



UNIVERSITY POINT OF CONTACT NEWSLETTER

**A publication of the
U.S. Public Health Service (USPHS) Commissioned Corps
Pharmacists Professional Advisory Committee (PharmPAC)
University Point of Contact (UPOC)**

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JRCOSTEP During a Global Pandemic

Submitted by: ENS Madelyn Day

Preceptor: CDR Jing Li, PharmD

When a Public Health Service officer came to my school to present on the USPHS Commissioned Corps, I was instantly drawn to its many career paths. Coming from a military family, I am familiar with the uniformed services and was inspired to apply for the JRCOSTEP (Junior Commissioned Officer Student Training Extern Program) as soon as possible. I believed the COSTEP opportunity would provide me the first step to a lifelong career in the USPHS Commissioned Corps. I was excited when I was assigned to an area I had never traveled to and knew little about because it left lots of room to learn and explore. I was selected to report to Phoenix Indian Medical Center (PIMC) in Phoenix, AZ as a part of the Indian Health Service. I was very fortunate and relieved when my orders still arrived two months into a global pandemic.

I spent five days driving out to Arizona from my home state of Maine in the opposite corner of the country. When I arrived at PIMC, I was greeted by a very kind pharmacy team, including my preceptor CDR Jing Li and LT Abigail Petrusis. They gave me an introduction to the USPHS Commissioned Corps and provided a schedule that let me observe the pharmacy clinics still operating during the pandemic. I spent the summer circulating through the Specialty Pharmacy, Pediatric Pharmacy, Primary Care Pharmacy, Tobacco Cessation Clinic, Anticoagulation Clinic and HIV/Hepatitis Clinic. Unfortunately, the LTBI (Latent Tuberculosis), CV Risk Reduction, Contraception and Immunization Clinics were on hold for the majority of the summer due to COVID-19 hospital-wide precautions. I learned a lot by completing each clinic's pharmacist exam, that highlight the fundamentals and pharmacist role in each clinic. While everything I experienced was from behind a mask and goggles, it was eye-opening to see the many roles pharmacists can take on in one facility alone. I also completed a handful of projects including creating a STI (sexually transmitted infection) fact sheet for patients,



ENS Madeline Day

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consolidating a list of diabetes patients in need of LTBI treatment, revising Emergency Code Blue pocket cards, presenting a journal club on the COVID-19 RECOVERY trial, writing an Antimicrobial Stewardship section for the Resident Newsletter and presenting on HIV Pre-Exposure Prophylaxis 2-1-1 dosing. My biggest project concluded my time at PIMC when I started the recall of more than 800+ patients due for their second dose of Shingrix. I was able to set up my own little version of the immunization clinic by calling and scheduling patients, then administering the vaccines with the aid of various pharmacists and a vaccine technician. Through accomplishing these projects and learning experiences, I was able to enhance my leadership and clinical skills.

In addition to gaining valuable pharmaceutical/clinical knowledge this summer, I was able to spend time with CAPT Catherine Witte who serves as a pharmacist and a chaplain at PIMC. She taught me about Native American culture and traditions and how these are integrated into providing care at PIMC. This was enhanced by getting to know my Native co-workers and exploring some of the most beautiful parts of Arizona. Although most Native Reservations were on lock down due to the pandemic, I was still able to spend my weekends visiting picturesque places like the red canyons of Sedona, the mountains of Flagstaff and the Grand Canyon.

I admire the strong community at PIMC where everyone knows and supports each other. Working at an Indian Health Service hospital was a more nurturing experience than working at a general hospital, and for that I am grateful. Completing my internship during a pandemic cost me certain opportunities but provided many more. Even though I spent my summer working at a hospital in a COVID-19 hot spot, I remained healthy and inspired to provide care for the underserved patients when they needed it the most. For that is the mission of the USPHS Commissioned Corps; “to protect, promote and advance the health and safety of our nation.”

Editor's Note:

The UPOC newsletter team is pleased to announce the Winter 2020 issue. Our goal is to provide the highest quality and most relevant USPHS Commissioned Corps information applicable to student interests.

As Editor-In-Chief, I continue to look forward to welcoming new ideas, showcasing informative articles relevant to your interest and to providing a well-rounded insight on what it's like to be a Public Health Service officer.

We thank those students and pharmacists who submitted articles and willingly shared their experiences about their rotation/or pharmacy practice site, unique service or residency experience. Your reflections and stories give our readers a glimpse of the diverse opportunities the USPHS Commissioned Corps offers.

We hope you find this edition enlightening and informative. This issue features a collection of pharmacy students' and Public Health Service officers' experiences in action from various duty stations. Students, we wish you the best of luck in school and your career endeavors!

Best wishes on your success,

LCDR Danica Brown, PharmD, MHCA, BCPS



Winter 2020

Choctaw Nation Healthcare Center - IHS

Submitted by: Morgan Hawkins, MSLD, 2021 PharmD Candidate 2021

Preceptor: LT Ashley DeVaughn Circles, PharmD, MBA, BCPS

As I made the drive to the small town of Talihina, Oklahoma, I had zero expectations. All I knew was that I was embarking on a five-week APPE at Choctaw Nation Health Services, and I was just thankful that I was able to be on-site (thanks, COVID). When I arrived at the student housing, I was greeted with a booklet of past student experiences and it instantly made me feel welcome and excited. Flash forward to the end of my experience, and I have become a more confident future pharmacist, expanded my knowledge about different types of pharmacy, and met amazing people along the way.

The first week I spent my time in the outpatient pharmacy clinic that is run solely by pharmacists. I had the opportunity to perform smoking cessation and anticoagulation appointments. Not only did I get to speak to patients about the various smoking cessation products, but I also got to practice motivational counseling to better help with their cessation journey. Taking patients' INR and adjusting warfarin doses made me feel like I had a real impact on their health. The Diabetes Wellness Center is another specialty clinic that Choctaw Nation offers to its patients. I worked-up numerous patients then collaborated with an endocrinologist to alter their therapies. The provider was a great teacher and considered every recommendation I made.

Switching gears, I spent some of my time in the in-patient pharmacy, where I got to exercise my clinical knowledge. My job was to work-up every admitted patient and assess their therapy for appropriateness. One thing I appreciated about this site was the openness of the providers. For someone who is still a student, it can be very intimidating to make recommendations to providers; however, all of the physicians I encountered were friendly and open to suggestions. There was also one day that was dedicated to allowing us to observe surgeries.

During my experience, I worked with a pharmacist who was a medication safety officer for the hospital. We went on tracers, which means we went to different areas of the hospital assessing compliance of safety protocols. Other new experiences included giving a short presentation about the KIDs List to a group of pharmacists and physicians, and presenting a probationary drug review to the P&T Committee. This week with the medication safety officer opened my eyes to a non-traditional route in pharmacy that I'm glad I got to explore.



LT Ashley DeVaughn Circles (L) and Morgan Hawkins (R) in front of Choctaw Nation Hospital in Talihina, OK.

Choctaw Nation gave me an amazing balance of in-patient and outpatient experiences while also exposing me to a route of pharmacy I was unfamiliar with. All of the pharmacists I worked with truly cared about my growth as a future pharmacist. It was a comfortable learning environment that fostered my passion for pharmacy.

