



UNIVERSITY POINT OF CONTACT NEWSLETTER

**A publication of the United States Public Health Service (USPHS)
Pharmacists Professional Advisory Committee (PharmPAC)
University Points of Contact (UPOC)**

Inside this issue Fall 2019:

Editor's Note	<u>2</u>
An Eye Opening Experience at FCC Victorville	<u>4</u>
JRCOSTEP Journey	<u>7</u>
IHS Residency Programs	<u>10</u>
Centers for Medicare & Medicaid (CMS) Offers a New Perspective	<u>13</u>
A Wonderful Time at the White Earth Service Unit	<u>17</u>
Naloxone Prescribing at Zuni Comprehensive Community Health Center	<u>20</u>
From the Midwest to the Last Frontier	<u>21</u>
USPHS resources	<u>23</u>
UPOC Team	<u>24</u>

Ragin' Contagion – Point of Dispensing Activation

Submitted by John CM. Park, Pharm.D. Candidate 2019 at St. Louis College of Pharmacy
Preceptor: CDR Anne Marie Bott, Pharm.D. BCPS, BCOP, NCPS

During my Oncology Pharmacy Rotational experience with the Alaska Native Medical Center (ANMC), I had my fair share of memorable experiences in The Last Frontier. These experiences involved working with cancer patients at the infusion pharmacy, my very first moose sighting, and getting towed at the Slush Cup. However, the one event that I did not foresee was participating in a Point of Dispensing (POD) simulation.

In the case of an epidemic outbreak, rapid response for prophylaxis dispensing is vital to the containment of the disease. On the 12th of April, the Alaska Native Medical Center (ANMC) took part in a state-wide public health preparedness exercise termed "Ragin' Contagion." This exercise simulated an emergency situation where the pneumonic plague had been introduced to the state. Led by the United States Public Health Service Commissioned Corps officers along with the Alaska Native Tribal Health Consortium, volunteers set up a closed Point of Dispensing (POD) unit within ANMC to receive, stage, and dispense mass prophylaxis to the designated population identified in the plan in a timely manner. During a public health emergency, ANMC's POD will be part of a larger community-wide effort to provide medical countermeasures. This will serve the general public through the activation of the Anchorage Health Department "open" POD sites deployed at high schools in the Anchorage and Palmer areas.

There were a number of stations within the POD set up to create a quick, fluid environment to process and dispense medication to a colossal influx of volunteer patients. As the patients walk into the area of operation, they are first faced with triage, which is a pivotal step for recognizing additional needs such as the need for translators or any immediate medical attention. Then, they fill out a form that includes all pertinent information such as weight, age, and number in the household needing treatment. Both the patient and the form move down the line to be evaluated by a medical professional, and eventually the patient receives their prophylactic accompanied by counseling points given by the POD staff members.

Continued from [page 1](#)...Ragin' Contagion – Point of Dispensing Activation

Throughout the drill, the POD processed and gave 150 prophylactic doses of ciprofloxacin and doxycycline to approximately 90 patients averaging an impressive 6 minute processing time per patient. Despite the novelty of the exercise, every staff member at the simulation showed great leadership as they displayed peak performance with great alacrity. With the conclusion of the drill, POD Commander, Captain Kara King stated, "I could not be more proud than to see all the work we have put into developing this



Top Left: POD Area of Operations
Top Right: CDR Brittany Keener at the dispense station
Bottom Middle: POD Manager, CAPT Kara King
Bottom Right: CDR Christina Eldridge (left), CDR Sara Doran (right) at the screening



POD Plan for our organization and our people come to fruition and be so successful." With the great success and readiness observed from the simulation, the assurance of ANMC's ability to overcome any adversity and potential public



health emergency seems evident.

Editor's Note:

The UPOC newsletter team is pleased to announce the Fall 2019 issue. Our goal is to provide the highest quality and most relevant USPHS 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 PHS pharmacy 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 PHS offers.

