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Special points of interest:

- Check out the new forum page on our web site. Post new topics and contribute to on going discussions! <http://nvshp.com/forum>
- Renew your membership today! Visit our website for more information on how to renew.

SAVE THE DATE

Don't miss the 2nd Annual NVSHP Meeting
October 16-17 in Reno, NV
See page 7 for more details!



Message From The President



Kathryn Craven
NVSHP President

I can't believe that in a few short weeks, NVSHP will be having it's Second Annual Meeting. I hope that all of you can take this opportunity to come and visit with other members, as well as learn and participate in the great educational lectures that we have in store for everyone. This summer was very busy for the Education Committee in plan-

ning for what I am sure is going to be a fantastic meeting!

NVSHP membership is fast approaching 200 members. I know that all of our members realize how important having a local professional organization is for them and the profession of pharmacy.

I know that many of you have received emails about nominations for next year's officers. I hope that each of you considered running for a position and if not, I hope that you thought that you might want to get more involved in helping NVSHP become an even better organization next year by volunteering for a

committee. Getting involved definitely has its rewards in knowing that you have helped the organization become stronger. And getting involved is easy, please just send me an email at khc53@embarqmail.com and let me know what you are interested in, which are the Membership, Education, Legislative or Awards and Nomination committees.

In closing, I want everyone to know that I am looking forward to seeing old friends and meeting new friends at the Annual Meeting, I hope to see you there.

Sincerely,

Katie Craven

REGISTRATION DEADLINE

The deadline to register for
the 2009 NVSHP Annual Meeting is
October 9th!!

Register today at www.NVSHP.com

Pandemic Flu and YOU, What you need to know about the H1N1 virus

Author: Christina M. Madison, Pharm.D., Clinical Pharmacy Faculty, Southern Nevada Health District

On June 11th 2009 the World Health Organization (WHO) raised the world wide Pandemic Alert to phase six for the novel H1N1 influenza virus, indicating a global pandemic. This means that there is sustained human to human transmission of the virus into at least two countries and community level outbreaks.

Novel H1N1 influenza, or “swine flu,” is a new virus that is causing illness in people around the world. Novel H1N1 influenza is a “quadruple reassortant” virus that contains two genes from flu viruses present in Asian and European swine, as well as avian genes and human genes. This virus was first detected in the United States in late April of 2009 and became headline news. Initial reports of the virus were linked to those individuals with recent international travel. Transmission of the virus is from person-to-person via respiratory droplets expelled into the air by an infected person. This can occur via speaking, coughing, or sneezing. Transmission can also occur from shaking hands, kissing, or touching surfaces that have recently been in contact with an infected person. The first cases of infected humans in the U.S. were seen in Southern California and southern regions of Texas.

Signs and symptoms of the novel H1N1 virus are similar, if not identical, to those of a seasonal flu. These symptoms include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills and fatigue. Similarly to seasonal flu, severe illness and death have occurred as a result of some novel H1N1 influenza infections. The severity of novel H1N1 influenza virus infection in the general population is still unknown at this time. Based on the way the virus is currently behaving in the southern hemisphere the severity of illness is similar to that of seasonal flu. The Centers for Disease Control and Prevention (CDC) have based their guidance on 2 scenarios that include the possibility of a more severe presentation of disease. The individuals that have had complications from infection with the novel H1N1 influenza virus are atypical from that of seasonal flu. The virus seems to be targeting school age children, young adults, pregnant women, and adults under the age of 60 with chronic health conditions. Unlike seasonal flu, there have been few cases and no deaths in older adults over the age of 60 years.

To date, the largest numbers of confirmed and probable cases of the novel H1N1 influenza infection have occurred in individuals 5 to 24 years of age. Due to these distinctive differences, the CDC have been conducting laboratory studies to determine if certain individuals have innate immunity to the novel H1N1 influenza virus. The earliest reports have indicated that no children and few adults less than 60 years of age have existing antibodies against the novel H1N1 virus; however, nearly one-third of adults older than 60 years of age have been shown to have antibodies against the novel H1N1 virus. The amount of protection the existing antibodies offer to these individuals is still unknown.

Vaccine development is currently underway. The earliest release of the novel H1N1 influenza vaccine is estimated to be in early to mid October of this year. Initial reports from vaccine clinical trials reported by the department of health and human services on September 11th, 2009 indicate that one dose of the vaccine may be adequate and could confer immunity within 10 days of receiving the vaccine. At this time the CDC has not made an official statement regarding the number of doses needed of the vaccine. A final statement will most likely be made when clinical trials have been completed. The amount of available vaccine to the general public is still unknown and based on this information the CDC released priority groups for those individuals how should receive the novel H1N1 influenza vaccine first. The priority groups are as follows: Pregnant Women, household contacts and caregivers for children younger than 6 months of age, Healthcare workers and emergency medical services personnel, all persons from 6 months to 24 years of age, persons aged 25-64 years of age who have health conditions associated with high risk medical complications from influenza.