Preceptor's Perspective

CNHS (Choctaw Nation Health Services Authority) is a 44-bed hospital located at the center of the Choctaw Nation of Oklahoma. The facility is comprised of an emergency department, behavioral health clinic, diabetes wellness center, podiatry, optometry, dental, cardiology, endocrinology, family medicine, surgical services, women's health, pediatrics, neurology, rheumatology, gastroenterology, and substance abuse facilities. We employ 12 pharmacists and 11 pharmacy technicians, including overnight pharmacy services. The health system includes 8 outlying clinics within the Choctaw Nation

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Behind the Screen & the Path Forward

Submitted by Keyli Flores, PharmD Candidate 2021

Preceptors: LCDR Tramara Dam, PharmD, GWCPM & Tri Le, PharmD

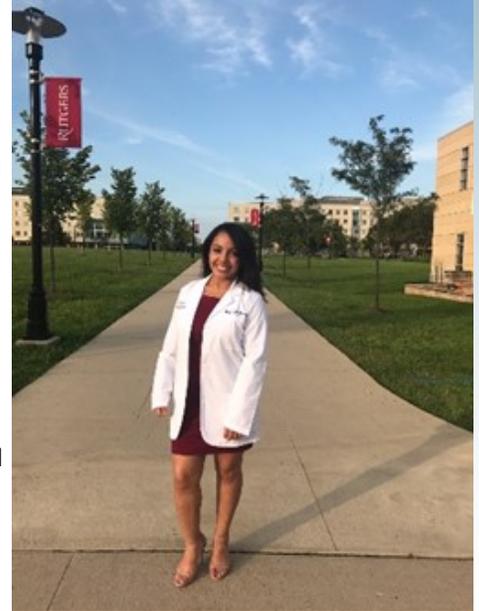
As my final year of pharmacy school comes to an end, I am filled with feelings of excitement and nostalgia. The past few months have been filled with moments of self-reflection and moments of uncertainty. I am lucky to have had mentors to look up to these past six years. Each of my mentors believed in me, taught me valuable skillsets, and prepared me for the next step in my pharmacy school career. I can proudly say that my experience with the Food and Drug Administration has been one of my favorite learning experiences so far.

My preceptors, Dr. Tri Le and LCDR Tramara Dam, are passionate, encouraging mentors who ensured that I worked on meaningful projects during my time with the FDA. In January 2020 I first heard the news that I would be interning with the FDA. I was beyond excited to learn about non-traditional roles for pharmacists. A few months later the COVID-19 pandemic took the world by surprise. Any and all plans I made for the year were subject to change. I was disappointed when my rotations were either cancelled or scheduled as a virtual model. However, I was happy my rotation with the FDA was still scheduled for the fall. I had hopes that by September things would go back to “normal”. The transition to online learning during the spring semester was challenging. I had trouble staying focused and I was beginning to lose motivation. I missed my everyday routine. I missed walking to class, attending lectures, living on campus with my friends, and learning face to face from my professors. I enjoy interacting with other people and I was having trouble coping with the isolation brought on by social distancing and virtual learning. Fortunately, this was most certainly not the case with my virtual FDA rotation.

Despite learning through a socially distanced setting, I still felt connected to those working in the FDA. This rotation was an interactive experience and my motivation to learn was inspired by many of the professionals I met with. I had the opportunity to connect with 26 driven people working with the FDA and 2 professionals from the Bureau of Prisons! I was connected to several professionals who are part of the U.S. Public Health Service Commissioned Corps, many of whom have had unique deployment experiences.

I learned about the broad scope of work that goes into CDER’s Office of Compliance. Specifically, within the Office of Manufacturing Quality, I learned more about initiatives to mitigate drug shortages for medically necessary products through regulatory discretion. The Office of Manufacturing Quality plays an integral role in maintaining public health by ensuring manufacturing companies are upholding their facilities to current Good Manufacturing Practices. I had the opportunity to attend enforcement meetings, where decisions are made to act against firms who are posing a public health threat. For my final presentation, I took a deeper dive into the issues surrounding methanol contaminated hand sanitizers, this gave me more insight into how critical the integrity of the drug supply chain is in protecting the public.

I have grown a much stronger appreciation for the work that goes on in the FDA. The organization is comprised of driven, intelli-



Keyli Flores, Pharm.D. Candidate Class of 2021, Rutgers University Ernest Mario School of Pharmacy

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Preventative Care During a Pandemic

Submitted by Ms. Sabaa Anees, PharmD candidate

Preceptor: LCDR Michelle Barbosa, PharmD, BCPS

When I received my APPE rotation schedule in February, I could not have imagined how different patient care would be by the time I started my first rotation at Haskell Indian Health Center in Lawrence, Kansas, on June 1. The novel coronavirus pandemic has affected the steps that all health professionals must take to ensure the safety and well-being of our patients, and the situation at Haskell has been no different. The limited number of patients allowed in the building has resulted in much less direct patient contact, but staff at Haskell have come up with creative solutions to fill in gaps in patient care.



Sabaa explains potential side effects and post-immunization care to a patient at a drive-up immunization clinic.

Pharmacy staff at Haskell have implemented drive-up immunization clinics to ensure that patients are still able to receive vaccines such as RZV, Tdap, and PPSV23. Rain or shine, pharmacy staff administered vaccines while patients were seated in their vehicle. For the first drive-up clinic, we prioritized patients who had received the first dose of RZV but never finished the series. Many patients commented that they appreciated our efforts to keep them up to date while limiting exposure to coronavirus.

In addition to these drive up clinics, pharmacy staff have taken the initiative to make additional vaccine interventions. Pharmacists and students on rotation screen patients for upcoming or overdue vaccines when patients are on the telephone or include notes with prescription bags if patients use the automated refill line to request a refill. Patients frequently called the pharmacy for more information after receiving these notes and scheduled appointments with pharmacy to receive their vaccines.

These measures gave me the opportunity to administer immunizations and discuss the importance of vaccines with patients, both of which I am passionate

about. My time at Haskell was so fulfilling that I plan to apply for an IHS residency this year! Students with an upcoming rotation at an IHS site can expect plenty of opportunities to improve health for an underserved population while receiving constructive criticism that will shape us into the next generation of pharmacists.



Sabaa and fellow pharmacy student, Lisa Sweden, at the check-in station for a drive-up immunization clinic on a rainy day.

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The Impact of Pharmacist Administration and Education of the Influenza Vaccine and Naloxone Nasal Spray

Submitted by: Lena Jibrael, 2021 PharmD candidate

Preceptors: CDR Robert Boyle, PharmD, BCPS, NCPS and LCDR Andrew DeMotto, PharmD, BCPS, NCPS

Adding to the challenges of the COVID-19 pandemic, influenza remains a major cause of morbidity and mortality worldwide. Influenza is a powerful infectious disease that is highly contagious and affects people of all ages. In addition, individuals with comorbid risk factors such as diabetes, cardiovascular disease, and respiratory conditions are at a higher risk of contracting influenza. That is why influenza vaccinations are one of the greatest public health achievements for decreasing illness, death and preventing the spread of disease.