We hope you find this edition enlightening and informative. This issue features a collection of pharmacy student experiences and officers 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



Fall 2019

Four Weeks at the FDA: My Fantastic Experience in the Office of Generic Drugs

Submitted by: Colin Hastings, PharmD Candidate, Butler University College of Pharmacy

Preceptors: LCDR Rebecca Wong, PharmD, BCPS; LCDR Kinbo J. Lee, PharmD, MHS, BCPS, CPH

As a fourth-year pharmacy student, I was fortunate to complete an APPE rotation at the Food and Drug Administration (FDA) this past August in the Office of Generic Drugs (OGD). Although I was 600 miles away from pharmacy school in Indianapolis, my preceptors LCDR Rebecca Wong and LCDR Kinbo Lee helped me feel right at home from day one. Heading into the rotation, I had limited knowledge of FDA's roles and responsibilities. I was expecting a smaller building, with each office consisting of around 10 people. I was not expecting a dedicated campus, with hundreds of people in each office, spanning various areas in which I did not realize the FDA had oversight.

Since the passing of the Generic Drug User Fee Amendments (GDUFA), OGD has grown extensively and the generic drug approval process has been streamlined. I learned about the communications between OGD and the pharmaceutical industry through an Abbreviated New Drug Application (ANDA) submission, as well as the amount of work it takes to deliver affordable generic drugs to the market. Throughout my experience, I was able to attend various student presentations, lectures, and toured the national headquarters of American Pharmacists Association (APhA) and American Society of Health-System Pharmacists (ASHP).

During my rotation, my preceptors connected me with other FDA pharmacists who worked in a variety of roles, from dealing with drug shortages, to inspecting pharmaceutical manufacturers, and regulating tobacco products. I was pleasantly surprised by how many people were willing to take time out of their day to meet with me and discuss their role within the agency. Some of my most interesting conversations were with US Public Health Service (PHS) officers. Many of them had experiences in other agencies prior to moving to the FDA. It was very interesting to hear how they were able to serve in different capacities across the United States as PHS officers, in addition to their current roles at FDA. Considering I had not been previously exposed to PHS during my years at Butler, this was a great opportunity to learn more about a truly unique way to serve as a pharmacist.



Caption: (Left to Right) Colin Hastings, PharmD Candidate 2020; Patrick Nwakama, PharmD; Nnamdi Igwemezie, PharmD Candidate 2020; Roza Rouhani, PharmD Candidate 2020; LCDR Kinbo Lee, PharmD, MHS, BCPS, CPH

Fall 2019

An Eye Opening Experience at FCC Victorville

Submitted by: Deborah Garcia, PharmD Candidate, Western University of Health Science and Zareh Boyadjian, PharmD Candidate, Keck Graduate Institute

Preceptor: LT Emily Winans, PharmD, NCPS

Going into our 3rd year in pharmacy school, we knew we had a big decision to make for rotation rankings. Unlike some of our fellow classmates, we didn't have a set career plan yet for post-graduation, which made the rankings even more challenging. There are so many career paths with a pharmacy degree and they all have good and bad aspects to them. It was the decision to choose rotations with unfamiliar settings, or ones you do not hear about often (as well as attending an informational seminar presented by LCDR Crystal Lui) which ultimately made Federal Correctional Complex Victorville our choice for ambulatory care. We were intrigued by the opportunity to provide care to inmates, and we wanted to gain insight into their diverse needs and the level of care they require. However, the opportunity was also intimidating in that we were uncertain as to what to expect and what types of challenges we would face. It is our belief that any student who is unsure about their career path should use their rotation rankings to broaden their scope of pharmacy practice and step outside their comfort zone. In doing this, you truly discover what you are capable of.

On the first day, we were given a tour of the Camp. The Camp is one of the institutions at the complex where the population is strictly made up of low security females. It is interesting how it is run. The central pharmacy is located at the Camp. We were able to assist the Chief Pharmacist, CDR Huu Nguyen, in distributing medications at the pill line. The pill line is a mixture of community pharmacy (where many inmates picked up their self-carry medications) and a skilled nursing facility or hospital (where many also came to receive dosages of their insulin and unit dose medications). It is there we witnessed CDR Nguyen go out of his way to help an inmate obtain her medication and build a strong patient-pharmacist relationship.

At the other buildings on the complex (2 medium security and one maximum security, all housing male inmates) as well as at the Camp, we facilitated pharmacist-run ambulatory care clinics with LT Emily Winans. Here, we were able to practice our knowledge in anticoagulation, diabetes, latent TB, and hepatitis C. She showed us the ropes on the first week, but starting the second week, she really allowed us to lead the encounters and practice our clinical skills. Through the clinics, we started to understand the high demand for pharmacists as healthcare providers, and pharmaceutical care in general within the correctional setting. We learned that each patient has his/her unique needs and each plan must be specialized to his/her health requirements.

