________________________

15. How do you use Capsule? Check all that apply.
- To keep informed about School news and events
- To submit updates on my own work that might be of interest to others
- To follow news about peers
- To file for later reference
- Other (please specify) __________________________________

16. Please indicate all the ways Capsule strengthens your personal connection to the School of Pharmacy. Check all that apply.
- Reminds me of my School of Pharmacy experience
- Serves as a source of information and education
- Encourages me to volunteer my time at the School of Pharmacy
- Encourages me to support the School of Pharmacy financially
- Helps me to feel more in touch with my graduating class and peers
- Inspires/reminds me to contact another alumnus/alumna
- Inspires/reminds me to contact a professor or administrator
- Inspires/reminds me to contact the Office of Development and Alumni Affairs or the dean
- Inspires/reminds me to visit the School of Pharmacy Web site
- Inspires/reminds me to submit a class note
- Provides useful career and networking information
- No opinion
- Other (please specify) __________________________________

17. How often does Capsule provide you with news you have not read or heard anywhere else?
- Always
- Sometimes
- Never

18. In closing, how can Capsule be improved?
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Finding Your Place in the Addition

If you’ve traveled down Martin Luther King Jr. Boulevard in Baltimore recently, you’ve probably noticed the rise of Pharmacy Hall Addition on the north side of the campus. After more than a decade of dedicated advocacy efforts from alumni and friends in making this building a reality, the Addition will provide a state-of-the-art setting to showcase the expertise, innovation, entrepreneurial spirit, and leadership of our faculty, graduates, and students.

The anticipation and excitement surrounding the grand opening of the Addition in fall 2010 is palpable for all who have had the privilege to be part of the construction process during the past 18 months. Now it’s your turn to share in this momentum in a very tangible way!

We are so pleased to offer a variety of naming opportunities in the Addition that have been customized for all levels of participation, from current students to our grand alumni. Naming a space in the building is a wonderful way to recognize a graduating student or to honor a legacy alumni family. Demonstrate your pride and show your support for the School of Pharmacy and the profession in a visible and permanent way. The need for scholarships, fellowships, and unrestricted gifts to the School is greater than ever as we compete to attract talented students and faculty who will lead us in shaping the future of the pharmacy profession.

Don’t miss out on this historical opportunity to add your name to the list of those who have partnered in the success of Pharmacy Hall Addition. Please contact one of our staff members listed below to discuss your gift.

In the next few months, we also will be finalizing plans for a host of opening activities in early October designed to celebrate this new building. Mark your calendars now for:

- a grand opening celebration on Oct. 5 for faculty, staff, students, alumni, and friends
- a leadership reception on Oct. 7, where we will recognize contributions of time, talent, and resources
- an all alumni reunion and brunch on Oct. 10 highlighting milestone decade years and the grand classes of 50-plus years

We hope you will join us for these celebrations!

Sincerely,

Michele Y. Ewing
Executive Director
Development and Alumni Affairs

To make your gift now, please visit our Web site at
www.pharmacy.umaryland.edu

or call 410-706-5893 to speak with:
Alison Davitt
Director of Major Gifts
Janice Batzold
Director of Special Gifts and Programs
Peggy Funk
Assistant Director of Alumni Affairs
A variety of opening activities are being planned for OCTOBER 2010.

Mark your calendar now and plan to join us for:

**OCTOBER 5**
10:30 a.m. Special grand opening ceremony
1 p.m. The School's annual Balassone Lecture

**OCTOBER 7**
6:30 p.m. Leadership donor reception

**OCTOBER 10**
11 a.m. to 2 p.m. All alumni reunion and brunch

*Tours of the Addition will be provided at each event.*