Another issue that has become a public health crisis is the increase in opioid misuse and overdose. In the United States alone, the number of deaths from opioid overdose has increased by 120% between the years 2010 and 2018. Opioids such as heroin, methadone, codeine, and fentanyl have analgesic and sedative effects which are commonly used for the management of chronic pain. However, these opioids are usually sold in the illicit drug markets, which further increases the misuse and overdose of these agents. Opioid misuse and overdose can cause respiratory depression, possibly resulting in death.

Naloxone (brand name Narcan) is an opioid antagonist, which reverses the effects of opioids and reestablishes breathing, thus potentially saving the life of the opioid-overdosed patient. However, providing a patient with naloxone for emergent use when needed is dependent on factors such as patient understanding, accessibility, and convenience. Pharmacists play an important role in both disease prevention (by educating patients about opioid overdose) as well as providing proper training, clinical education, and skills development for emergent naloxone use.

At Salt River Integrated Health Care (SRIHC), I had the opportunity to shadow the clinical pharmacists in their various roles. I was involved in anticoagulation visits to adjust warfarin and DOAC dosing, blood pressure management, diabetes management (such as administering continuous glucose monitoring devices), and multiple collaborations with healthcare professionals to provide optimal medication therapy for patients. In addition, I was fortunate to accompany my preceptors, CDR Robert Boyle and LCDR Andrew DeMotto, at Mass Influenza Vaccination clinics serving as the "Vaccination Team Leader" at various locations within the community. By increasing vaccination efforts, our goal was to increase the rate of vaccines received and reduce health consequences of influenza. In addition, we received supply of naloxone nasal spray from a grant by "Not One More", an organization committed to stopping the national opioid crisis, which enabled us to educate and distribute naloxone.

The locations of clinics focused on popular areas within the community providing more opportunities for patients to get their influenza vaccination. Due to the COVID-19 pandemic, we ensured everyone's safety by wearing masks, attempting social distancing wherever possible, and practicing frequent sanitization. We were able to offer six influenza shot clinics at different locations within the community. On October 23rd and 24th at the Salt River Community Center, more than 200 influenza vaccines were administered and any concerns that patients may have had about vaccine safety and efficacy were addressed. Since it is routinely recommended for patients to wait at least 15 minutes post-vaccination to monitor for severe adverse reactions, we saw this as a perfect opportuni-



LCDR Andrew DeMotto, PharmD (left) with Lena Jibrael, PharmD candidate (right) in Salt River Community Center

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An Enriching Ambulatory Experience Amidst the Covid-19 Pandemic

Submitted by: Jasmine Garcia, PharmD Candidate and Jeffrey Chin, PharmD Candidate

Preceptors: CDR Huu Nguyen, LCDR Crystal Lui Madrigal, LCDR Emily Winans, Dr. Tina Nguyen

We started off our 4th year of pharmacy school with a unique opportunity to experience a different side of pharmacy that is not normally known. We were off to prison. More specifically, the Federal Correctional Complex (FCC) Victorville. Many students came before us, but our experience would differ from theirs due to the COVID pandemic.

Before coming on this rotation, we had heard from previous classmates that this rotation was going to include various clinics at different facilities. Duties would include point of care (POC) tests including INR testing, tuberculosis (TB) skin reads, and blood glucose tests.

Due to COVID, all the facilities were on lockdown and we were unable to visit the other facilities, except the Camp, or perform many of the POC tests. At first, the news of this did slightly disappoint us, but we soon quickly realized that the amazing pharmacists at FCC Victorville Federal Bureau of Prisons were not about to let this hinder our experience. Under the guidance of Chief pharmacist, CDR Nguyen and staff pharmacists, LCDR Madrigal, LCDR Winans, and Dr. Nguyen, we were given an amazing 6-week ambulatory care rotation.

Even though we were limited in what we could participate in, we were still able to learn and experience a variety of different activities. It was not just ambulatory care that we got to do here,

but a mixture of things that you would commonly see separately in other areas of pharmacy, such as providing unit doses, mixing insulin, and dispensing self-carry medications. It was during these activities where we would get to see more of the facility and interact with the inmates. We also got to observe the medical provider of the Camp do assessments on the inmates and with his guidance, we were able to practice checking vital signs and do physical assessments.

One of our most memorable experiences was being able to perform COVID tests on inmates and even ourselves! We received training from the on-site provider and were able to learn safe practice procedures for COVID testing.

When it came to ambulatory care activities, we both followed and monitored our own patients and helped manage their diabetes regimen. We would meet with them periodically, review their charts, change their insulin doses, and counsel them on their treatment goals and plans. In addition, we also adjusted warfarin doses, documented TB, Hepatitis C, and HIV medication administration, communicated with various medical staff, and so much more!



Left to right: Jeffrey Chin, Jasmine Garcia, CDR Nguyen, LCDR Madrigal, Dr. Nguyen

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Residency Spotlight: PGY1 Experience at Crownpoint Healthcare Facility

Submitted by: LT Adena Yau, PharmD, PGY1 Resident

Preceptor: LT Sophie Soo, PharmD, PhC, BCPS, NCPS

I recently completed a PGY1 experience at Crownpoint, New Mexico, a state otherwise known as the “Land of Enchantment”. As a native New Yorker, I never imagined moving from a bustling city metropolis to such a rural location in the Southwest. In school I always knew I wanted to pursue a non-traditional pharmacy career and stumbled on an article on pharmacist-run clinics in the Indian Health Service (IHS). After doing more research I learned about the Junior Commissioned Officer Student Training Extern Program (JRCOSTEP), applied to the program, and was selected to work at the Crow/Northern Cheyenne Service Unit. During the externship, I saw first-hand the difference clinical pharmacists made in the IHS and learned more about the essential role of Public Health Service officers as America’s Health Responders. Immediately I knew that I wanted to pursue an IHS PGY1 program and serve in the USPHS Commissioned Corps.

Fast-forward a year and I matched with the PGY1 program at Crownpoint Healthcare Facility, a critical access and isolated hardship IHS hospital with two satellite clinics. The residency year has been immensely rewarding and challenging; every day brought new and exciting opportunities. Crownpoint has a robust ambulatory care program with 6 pharmacist-led clinics, including diabetes, anticoagulation, chronic disease management, pain, dialysis, and Suboxone® which provided ample training experience across many disease states. I had the opportunity to pursue the New Mexico Pharmacist Clinician license, which is an advanced credential in New Mexico that allows specially trained pharmacists to provide primary and specialty care for acute and chronic conditions. Like other mid-level providers, Pharmacist Clinicians can prescribe medications, perform physical exams, order lab tests, and bill for their services. In addition, I was able to pursue other areas of personal interest, such as writing policies and procedures, participating in local wellness events, and completing healthcare informatics projects.

Aside from gaining clinical knowledge through my PGY1 experience, I have also learned a lot about Native American culture and customs. I have the privilege of living and working on the Navajo Reservation. Serving the Diné (Navajo people) has been an incredibly eye-opening and humbling experience. Many people who live on the Navajo Reservation lack electricity, running water, or reliable housing and travel hours on dirt roads to get to the hospital. Every patient carries their own hardships, and it is only through listening to their stories do we have the opportunity to begin to understand them, provide acknowledgement, and build a trusting relationship. It is an honor to help advance the health of the Diné and the employees of Crownpoint Healthcare Facility are truly passionate about providing the best patient care possible to this underserved population.