During the month of October, American Pharmacists Month, we planned and operated a flu clinic for employees. Many employees had specific inquiries regarding flu shots, including the effectiveness, benefits, and repercussions.



FCC Victorville staff members are provided the flu vaccine at a flu clinic organized by the pharmacists and pharmacy students. Picture, Left: Zareh Boyadjian, Michael Twyman, Terry Grant, Deborah Garcia; Picture, Right: Deborah Garcia, CDR Huu Nguyen, LT Emily Winans, Zareh Boyadjian

Continued on [page 18](#)

My Time at TCRHCC

Submitted by: Brandon Scott, PharmD Candidate, University of Arkansas for Medical Sciences College of Pharmacy

Preceptor: CDR Reasol Chino, PharmD.

I am a fourth-year pharmacy student hailing from Little Rock, Arkansas. During the month of October, I had the pleasure of completing one of my clinical rotations at Tuba City Regional Health Care Corporation with CDR Reasol Chino, PharmD. Working on the Navajo reservation was an invaluable experience and one that I am very thankful for. I was given this opportunity to briefly share my experience so that other pharmacy students interested in rotating or working with Indian Health Services or the Commissioned Corps have some sort of idea of what to expect.

My time at Tuba was nothing but positive. The rotation itself, the beauty that is Arizona, and the Navajo culture were all very enjoyable. Sadly, my rotations are only 4 weeks long. However, Dr. Chino was able to set up a schedule for the month that allowed me to see all the opportunities that pharmacists have at Tuba. I was able to gain experience from the outpatient and inpatient pharmacies, including the pharmacy led anticoagulation and diabetes clinics, as well as the newly opened oncology clinic. Pharmacists at Tuba City, and in general, are an indispensable asset to the healthcare team and are more than pill counters. They are able to practice at the top of their license when providing all of the services that Tuba has to offer to the Navajo Nation. To me, that makes for a very rewarding career. The 4 weeks flew by to say the least, but I learned so much within the short amount of time.

By far the top contributor to my positive experience at Tuba was the pharmacy staff. Everyone was friendly and all were receptive to students being in the mix. What I enjoyed the most about meeting and conversing with the staff throughout the month were all the different stories that I heard. There were pharmacists and pharmacy techs from all different walks of life, each with their own story of how they landed in Tuba City. I enjoyed meeting so many interesting people and the friendliness and kindness of the staff made the month that much better. Another top contributor was being immersed in the Navajo culture. I was lucky enough to be scheduled in Tuba for the month of October, which happens to be during the Navajo Fair. The Navajo Nation celebrates throughout the beginning of the month and the last weekend of celebration is held in Tuba City with the Western Navajo Fair. Being able to watch the parade, see all of the colors, and taste the food were all highlights of the month. The culture is rich, the people warm, and again it made the experience that much more rewarding.

Indian Health Service has been at the top of my career goals since I started pharmacy school. By spending the month of October at TCRHCC, I was able to get a firm grasp on what it would be like to work within IHS. Dr. Chino was a fantastic preceptor and set a fine example of what a great pharmacist looks like. As a service member of the Commissioned Corps, she was able to answer all questions that I had about the US Public Health Service, as well as provide much needed advice on my seeking out a residency within IHS. It was 4 weeks well spent and I am very much looking forward to a future career with IHS. Wherever you may be in your pharmacy journey, there are an ample amount of unique and rewarding opportunities at Tuba City, and I would recommend it to any student looking for a great experience.

My Alaska Oncology Rotation Experience

Submitted by: Janelle Solbos, PharmD Candidate 2020, University of Alaska Anchorage/Idaho State University College of Pharmacy

Preceptor: CDR Anne Marie Bott, PharmD BCPS, BCOP, NCPS

I am proud to be a part of the first cohort at the Alaska campus of the University of Alaska Anchorage/Idaho State University (UAA/ISU) Doctor of Pharmacy Program. ISU partnered with UAA to create the first pharmacy school in Alaska requiring zero travel outside the state. I moved to Anchorage as I started elementary school and stayed here to complete high school and my under-graduate coursework. I wanted to stay in Alaska for pharmacy school because it is a breathtakingly beautiful place with abundant adventures to be had throughout the year. I spent my first few years of life in “the village,” a term used to describe the many communities around the state which are isolated from the road system. I am so grateful to attend pharmacy school here and blessed to serve others through outreach events in Anchorage and rural Alaskan communities.