Vaccine supply will most likely be limited upon initial release but the goal is to make sure that everyone will be immunized. The vaccine will be supplied by the federal government and will be free of charge. Although there is no cost for the vaccine, health care facilities may charge an administration fee. Currently, treatment and prevention of novel H1N1 influenza virus is the same as that of seasonal influenza. There are currently no reports of antiviral resistance transmission of the novel H1N1 influenza virus. Treatment includes one of two antiviral agents, Tamiflu® and Relenza®. At this time ONLY treatment is recommended, NOT prophylaxis.

Pandemic Flu and YOU (continued)

Those who exhibit signs of a febrile flu like illness should stay home from school or work and not attend large gatherings. The CDC recommendation is to stay away from others (self-isolation) for at least 24 hours after fever has resolved or the use of fever reducing agents is no longer required. The most important decision the public can make is to get vaccinated against seasonal influenza. At this time there are little signs to distinguish between novel H1N1 influenza virus and seasonal influenza virus.

In regards to seasonal flu, the severity can range from mild to severe. Those at greatest risk for severe seasonal influenza infection are children under 5 years of age and people over the age of 65 years. Conditions such as pregnancy and chronic illnesses like asthma, diabetes, and HIV/AIDS are also linked to higher rates of infection with more severe complications. Approximately 36,000 people die from seasonal influenza related complications in the U.S. and more than 200,000 are hospitalized annually. Approximately 10% of those hospitalized are children under 5 years of age. Greater than 90% of deaths and approximately 60% of hospitalizations afflict adults over the age of 65 years.

The CDC predicts there will be more infections, more hospitalizations, and more deaths associated with the novel H1N1 influenza virus throughout the fall and winter. Based on the reported cases thus far, the novel H1N1 influenza virus does not seem to be causing severe illness in a majority of those infected. Although the virus does not seem to be as severe as initially feared, there is still great concern due to the combination with the seasonal flu posing a serious and significant threat to the population.

The initial response from the CDC's division of the Strategic National Stockpile (SNS) released a portion of the antiviral agents out to state agencies to assist in the response to the novel H1N1 influenza virus. The determination of the release of additional antiviral medication and other resources will be made base on the disease progression and severity in the community. State and local agencies have been planning for this type of event for several years. The resources are available and there is a plan in place at your county health department to address the needs of the community.

The current recommendation from the CDC is to use personal protective equipment (PPE) such as surgical mask, gowns, and gloves if you are required to be around those who could be infected with the novel H1N1 influenza virus and to stay home if you are exhibiting flu like symptoms. The novel H1N1 influenza vaccine will not be mandated but is recommended for all individuals. Those individuals who have been identified as being in the 5 priority groups designed by the CDC are strongly encouraged to receive the vaccine. The best way to protect yourself and those around you are: cover your cough, sneeze into a tissue and discard immediately, use frequent and proper hand washing techniques (alcohol based hand sanitizers are also effective), avoid touching your eyes, nose, or mouth (transmission can occur via this route), and receive the seasonal flu vaccine between the months of August to November 2009. The county health departments have been offering seasonal influenza vaccine since mid September and most retail chain pharmacies have been offering seasonal influenza vaccine since late August and the beginning of September. The cost of the vaccine varies based on company and location. Those individuals at highest risk of complications from infection should receive the seasonal influenza vaccine as soon as possible. Those individuals identified in one of the 5 priority groups for the novel H1N1 influenza virus should receive the vaccine as soon as it becomes available.

For the most up-to-date information concerning the novel H1N1 influenza virus and vaccine information in your area, visit the Centers for Disease Control and Prevention's website at www.cdc.gov/h1n1flu/, Southern Nevada Health District website at www.southernnevadahealthdistrict.org, or Washoe County Health Department website at www.washoecounty.us/health/.

References:

www.ashp.org

www.cdc.gov

www.southernnevadahealthdistrict.org

www.who.int





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Residency Application Process

Author: Krystal Riccio, Pharm.D.

Applying for the NAPLEX/MPJE exams and residency programs can be daunting for graduating pharmacy students. The following two checklists have been designed to outline the application processes and to help applicants avoid the potential pitfalls.

NAPLEX / MPJE

As Soon As Possible (Earlier completion of these steps may result in an earlier Authorization to Test)

1. Contact the Board of Pharmacy for the state you will obtain your primary license. Make sure your mailing address is up to date with your school and Board of Pharmacy.
2. **Visit the board of pharmacy website for the state in which you will be licensed.** The website most likely contains all the information you will need for the application process. For Nevada, click on the link below to view instructions and application for licensure:

[http://bop.nv.gov/PDFs/ExamineeAPP Interactive.pdf](http://bop.nv.gov/PDFs/ExamineeAPP_Interactive.pdf)

3. Visit the NABP website to register for the NAPLEX (national license exam) and MPJE (state license exam)

<http://www.nabp.net/>

This website is where you can register for your NAPLEX & Primary License State MPJE. You may also choose to score transfer to additional states. Each state has their own requirements regarding testing with score transfers. Check with each board of pharmacy for specifics.