For students currently considering a career in IHS or USPHS Commissioned Corps, I would highly recommend reaching out directly to residents and program coordinators. Many IHS sites, including ours, offer APPE rotations which can immerse you in a brand new experience and help you make informed decisions about this career path. The UPOC newsletter also gives great insight into the personal experiences of other people who were once in your shoes. Lastly, make an effort to speak with current USPHS Commissioned Corps officers and maximize your exposure to the various federal agencies where we work.



(Left to Right) Etta Holmes, LT Adena Yau, Tyrone Antonio, LT Kali Autrey, CAPT Jefferson Fredey, Emily Craine, LT Abraham Kalathil, LCDR Keith Warshany

A Student's Guide to Virtual Networking: How to Succeed Without Shaking Hands

Submitted by: Sophia D'Alessandro, PharmD Candidate 2021

Preceptors: LCDR Tramara Dam, PharmD, RPh, GWCPM and Tri Le, PharmD

As a class of 2021 Doctor of Pharmacy candidate, I often found myself envisioning what my final year in the program would look like. Typically, I pictured myself as a Pharmacy Extern at the FDA successfully networking with influential individuals and fostering meaningful connections along the way. Unfortunately, the COVID-19 pandemic occurred, ultimately redefining how the country would conduct work. I was uncertain of how the new virtual climate would impact my ability to not only learn about the complexities of the Agency, but how not being able to have in-person interactions would shape the outcome of my networking experiences. I am pleased to assure future FDA Pharmacy Externs that the virtual aspect of this rotation has not taken away from the value of this experience. On the first day of my rotation, I was met with a Student Guide assembled by my preceptors, Dr. Tri Le and LCDR Tramara Dam, which included a list of pharmacists and other FDA staff members who were available for immediate one-on-one networking sessions. Within my first week at the FDA, I was able to have meaningful conversations with six members of the FDA, learning about a wide array of careers expanding from being a labeling reviewer in the Office of Prescription Drug Promotion to a Regulatory Counsel in Division of Supply Chain Integrity. Over the full six weeks within CDER's Office of Compliance, I was able to participate in over 15 one-on-one sessions with several members of FDA staff, including pharmacists, senior management, and others. Throughout my many networking sessions, I found there were a few pearls to the process that ultimately lead to making successful connections. First, secure a reliable connection. Whether you can connect to the online platforms via Wi-Fi or find yourself needing to call into the meeting from your phone, find what works for you early on in the rotation so that you are not struggling with connectivity. Second, take notes. Throughout the entire FDA experience, I have been extremely fortunate to speak to several influential members at the FDA who have a wealth of knowledge to impart. Writing notes will ensure that you retain important information from the session and that you can refer to them in future conversations or projects. Third, initiate one-on-one requests early. Since COVID-19, the professional climate has shifted to revolve around more scheduled meetings to discuss projects or problems, therefore, the amount of free time one may have quickly dwindles. By starting to plan for these networking interactions earlier on in the rotation, you will be able to find more mutual availability between yourself and the person you are meeting. Finally, be genuine in your conversation. Everyone at the FDA has their own unique experience as to how they ended up in their current role and they have a plethora of insightful advice to offer you as you progress through your career development. By being genuine about your goals and how you would like to shape your future as a professional, the advice they can offer will be more tailored to your unique experiences and ultimately, you will gain more from the conversation. Networking can seem intimidating, especially in the virtual world. By practicing some of the tips suggested in this article, I am certain you will have a valuable and memorable experience at the FDA.



Sophia D'Alessandro, Doctor of Pharmacy Candidate Class of 2021, MCPHS University (Boston)



22 Weeks in Prison

Submitted by Ms. HongKong Tran, Pharm.D. Candidate 2020

Preceptors: LCDR Crystal Madrigal, PharmD, NCPS, BCPS, CDCES & LCDR Emily Winans, PharmD, NCPS



LCDR Crystal Madrigal and HongKong Tran, Doctor of Pharmacy Candidate 2020 at Western University of Health Sciences College of Pharmacy.

Spending a total of 22 weeks with the Bureau of Prisons (BOP) at Federal Correctional Complex Victorville (FCC Victorville) has been one of the most rewarding experiences of my pharmacy school career—but even that seems like an understatement. I was unaware of what I was getting into when I showed up to the complex for my 6-week APPE rotation in February of 2019. It was a Monday, and as my colleague and I waited in the lobby of the administration building for our preceptor, I imagined what we would experience at a correctional facility. I was nervous, but that feeling of apprehension quickly subsided as LCDR Crystal Madrigal, in her U.S. Public Health Service Commissioned Corps service dress uniform, walked through the front doors of the building.

The first day at FCC Victorville consisted of introductions and orientation to the expectations and responsibilities of a rotational pharmacy student. On the second day, I was already meeting with inmates in Health Services during pharmacy-led clinics. With the direction of the pharmacy team at FCC Victorville, which includes CDR Huu Nguyen, LCDR Madrigal, and LCDR Emily Winans, pharmacy clinics have expanded to become more robust programs during which inmates are able to obtain individualized chronic care and follow-up. I was privileged to partake in

clinics such as anticoagulation, latent tuberculosis, hepatitis C, diabetes, and HIV. FCC Victorville hosts dynamic experience led by highly-trained pharmacists, so it did not take long—two weeks, to be exact—for me to realize that I would return to FCC Victorville for my 16-week Advanced Elective upon completion of my 6-week APPE there.

The pharmacy curriculum at Western University of Health Sciences (WesternU) College of Pharmacy in Pomona, CA is unique in that it incorporates a 16-week Advanced Elective (AE) after all required APPE rotations are completed. During this AE, P4 students are responsible for a comprehensive research project, complete with Institutional Review Board (IRB) approval, data collection and analyses, and a clinical poster presentation. I knew that FCC Victorville was the site at which I wanted to spend the final weeks of my pharmacy school career. So, in January of 2020, I found myself back at the BOP complex, this time focusing on my research project. With the help of my preceptors, I chose to focus on hepatitis C and to explore the effects of adherence on virologic outcomes among inmates taking direct-acting antivirals for hepatitis C infections within the BOP.