As an Alaska Native, I have looked for ways to serve Alaska Native and American Indian people throughout pharmacy school. I wanted to pioneer new roles to ensure I am comfortable organizing resources, an essential skill needed to provide effective service to remote communities that can only be accessed via boat or plane. After graduation, my husband and I plan to move to a rural Alaskan community to support our passion for serving an Alaska Native community and partaking in the Alaskan outdoor activities of fishing, camping, and hiking. I sought out the oncology rotation at the Alaska Native Medical Center (ANMC) to learn how I can support cancer patients as a pharmacist. Knowing I will serve cancer patients no matter where I work in Alaska, I wanted to understand their concerns, both clinical and emotional.



Caption: Janelle Solbos and her husband Matt taking a break to enjoy the view during a hike through hip-deep snow on the outskirts of Denali State Park



Caption: Janelle Solbos preparing to counsel a customer-owner in the Infusion Center on their home medications

ANMC serves as the oncology referral center for all the Alaska Native and American Indian people across the state. I am fortunate to have the opportunity to connect with patients on a daily basis as I counsel them about their home medications and communicate with the interdisciplinary oncology team to ensure their treatment is optimized. I have had so many amazing experiences during my rotation. All the providers I have encountered have shown a great passion for teaching and patience for mentoring students. I have been able to shadow several disciplines working in the oncology clinic and gained a better understanding of how pharmacists can work within the oncology team to support quality patient care. I was fortunate to be able to interact and follow a patient during several points along their cancer treatment plan. Initially I sat in on their appointment with the oncology provider I was shadowing. Then I reviewed their oncology orders, as a student, to ensure the regimen was appropriately selected, dosed, and monitored. The physician invited me to observe the administration of intrathecal chemotherapy. Before the procedure, I watched the pharmacy technician compound the medication, which has to be verified and observed by two pharmacists due to the high risk with direct administration of chemotherapy into the central nervous system. This was a valuable hands-on learning experience, following the care plan across various disciplines and establishing a connection with the patient.

Fall 2019

JRCOSTEP Journey

Submitted by: Ensign Shana Schriber, PharmD Candidate, JRCOSTEP Summer 2019

Preceptor: CDR Jing Li, PharmD, BCPS

Through navigation of the detailed application process, to being tentatively selected, to progressing past the medical and background checks, to the excitement of receiving notice of my site assignment, these were unforgettable experiences in my Junior Commissioned Officer Student Training Externship Program (JRCOSTEP)/student career. Finally, all the preparation and diligent work paid off when I received my orders from the United States Public Health Service to serve as a junior officer, Ensign. JRCOSTEP journey was an adventure and it truly fulfilled my ultimate student satisfaction experience.

I was selected to serve as a Commissioned Corps Junior officer through an excellent USPHS student program, JRCOSTEP. My assigned location was highly desired indeed, as I was selected to work at the largest Indian Health Services facility, Phoenix Indian Medical Center (PIMC). Located in downtown Phoenix, PIMC is a large complex consisting of a 127-bed hospital, urgent care, and ambulatory care service unit in a major metropolitan area. Although there are over 20 registered Native American tribes in Arizona, American Natives and Alaska Indians travel from all over the country to utilize PIMC as their community pharmacy, for primary medical care, and for other specialized needs. Currently, there are six separate pharmacies that operate on the PIMC campus, including one Main, two In-Patient, Primary Care, Pediatric, and Specialty Care pharmacies. The Main pharmacy is utilized by the majority of the patients as their local community pharmacy and processes over 1000 prescription fills every day.

Upon my arrival, my co-preceptors, CDR Jing Li and LT Abigail Petrusis, asked what areas I was specifically interested in while spending my summer at PIMC. "Everything!" was my reply, and my preceptors went above and beyond to tailor my experiences accordingly. I had the opportunity to witness remarkable practices such as intravitreal injections by an ophthalmologist, Dr. Deepthi Reddy-Rao, to watch a trans-tympanic injection by an otolaryngologist, Dr. Mariel Stroschein, to assist with an Unna boot wound-care dressing while shadowing a very experienced nurse, CDR Shoba Anand, and surgeon Dr. Donna Carman. I was also fortunate to observe a rare diagnosis of bullous pemphigoid in the Dermatology clinic with Dr. Christopher Bengson. Another significant inclusion was a JRCOSTEP exchange with the students assigned to the Whiteriver Service unit! My week-long excursion was packed with adventure and encompassed community engagement, immunization administration, medication requisition, home-visits for high risk infants, and shadowing pharmacists in the emergency department.