Once NABP has received confirmation of your information, you will receive an email to confirm your registration (this is not your Authorization to Test-ATT)

1. By the day of graduation (if all of your information is correct with your university and your State Board) you will receive an ATT from the testing center
2. Schedule your appointment using their website www.pearsonvue.com/nabp or call Pearson VUE customer service at 1-888/709-2679. It is important to make your appointment as soon as possible in order to ensure early seating for the examination (especially if you're starting a residency in July)!

Your examination score will be provided to you by the board of pharmacy from which you are seeking licensure.

Residency Application Checklist

(Modified from ASHP & National Matching Services)

September

- Submit the resident matching program application agreement form with the appropriate fee
- Begin work on curriculum vitae (CV) and letter(s) of interest (LOI)
- Have preceptors/peers/faculty review your CV and LOI

October

- Review the ASHP Online Residency Directory which provides information on ASHP-accredited residencies.
<http://www.ashp.org/Import/ACCREDITATION/ResidencyDirectory.aspx>
- Request additional information and applications from programs of interest
- Talk with or email current residents regarding their personal experience
- Register to attend the ASHP Midyear Clinical Meeting (MCM); select programs to visit in the MCM Residency Showcase
 - Consider registering for the Personnel Placement Service (PPS) so that you can interview one-on-one with employers at the meeting www.careerpharm.com/
 - Make necessary travel and housing arrangements

November

- Finalize CV and letter(s) of intent; personalize each letter of intent to reflect your interest in each specific residency you are applying to
- Request letters of recommendation (from faculty, preceptors, & employer). Remember to enclose any forms required (many residencies have a preprinted form for the applicant and evaluator to complete). Make sure your references are aware of any deadlines, addresses, contact person, etc. Keep them updated with any changes. You may also want to provide them with your rank order.

December

- Attend the ASHP Midyear Clinical Meeting. Make a plan of which booths to visit.
- Complete all paperwork for applications, including ordering transcripts (transcripts may be ordered earlier to ensure timely receipt. Remember, most universities are **closed** for Winter break)
- Schedule on-site interviews

January

- On-site interviews begin
- Send hand written "Thank You" notes following each interview
- Submit application agreement form to National Matching Services Inc by **January 8, 2010**

February

- Complete interviews. Narrow residency choices to programs that best meet your professional/personal needs and goals
- February 5, 2010**, instructions for submitting Rank Order Lists and obtaining Match results will be available to applicants and program directors registered to participate in the Match

March

- Submit Rank Order Form to be received by National Matching Services Inc by **March 5, 2010**. Do NOT rank any locations you are not willing to do a residency with.
- Receive "Match" outcome at 12 noon Eastern Daylight Savings Time on **March 17, 2010**
- Unmatched residency candidates resubmit application to programs with positions remaining (Scramble)

June

- Study!
- Schedule Testing! (see NAPLEX/MPJE checklist)
- Take NAPLEX & MPJE (It will make your residency go much smoother if you are a licensed pharmacist. You may find earlier testing dates if you take the tests out of state. It is to your benefit that you are licensed before you start your residency.)

July

- Most residencies begin. Congratulations, you are now a practicing pharmacist!

References:

- <http://www.ashp.org/residents?WT.ac=hp%5FPopLinks%5FResident%5FInformation>
- <http://www.natmatch.com/ashprmp/index.htm>

Legislative Update

NVSHP Legislative Committee Conference Calls are the first Friday of every month under the direction of Chair, Shelly Spiro. Upcoming meetings are scheduled for October 2nd, November 6th and December 4th at 12noon. Dial in number is 866-951-1151 and participation code is 6282504#. All NVSHP members are invited to join in! Adam Porath will be our Chair for 2010 and will begin in October as Shelly begins her ASCP Presidency in November. Congratulations and thank you to both Shelly and Adam!

NV Board of Pharmacy (BoP) next meetings are scheduled for October 14-15th in Las Vegas and December 2-3rd in Reno. Our Legislative Committee is represented at these meetings. Interesting tidbits from recent BoP meetings:

- Buprenorphine changed from Schedule V to Schedule III
- Added ICPT for acceptable in-service training for technicians
- Increased license renewal fees for pharmacists, technicians, interns and reciprocity
- Regulations are being developed to structure the new Cancer Drug Donation Program (AB213) for participating pharmacies regarding drugs used to treat cancer
- Regulations for re-issued drugs by nonprofit pharmacies are being reviewed to determine nonprofit pharmacy qualifications

ASHP's State Legislative Conference Calls continue monthly with many state affiliates participating, including Nevada. Recent topics discussed include the Healthcare Reform (medical home, MTM, PGY2 funding restoration), Pharmacy Technician Initiative, NCSL/Alliance for Pharmaceutical Care, Federal Legislation (CMS reimbursement), Regulatory Updates and State concerns (immunization, substance abuse programs).