LCDR Winans, who leads the hepatitis C clinic, initially proposed the idea. With the help of the BOP's CAPT Mike Long (Mid-Atlantic Regional Chief Pharmacist) and CAPT Tami Rodriguez (Southeast Regional Chief Pharmacist), who both provided constructive feedback in finalizing details before data collection, I was able to get my project approved by the WesternU IRB. CDR Katrina Klang (Chief Pharmacist of FCC Florence and National Hepatitis Clinical Pharmacist Consultant Coordinator) provided valuable input on data collection, a lengthy, 8-week process during which I reviewed 2100 inmate profiles. My immediate preceptor, LCDR Madrigal, spent quality time helping me to finalize my abstract and poster, offering recommendations and insight as I approached the final weeks of my AE. Finally, after 16 weeks, I completed my research project—something that I can confidently say I

Winter 2020

Virtual Pharmacy Advanced Practice Rotations

Submitted by: Madison Terho, PharmD Candidate 2021

Preceptors: LCDR Marc Gentile, PharmD, BCACP & CDR Anna Santoro, PharmD, MA, BCPP, BCGP, NCPS

For the Doctor of Pharmacy Class of 2021, COVID-19 spread to the United States just as students were preparing for their Advanced Pharmacy Practice Experience (APPE) rotations to begin. For many, this meant that of the six rotation blocks required for graduation – much of that time would have to be spent learning virtually. Many rotation sites blocked student entrance for public health reasons, and schools in general were not allowing students to practice. There was a long period of time where the plan for virtual learning was yet to be determined, which led to many questions about on-time graduation and feasibility of practicing online. Ultimately, a decision was made that all students who were willing would be granted permission to complete one or more rotations virtually, so that they could stay on track for graduation in the spring.

For me, one third of the practical rotations would be spent online. From May until August, I participated in public health elective and internal medicine rotations with CDR Anna Santoro at Federal Medical Center Devens. During those twelve weeks, six students and myself researched drug information questions that came up in practice, reviewed interesting patient cases and presented on topics ranging from reproductive health to post-incarceration opioid overdose mortality. We participated in weekly conference meetings and learned from guest speakers such as Public Health Service officers stationed with the FDA and recent pharmacy school graduates. The opportunities presented to us allowed for a well-rounded and comprehensive learning experience, regardless of the setting. While not being involved in a live environment does restrict interdisciplinary healthcare experience, new technology allowed us to interact and collaborate on projects that contributed positively to our comprehensive educational experience, and even allowed us opportunities that we otherwise would not have had. Today, in-person rotations have been granted to students whose assigned sites are willing to allow them, and I have been able to seamlessly continue my education inside the institution – expanding even further on initiatives started from home.

While COVID-19 has certainly presented pharmacy students with new challenges, I am grateful to have been able to participate in a public health rotation during one of the most profound public health events to ever have impacted the US.



Winter 2020

My Experiences as a JRCOSTEP in Rural South Dakota

Submitted by: ENS David Burch, 2022 Pharm D Candidate

Preceptors: CDR Lori Braaten, PharmD, BCPS, BCACP and LT Leah Weiss, PharmD

I am grateful to have had the opportunity to learn as part of a summer Junior Commissioned Officer Student Training Extern Program (JRCOSTEP) at the Woodrow Wilson Keeble Memorial Health Care Center (WWKMHCC) in rural Sisseton, South Dakota. I want to start by thanking my preceptors, CDR Lori Braaten and LT Leah Weiss, who spent the summer training me in various areas of pharmacy practice, giving me intense pharmacy projects to build upon my current knowledge base, and making my Indian Health Service (IHS) JRCOSTEP as informative and enjoyable as possible.

This summer I had many new experiences. I made my first sterile compound, presented my first guideline review to a group of clinical pharmacists, created my first professional bulletin board on vaccines for the pharmacy waiting area, and completed my first drug utilization evaluation. I am very appreciative of the teaching and support I had from the staff at WWKMHCC, who guided me through some of my firsts.

This summer contained opportunities for learning JRCOSTEP during a pandemic, there was a patients entering the facility for vaccinations; however, I had the opportunity to expand my training with the pharmacists and completed the necessary to patients, reviewed them with immunizations recommendations and information regarding the Coronavirus information was emailed



(L to R) CDR Lori Braaten, ENS David Burch, and LT Leah Weiss

at a medical staff meeting. I was also able to help by screening patients for COVID-19 who were coming into the clinic. I felt like I was able to help keep patients and providers safe and informed.

The highlight of my experience came from witnessing the positive effects a clinical pharmacist can bring to a health care facility. I was able to observe the chronic disease therapy management clinic and pharmacy based clinics. Pharmacists at WWKMHCC worked to the full extent of their collaborative practice agreements (CPAs), which include management of anticoagulation, asthma, chronic obstructive pulmonary disease, diabetes, dyslipidemia, hepatitis C, hypertension, hypothyroidism, immunizations, tobacco cessation, and vitamin D deficiency. Pharmacists practicing under these CPAs have prescriptive authority, and it was amazing to see the pharmacists using their licensure to provide meaningful disease state interventions. I believe this helped the whole clinic's workflow and provided patients with the opportunity for more frequent follow up with a provider and decreased physician workload.

many unique challenges and as I completed my global pandemic. Due to the limited number of healthy patients for routine counseling and was still provided with the opportunity to expand my counseling abilities by counseling patients over the phone. I also had training to provide vaccinations and reviewed patient's charts and provided as required. I provided recommendations for our providers regarding COVID-19 (COVID-19). The information was emailed to all providers and presented

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Robust and Rewarding Virtual Pharmacy Practice Experience

Submitted by Student Pharmacist Ashley Dike, PharmD Candidate 2021

Preceptor: Cheryl Gilbreath, PharmD, MBA, RPh



Ashley Dike 4th Year Doctor of Pharmacy Candidate at the Howard University College of Pharmacy.

During my 5-week Advanced Pharmacy Practice Experience (APPE) at The Centers for Medicaid and Medicare Services (CMS) I was exposed to the numerous career options available to pharmacists in areas such as drug pricing, policy, quality assurance, and drug coverage determinations, to name a few. I experienced first-hand how pharmacists are able to contribute not only their clinical knowledge, but also key transferable skills to help meet the goals of collaborative teams. I was also able to work on a number of meaningful projects, getting experience with some of the day to day deliverables that agency pharmacists produce and seeing how it impacts the larger organization and ultimately trickles down to patients. One of my projects included presenting an ACPE accredited continuing education presentation on a new first-in-class HIV drug to the pharmacists and other healthcare providers at CMS. This assignment allowed me to use new skills that I learned during my rotation to deliver an insightful presentation.

My preceptor, Dr. Cheryl Gilbreath, structured my rotation in a way that all of my assignments and experiences helped me improve upon necessary skills needed to be successful as a pharmacist. No matter what topic I was curious about, she ensured I had the resources to learn about the topic and see how and where it applies within the organization. One of my key learnings was understanding how a new law is actually put into everyday practice and the different steps it takes to interpret the law and ensure that all stakeholders are considered and are able to be a part of the policy making process. This was a very unique opportunity, because as pharmacists we may be affected by these laws in multiple ways depending on the capacity in which we are practicing and the patient populations we serve. I found it completely fascinating to see how the pharmacist perspective can be so valuable in the policy making space, and now have a much deeper understating of the process and its impact on patients and practitioners.

Networking was also a key part of my rotation experience. I had the pleasure of meeting with numerous pharmacists and other healthcare professionals within the agency who shared their unique career journeys. Everyone I spoke with was welcoming and full of insightful advice. I not only was able to get advice about navigating the many different post-graduate opportunities, but I was reminded that everyone's journey is unique and that there is no cookie cutter path to getting to a particular position and/or agency.

My 5 weeks at CMS flew by because my time was filled with meaningful projects, learnings, and networking experiences. I was able to gain valuable knowledge unique to CMS and had all of my expectations for the rotation exceeded. My preceptor was welcoming, supportive, but also challenged me to grow as a student pharmacist. I would highly recommend this rotation experience to pharmacy students no matter what area of pharmacy they are interested in because this experience touches on all aspects of pharmacy and healthcare as a whole.