I am amazed at how well the pharmacy staff integrated into the ambulatory patient care teams. With four specialty clinics (Rheumatology, Oncology, HIV and Hepatitis C) as well as six pharmacist-run clinics (Tobacco Cessation, Cardiovascular Risk Reduction, Anticoagulation, Latent Tuberculosis, Contraception Care, Immunizations), pharmacy plays a huge role in patient care at PIMC. I had the opportunity to participate in all the pharmacist-run clinics, to work in each of the different pharmacy locations, and was afforded many additional unique opportunities. To name a few, I performed bed-side medication requisition for a newly admitted hospital patient, I learned wound care compounds, I counseled patients on medications for colonoscopy preparation, and I dispensed medications in the emergency department to discharging patients by shadowing an overnight emergency department pharmacist.

Opportunities to expand my learning and assist the staff were plentiful. Pharmacy improvement projects I completed included creation of a United States Pharmacopeia (USP) 797-compliant compounding record for 1:1:1 mouthwash, compiling data for a research project following use of empagliflozin, preparing drug information sheets for Pharmacy and Therapeutics review, and performing a gap analysis for USP 800 compliance updates. I traveled with LCDR Trisha Chandler to an off-site clinic on the Yavapai

Continued on [page 20](#)

Fall 2019

Inspiring the Next Generation of Future Pharmacists

Submitted by: Jessica Pinchinat, PharmD, Howard University College of Pharmacy Class of 2019

Preceptor: Cheryl Gilbreath, PharmD, MBA, R.Ph

In April 2019, the Centers for Medicare and Medicaid Services (CMS) hosted an annual program titled “Take Our Daughters and Sons to Work Day.” This program was designed for elementary and middle school students to come to CMS and shadow their parents. The program theme for this year was “Workforce Development for All” and consisted of presentations and workshops. Howard University College of Pharmacy (HUCOP) fourth year students created and presented this program as part of our five-week advanced pharmacy practice experience at CMS.

During the presentation, we were joined in by one of our preceptors, Dr. Cheryl Gilbreath, a HUCOP alumna. The interactive presentation was titled “Taking the Lead as a Pharmacist” with a fun basketball theme. The profession of pharmacy was paralleled to concepts in basketball that allow a healthcare team to be successful.

Our goal was to be informative, but also fun and impactful for the young audience.

During the presentation, we discussed the various career paths a pharmacist can pursue. We explained how to become a licensed pharmacist, the different duties and responsibilities of a pharmacist and the numerous benefits of being a pharmacist. To keep the students engaged and energized, we included an interactive activity called “Pharmacy Dash”, a pill-counting competition that gave the youngsters a fun way to experience one of the daily tasks of a community pharmacist. The winner was determined by who could count the fastest, and most importantly, count the most accurate number of prescription pills. This activity definitely highlighted the competitive spirits in the room. Overall, the participants seemed to really enjoy themselves. We shared laughter, competitive pharmacy dash rounds and numerous questions. The questions ranged from what happens if you drop a pill while counting in a pharmacy to general challenges that accompany pursuing the profession.



Caption: (Left to Right) Alanna Diggs and Jessica Pinchinat, HUCOP Pharm.D c/o 2019 presenting the profession of pharmacy at the Take Our Daughters and Sons to Work program to the elementary and middle school students

As healthcare professionals, it is important to not only give back to our communities through healthcare services, but also through investing in tomorrow’s leaders. Many accomplished professionals will not hesitate to tell you that it was someone in their past who inspired them to pursue the career that they chose. This is what we hope to have accomplished from our presentation.



Caption: (Left to Right) Dr. Cheryl Gilbreath, preceptor, Jessica Pinchinat, Alanna Diggs, and Amare Anchewe taking a group selfie after the pharmacy presentation at CMS

For any pharmacy student with an upcoming rotation at CMS, we encourage you to make the most of this unique experience. Come ready to learn, be challenged and get involved in projects that will have a positive impact on the healthcare of the people in our national and global community. Seek not to limit yourself solely to the tasks your preceptor assigns, rather make an effort to get involved with other opportunities that will expand your experiences and what you are exposed to while at CMS. Learn about the different centers and offices that make up CMS and last but not least, ask lots of questions and be intentional in your work.