Nevada Health Care Reform Town Hall Meetings/Calls have been held over the past few weeks by both Senator Reid and Senator Ensign. Shelly Spiro participated in each meeting and provided a brief synopsis of pharmacists' roles in health care and the impact we can make with clinical interventions.

Technician's Corner

The Pharmacy Technician Certification Board (PTCB) on-demand testing is running smoothly. Since June 30th 2009, there are 345,929 certified Pharmacy Technicians across the country with over 1600 here in Nevada.

From April – June 2009 there were 52 candidates who sat for the exam in Nevada with a 77% passing rate which was still above the national 76% passing rate. Congratulations go out to all of Nevada passing technicians!

NVSHP supports the effort of all technicians in achieving this milestone in their careers. Also, it should be noted that many of the hospitals in the Las Vegas valley only hire PTCB technicians. So if you are interested in more information, please visit the PTCB website at: www.ptcb.org.

Know Your Medicine, Know Your Pharmacist

October is American Pharmacist Month, a time when our profession is recognized for its contributions to healthcare. Now is the time to organize pharmacy month celebrations to raise awareness among our patients and communities. Ideas for celebrations include:

- Decorate pharmacies and patient waiting areas
- Hold “brown-bag” clinics to review prescription and over the counter medications
- Schedule health education events or mini-clinics
- Organize social events and invite patients, administrators, and other healthcare workers
- Use special bags, stickers, or handouts to spread the word of pharmacy month

Take the time to acknowledge the role of pharmacy in our changing healthcare system!



Why Should Student Pharmacists Join NVSHP?

Ana Negrete, NVSHP Student Representative

NVSHP is the state chapter of the American Society of Health System Pharmacists (ASHP). NVSHP membership allows students a chance to become connected with pharmacists practicing here in Nevada. NVSHP also provides updates on legislative and state board of pharmacy activities and changes. Whether you are a first year student just a few months into the program or a third year student on rotations now is a great time to join. Membership dues are only \$10 per year!

Every year NVSHP hosts an annual meeting which is held in Las Vegas or Reno which provides student members a chance to attend CE courses to supplement their learning as well as a chance to network with pharmacists from a wide variety of backgrounds. For more information about the annual meeting which is being held this year in Reno, please visit our website at www.nvshp.org. There are several CE courses offered throughout the year that are also open for student members.

Interested in getting involved? There are several committees that NVSHP members may participate in such as award and nominations, legislative, membership, and education committees. There is also the Student Representative for the board of directors. The Student Representative serves for one year beginning in January. Involvement in either aspect of NVSHP not only enhances your CE but helps give insight on the background work that takes place in order for a state organization to function. If you are interested in becoming a member or becoming involved please feel free to contact me at anegrete@student.usn.edu.

Announcements

Last Chance to Register for the NVSHP Annual Meeting

Registration for NVSHP's 2nd Annual Meeting is now open.

Visit www.regonline.com/nvshp09 to register for the upcoming meeting. There will be a last chance Nevada Law CE provided at the annual meeting in addition to various live continuing education and networking opportunities. Meeting details are as follows:

Date: Friday, October 16th thru Saturday, October 17th, 2009

Location: Silver Legacy Resort Casino in Reno, NV

**Agenda and list of speakers for the meeting can be viewed on the registration website.

Nominations for NVSHP Board of Directors

Please submit nominations for the NVSHP Board of Directors. Submit your nomination to Julie.rodgers@va.gov today! See www.nvshp.com for nomination form.

Renew Your Membership

The time to renew your membership is now!! You may update your membership information and pay using PayPal by going to www.nvshp.com and selecting Renew! You may mail a copy of the invoice that was emailed to you and pay by check. Please feel free to email us at nvshpinfo@gmail.com if you have any questions or have any further questions.

Newsletter Materials

As always, we are looking for material for our newsletter. Please help us by contributing ideas, articles, and suggestions. Don't wait—submit your work for publication in the NVSHP newsletter today!

Stay up to date on NVSHP news and events.

- Email changes in your contact information to: nvshpinfo@gmail.com.
- Visit us online at: www.nvshp.com

Give us your feedback! Please send your questions or comments to:

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***Our Mission:** The mission of the Nevada Society of Health-System Pharmacists is to advance and support the practice of pharmacy in the health-systems and serve as a collective voice on issues related to medication use and public health.*