Winter 2020

P4 Student, Elizabeth Davis, Receives Student Award for Excellence in Public Health at Palm Beach Atlantic University

Submitted by LT Nicholas J. Palm

P4 Pharmacist Candidate, Elizabeth Davis, was presented as one of the 94 students across the nation to receive the 2020 USPHS Excellence in Public Health Pharmacy Student Award on September 3, 2020 at Palm Beach Atlantic University. During the 2019-2020 academic year, Elizabeth Davis was a co-lead for Palm Beach Atlantic University Gregory School of Pharmacy's (PBA) Health Fair in West Palm Beach. The health fair was established to increase awareness of chronic diseases, such as hypertension, high cholesterol, and diabetes. The public was educated and health screenings were provided for blood pressure, blood glucose, cholesterol and HIV by student pharmacists and pharmacist preceptors in the local community with the goal of referring patients to appropriate medical care.

Elizabeth was also recognized as a consistent member of the PBA Pharmacy Missions team. During her four years in pharmacy school, she has volunteered for and participated in four medical mission trips. These medical missions provide care for underserved populations in areas that may not have adequate medical care available or nearby. Screening for diabetes, hypertension, HIV, and H. pylori were commonly provided, and patients were placed under local medical care to ensure proper disease state management. After her first year of pharmacy school, Elizabeth served on the medical mission team in the Dominican Republic. After her second year, she participated in two medical mission trips to Uganda and the Dominican Republic.

"She is viewed as a servant leader by her peers and is the first to roll up her sleeves to help out," wrote Dr. Dana Strachan, Associate Dean for Academics. "Elizabeth also developed a triaging tool to assist with patient flow in medical missions' clinics. Upon entry into the pharmacy program, Elizabeth shared her passion for becoming a missionary pharmacist with me. Her goal in pursuing a degree in pharmacy is to find an underserved area of the world to share her faith while practicing pharmacy."

The program at PBA allows P4 students to receive APPE credits for medical mission rotations. This year, she was among the first group with PBA to provide medical missions to Eswatini (formerly known as Swaziland). This opportunity may lead to a full-time pharmacist position, serving in Eswatini.



P4 pharmacist candidate, Elizabeth Davis.

It was a tremendous honor to meet such an extraordinary student pharmacist, and I was fortunate to be able to do so.



LT Palm presents award to P4 pharmacist candidate, Elizabeth Davis, for Excellence in Public Health in September 2020.

Choctaw Nation Healthcare Center - IHS ... continued from [page 3](#)

jurisdiction that provide 540,000 outpatient visits annually.

At the Choctaw Nation, we enjoy hosting 10-15 students from 8 colleges of pharmacy from throughout the country each year. We offer APPE rotations in ambulatory care, institutional and elective experiences as well a IPPE institutional. Students gain experience in outpatient counseling and medication reconciliation, pharmacist-run tobacco cessation and anticoagulation clinics, and inpatient pharmacy. We also offer experiences in medication safety and decentralized pharmacy, as well as the chance to shadow other health care providers in the emergency room and surgery.

Navigating a Pharmacy Rotation at the FDA During COVID-19

Submitted by Ellen Guo, PharmD Candidate 2021

Preceptor: CDR Andrew Fine, PharmD, BCPS

Last year, when I received the email that I was selected for a rotation at the FDA, I was ecstatic to be working at a federal agency of the Department of Health and Human Services and to be moving to the DC Metro Area. In February of this year, when the world was hit by the outbreak of the SARS-CoV-2 virus responsible for causing COVID-19, I like many others felt the impact of the virus on both my personal and professional life.

Despite my initial hopes and plans for this rotation falling through, I like everyone else, have learned to navigate and adapt to these unprecedented times. Over the last six weeks, I have been able to dive into the world of the FDA and the Office of Generic Drugs (OGD). One of my biggest takeaways from this rotation is the great lengths that FDA goes through to create transparency about the scientific work they do. One of the ways FDA creates transparency and communication with those in the pharmaceutical industry is through the plethora of Guidance Documents and other regulatory documents they have created. Reading through various FDA Guidance Documents has allowed me to better understand the Abbreviate New Drug Application (ANDA) process, standards for determining bioequivalence, and the rules and regulations of the Generic Drug User Fee Amendments (GDUFA) Program. Another FDA resource that has been incredibly helpful is the publicly available webinars offered by the Division of Drug Information, Advisory Committees, and CDER Small Business & Industry Assistance (SBIA). The Vaccine and Related Biological Products Advisory Committee recently held a public meeting that discussed the COVID-19 vaccines in development and SBIA held a two-day webinar to celebrate 40-years of the Orange Book, which had over 3,500 attendees from over 75 countries across the world. Moving forward into the rest of my rotations and into my professional career, I will continue to take advantage of these valuable resources and webinars provided by the FDA.

Despite this rotation being unconventional; nonetheless, it was a great learning experience, and I am walking away with a wealth of knowledge about the FDA and its resources to help protect and advance public health. I am extremely appreciative of my preceptor, CDR Andrew Fine, a Clinical Team Leader in OGD, for his commitment in taking me on as a student. He has created thoughtful topic discussions and projects that have contributed to my meaningful pharmacy rotation experience at FDA.



A Socially Distanced APPE: COVID-19 Edition

Submitted by Ms. Krishna S. Rana, PharmD Candidate 2021

Preceptors: LCDR Tramara Dam, PharmD, RPh, GWCPM and Tri Le, PharmD

January 23, 2020: I was on the runway at Newark Airport, returning from vacation in India, and had just started receiving notifications on my phone again. Of those, a single one stuck out, a letter from the Food and Drug Administration (FDA) regarding an application I had spent days on back in October 2019. I submitted this application to potentially have the golden opportunity to rotate at the nation's Department of Health and Human Services – Food and Drug Administration (FDA). As the email was still loading, I realized that over 3,000 students from all over the country were applying for this same rotation; my application could have been easily denied or accepted. The email finally opened up and I jumped out of my airplane seat with joy, I was accepted into the Experiential Program!

Fast-forward to May 2020, three months until my rotation: Coronavirus Disease 2019 (COVID-19). Many students' rotations were being cancelled left and right. I was upset that I may have lost the chance to learn from leading professionals. Fortunately, my preceptors, Dr. Tri Le, PharmD and LCDR Tramara Dam, PharmD, did not want to call off this experience for their students and opted to make it fully remote. I was extremely grateful and excited; however, this idea of a fully virtual rotation, not being able to meet my preceptors, any co-workers nor any other APPE students face-to-face, seemed like a daunting and impossible task. Though, as luck would have it, my APPE rotation in the Office of Manufacturing Quality (OMQ), a division of the Office of Compliance in the Center for Drug Evaluation and Research, was one of the most enriching experiences I had as a student.

I was LCDR Dam's first virtual FDA student and was determined to learn as much as I could in these next five weeks, considering that I would be in New Jersey instead of Maryland. During my first WebEx call with my preceptors, they reassured me that they would expose me to different projects and help me network with pharmacists from a variety of functional areas. As it turned out, this virtual experience was better than I had ever expected. During my time, I interacted with students from numerous schools, connected with presenters after attending the daily student lectures, and learned about the FDA's impact in the pharmacy world. I was lucky enough to have met 27 passionate individuals, who despite their busy schedules, spoke with me one-on-one about their career and current roles. I learned the processes for approving devices in the Center for Devices and Radiological Health (CDRH) and presented on EndeavorRX, the first FDA-approved prescription-only video game for ADHD! Additionally, I had the amazing opportunity to attend regulatory discussions with sponsors. Here, I learned how committed the FDA is to ensuring that all people involved in clinical trials, and those ultimately taking these medications, were safe and protected.

In OMQ, my preceptors treated me as an equal and offered me multiple opportunities to challenge myself and become involved in various roles. I took on numerous projects that enhanced my knowledge and skill set, such as contributing to OMQ's role in regulatory decisions during a drug shortage under FDASIA Title X, upholding manufacturers to cGMPs, and reviewing warning letters, import alerts, and other regulatory actions that were taken against adulterated or misbranded hand sanitizers during COVID-19. These projects taught me exactly how the FDA shields pa-



Krishna Rana, PharmD Candidate Class of 2021, Rutgers University Ernest Mario School of Pharmacy

PGY-1 and PGY-2 Residency Programs with the Indian Health Service

Submitted by: LCDR Jacqueline Campbell and CDR Holly Van Lew

The Indian Health Service (IHS) National Pharmacy Residency Program has been expanding over the years, with 27 PGY-1 programs across the country. Each IHS residency program offers residents unique learning experiences and training opportunities. Innovative pharmacy-run clinics with collaborative practice agreements allow pharmacists to utilize their skills and clinical knowledge to the top of their license. In addition to meeting rigorous training requirements, residents are expected to present their longitudinal projects at local, regional, and/or national conferences, including the ASHP Midyear Clinical Meeting. Due to COVID-19, many of these conferences have moved to a virtual format, giving residents the opportunity to use technology to present their projects remotely. In recent years, a few sites have also added PGY-2 programs, focused on further developing pharmacist clinicians in ambulatory care and pharmacy administration. Many of the sites are in beautiful, rural areas of the country, with opportunities for outdoor adventure and a chance to learn and appreciate the history, culture and traditions of the tribes in the area. A few programs are located in urban settings, offering residents a chance to experience city living while serving the native population.

IHS pharmacy residents also have the unique opportunity to apply to become an officer in the Commissioned Corps of the U.S. Public Health Service. Although it is not a requirement and many residents choose to serve as civil servant or tribal employees, after the completion of residency training, the USPHS Commissioned Corps offers opportunities to serve beyond your duty station through deployments and projects that promote global health advancement. For more information about the USPHS Commissioned Corps, please visit <https://www.usphs.gov/>.

The deadline for submitting applications for residency for the 2021-2022 residency year is December 18, 2020. The IHS Residency Match process is separate from the ASHP Match, and selections will be finalized prior to the ASHP match, allowing applicants to remain in the ASHP Match process if they are not selected for an IHS residency. Application instructions as well as details for each residency program can be found at <https://www.ihs.gov/pharmacy/resident/>.



RADM (ret) Schweitzer with Residents and Residency Program Directors at 2017 ASHP Midyear Clinical Meeting

Winter 2020

Community Outreach Activities as a Pharmacy Resident

Submitted by: LT Sayyem Akbar, PharmD, PhC, PGY1 Resident

Preceptor: LCDR Megan Dill, PharmD, BCACP, PhC, CDE

As an ambulatory care pharmacy resident, I was aware that I would have ample opportunities to practice as an advanced pharmacist practitioner inside the clinic walls. However, the prospects of being out in the community to ensure a better interpersonal relationship with patients, despite being desirable, seemed unlikely to me as I embarked on my postgraduate year (PGY)-2 residency. Additionally, as a Public Health Service officer, the Surgeon General's priorities help guide my focus areas. Community health is one of them, and community outreach helps promote community health.

My first encounter as a part of the Whiteriver Service Unit's Community Outreach team occurred at a community high school. We organized a vaccination clinic in the school that led to over 100 high school students being immunized with close to 200 vaccinations. The team consisted of four pharmacists, including the PGY-1 and PGY-2 residents, one student pharmacist, and a member of the Public Health Nursing (PHN) department. I was vastly impressed by how streamlined the whole clinic process was. However, what amazed me was the work that went behind the organization of these events. The Acting Director of Clinical Outreach, LCDR Megan Dill, coordinated with all the schools and daycare centers in the community to receive consent from parents and guardians long before these clinics were scheduled.

I was afforded the opportunity to be one of the co-organizers for the 2019 mass vaccination clinics. We had two mass vaccination clinics in Whiteriver and one in Cibecue, a small community about an hour away from Whiteriver. The planning involved a significant amount of work, including multiple planning meetings to help coordinate with different departments. All the efforts paid off when these three mass vaccination clinics led to 845 community members being immunized with 1,084 vaccinations.

Another unique aspect of my community outreach experience was performing home visits. Patients were referred by providers for pharmacist home visits for various reasons, including medication reconciliation. Many elderly patients were referred because they were unable to come to the clinic. During these visits, I was able to make routine clinic interventions, such as adjusting medications. Besides, there was a wide range of interventions, including referring patients to the emergency room for urgent concerns. Since most of these patients were unable to take care of themselves or manage their medications, the pharmacy outreach team always tried to involve family members in the patient's care. It was exciting to me when a medical student, after shadowing me during home visits, expressed her astonishment at the level of services I provided as a pharmacist.

I consider myself extremely fortunate to have had the chance to take part in so many outreach activities. The experience has brought a different perspective to my patient interactions. It has made me more aware of my patients' circumstances, thereby making it easier for me to connect with them. Furthermore, it has made me realize the impact pharmacists can have on patients if we are willing to step outside of our clinics and hospitals. I could not have imagined performing these outreach activities as a pharmacist when I was a student pharmacist in New York City. I believe this is where Indian Health Service (IHS) shines. The remoteness of many IHS sites provides opportunities for student pharmacists on IHS rotations, and especially IHS residents to provide innovative services by practicing at the top of their licenses.



LT Sayyem Akbar at
Whiteriver Indian Hospital

Winter 2020

Behind the Screen & the Path Forward... continued from [page 4](#)

gent professionals who are not only committed to protecting the needs of the public, but also committed to working as a team. Thank you to my preceptors, Dr. Tri Le and LCDR Tramara Dam, for giving me the opportunity to work with the FDA. My virtual experience was more than I could have asked for. As my final days with the FDA come to an end I am filled with a feeling of commitment to use my knowledge and skillset to promote public health. The road ahead no longer seems so intimidating, and after my experience with the FDA I know that all I need is motivation to learn, and a passion to protect the people around me.



The Impact of Pharmacist Administration and Education ... continued from [page 6](#)

ty to talk with patients about naloxone. While patients waited (and maintained social distancing), we provided education and training on the signs of opioid overdose and proper naloxone administration techniques. To assist with the training, we developed QR codes linked to a video on how to use naloxone that patients could scan and watch on their smartphones while they waited. Naloxone was then offered to the community members who were interested in taking one home. This initiative was overall successful and led to the distribution of over 100 naloxone kits during the two-day event.



Josh Kassner, PharmD candidate (left) with CDR Robert Boyle, PharmD (right) in Lehi Community Center

This opportunity has incredibly impacted me as a future pharmacist. I have gained valuable experience that advanced my knowledge and clinical skills as a pharmacist, leader, and a communicator. Being in a healthcare setting with different professionals at different sites has also allowed me to learn how to effectively practice in various environments while ensuring the same optimal level of care for the patients. I have enjoyed my experience at SRIHC and being a part of several incredible teams on this rotation. I was honored to practice our positive care standards and patient quality of care at SRIHC.

Winter 2020

22 Weeks in Prison ... continue from [page 10](#)

am proud of and that I could not have completed without the feedback and direction from these leaders.

My experience with the BOP at FCC Victorville helped to sculpt a confident student pharmacist. As I move forward with my career as a PGY1 Resident at the VA Central California Health Care System in Fresno, CA, I will take with me the dedication, duty, honor, and service that I have adopted from these Public Health Service officers and apply what I have learned to the care of my future patients. I am thankful to have such well-qualified pharmacists to serve as preceptors to guide my learning. These 22 weeks at FCC Victorville have solidified my passion for clinical pharmacy and reignited my goal of leading a career in public service.



My Experiences as a JRCOSTEP in Rural South Dakota ... continued from [page 12](#)

Another responsibility of the pharmacists at WWKMHCC is to review the comprehensive urine drug screens (COMP UDS). This provided the opportunity to review and notify providers regarding the results of a patient's COMP UDS and have conversations with providers and other pharmacists regarding drug screens and the prescribing habits of opioids. I also attended the clinic's pain committee meeting and even had the opportunity to virtually attend the national Extension for Community Healthcare Outcomes topic discussion on UDS analysis.

Although working at the WWKMHCC was the focus of my summer, I was also able to explore the Midwest. I really enjoyed kayaking down the Red River, cheering on the Fargo Redhawks, a semi-pro baseball team, and taking a dinner cruise on Lake Minnetonka during a weekend getaway with my wife to Minneapolis, Minnesota.

Not everything from this special summer could fit in a short review, but hopefully this is helpful for others considering a JRCOSTEP. It was an amazing learning experience and a lot of fun. I would recommend a JRCOSTEP to any pharmacy student looking to pursue a career with the IHS or in clinical pharmacy. It is a unique opportunity to explore several facets of pharmacy in a short period of time. I will reflect on my JRCOSTEP experience for the rest of my life and especially as I approach the end of school and seek a career serving Native American and Alaska Native communities through IHS.



Skaggs School of Pharmacy
and Pharmaceutical Sciences

UNIVERSITY OF COLORADO
ANSCHUTZ MEDICAL CAMPUS

Winter 2020

An Enriching Ambulatory Experience Amidst the Covid-19 Pandemic ... continue from [page 7](#)

Our time here at the Federal Correctional Complex Victorville was a positive, exciting, and rewarding experience. We never imagined that we were going to learn so much about the ambulatory care practice in a correctional setting, especially during this pandemic. Thank you for the amazing opportunity, we cannot wait to become pharmacists and put our knowledge to use!



A Socially Distanced APPE: COVID-19 Edition ... continued from [page 16](#)

tients from poor quality, unsafe, and ineffective drugs, one of its key missions, as well as opening my eyes to a part of drug development that was never taught in pharmacy school.

Being remote did have its challenges, especially technical, but I am so thankful to have had a team that helped me grow professionally, as well as personally. From understanding the various roles pharmacists can have at the FDA to speaking with Public Health Service officers who were deployed to aid those in need during these unprecedented times, I would say my virtual experience at the FDA was one that I will always be grateful for. This rewarding rotation has shown me that even during a public health emergency, the FDA is strong, productive, and true to its mission: promoting and protecting the public health.



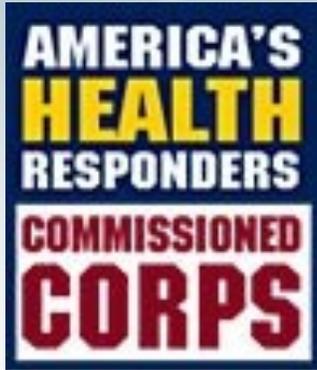
Winter 2020

Useful Info and Resource Links

Agency	Contact	Telephone	Website	Email
Federal Bureau of Prisons (BOP)	CDR Daniel True	304-379-5187	https://www.bop.gov/jobs/positions/index.jsp?p=Pharmacist	dtrue@bop.gov
Centers for Disease Control (CDC) and Prevention	CDR Jennifer N. Lind	404-498-4339	www.cdc.gov	vox2@cdc.gov
Food and Drug Administration (FDA)	CAPT Beth Fritsch	301-796-8451	www.fda.gov	beth.fritsch@fda.hhs.gov
Health Resources & Svcs Adm. (HRSA)	LCDR Jane McLaughlin	301- 443-1603	www.hrsa.gov	JMcLaughlin@HRSA.gov
Indian Health Service (IHS)	CDR Jessica Anderson	218-983-4300	www.ihs.gov/pharmacy	Jessica.Anderson@ihs.gov
ICE Health Services Corps (IHSC)	CAPT Jeff Haug	202-494-8081	https://www.ice.gov/detain/ice-health-service-corps	jeff.e.haug@ice.dhs.gov
National Institutes of Health (NIH)	CDR Fortin Georges	301-496-9358	www.nih.gov	georgesf@cc.nih.gov
U.S. Coast Guard	CAPT Paul T. Michaud	202-475-5171	www.uscg.mil/	Paul.T.Michaud@uscg.mil
Centers for Medicare & Medicaid Services (CMS)	CAPT Christopher Dunbar	410-786-6621	www.cms.gov	ccinquiries@cms.hhs.gov

Website	Web Address
Instagram/Twitter	#usphspharmacy
Facebook Page	www.facebook.com/USPHSPharmacists
IHS Residency Information	http://www.ihs.gov/medicalprograms/pharmacy/resident/
USPHS Commissioned Corps Uniform Information	https://dcp.psc.gov/OSG/hso/sub-readiness-uniforms.aspx
USPHS Commissioned Corps	https://www.usphs.gov/
USPHS Commissioned Corps PharmPAC Website	https://dcp.psc.gov/osg/pharmacy/
USPHS Commissioned Corps Pharmacist Listservs	https://dcp.psc.gov/OSG/pharmacy/listserv.aspx
USPHS Commissioned Corps Student Opportunities	https://www.usphs.gov/student/





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Did you know?

The UPOC Newsletter is potentially read by the 1,276 subscribers to the PHS-pharmacists listserv and over 767 subscribers on the pharmacy student listserv. In total, there are over 2,000 readers of the UPOC newsletter. BUT... it's up to you to distribute. Please take the time to distribute the UPOC Newsletter to your Universities or take a colored copy for your Career Fair Recruitment table.

Thank you from the UPOC Newsletter Workgroup!

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