Fall 2019

Ambulatory Care at Oyate Health Center

Submitted by Elizabeth Tupper, PharmD Candidate 2020
Preceptor: LCDR Jason Kinyon, PharmD, MPH, PhC, BCPS



Caption: I enjoyed hiking and running in the beautiful Black Hills of South Dakota while on rotation in Rapid City.

During my first semester of pharmacy school at North Dakota State University, I sat in a class called “Introduction to Health Care Systems” and listened to a guest speaker named Fred G. Paavola, RPh, DSc, FAPhA, Rear Admiral (ret), USPHS. I vividly remember RADM Paavola passionately speaking about the robust opportunities available for pharmacists within the US Public Health Service. He described the pioneering innovations of Indian Health Service (IHS) pharmacists over the past fifty years and the ways in which IHS supports pharmacists to fully utilize all their knowledge and skills. My interest was piqued. During that class in September 2016, I promised myself that I would complete an introductory or advanced pharmacy practice experience within IHS.

Exactly three years later, I’m wrapping up five weeks as an advanced pharmacy practice student with Oyate Health Center (OHC) in Rapid City, South Dakota. As I reflect on my time here, I’m fortunate to report that every expectation that RADM Paavola placed in my mind has been exceeded. About a month before my rotation, the Great Plains Tribal Chairmen’s Health Board entered into a self-determination contract with IHS on behalf of the Cheyenne River and Oglala Sioux Tribes. Twenty percent of the Rapid City facility, however,

is still operated by IHS. In a time of transition and adversity, I’ve been impressed by the way OHC and IHS staff alike have embodied the core values of the USPHS: leadership, service, integrity, and excellence.

As a student pharmacist at OHC, I worked in an interdisciplinary team alongside pharmacists, providers and nurses in the outpatient clinic. I enjoyed providing recommendations to providers that were directly implemented to improve the lives of our patients. I completed various training programs covering tobacco cessation, hepatitis C, diabetes and naloxone, and I eagerly implemented what I learned. I thoroughly enjoyed participating in Pharmacy & Therapeutics Committee activities. I provided information to medical staff regarding vitamin D supplementation, wrote a policy to convert Dulera to Wixela, and began gathering information to add an SGLT2 to formulary. Additionally, I researched primary literature and current guidelines regarding the use of Ozempic vs Victoza and metformin ER vs. IR. I also had the opportunity to build relationships with patients and fine-tune counseling skills related to a variety of medications - from emergency contraception to proper inhaler technique.

I have gained many mentors, greater knowledge, deeper empathy, sharper skills, and stronger passion through my rotation at OHC. My experience has been so exceptional, in fact, that I became interested in pursuing a residency program as a federal pharmacist. My preceptor, LCDR Jason Kinyon, encouraged me to explore options through meeting the residency program director and conducting a site visit at Crow/Northern Cheyenne IHS, where I was warmly welcomed and very impressed. Although I’m not exactly sure what my future holds, I’m confident that within the USPHS, I have the opportunity to be a lifelong learner, grow professionally and personally, and drastically improve the health of an entire population. I am forever grateful to the staff and patients at Oyate Health Center for shaping my future in such a positive and impactful way.

Fall 2019

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

Submitted by LCDR Jacqueline Campbell and CDR Holly Van Lew



IHS National Residency Program group picture at the ASHP Midyear Residency Showcase 2018

The Indian Health Service (IHS) National Pharmacy Residency Program has been somewhat of a well-kept secret in the past; however, as more students find out about the programs through IPPE/APPE rotations and University Point of Contact (UPOC) events, our program continues to grow and expand. Did you know that there are currently 32 PGY1 residents at 28 sites across the country? In recent years, a few sites have also added PGY2 programs, focused on developing pharmacist clinicians with a well-rounded curriculum in the areas of ambulatory care and pharmacy administration.

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, enabling them to practice at the top of their licensure. Each residency program is either ASHP-accredited or has accreditation candidate status with ASHP. In addition to meeting rigorous training requirements, residents are expected to present their longitudinal research projects at local, regional, and/or national conferences. Many of the sites are in beautiful and rural areas of the country. Numerous opportunities exist for outdoor adventures 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 Commissioned Officers with the U.S. Public Health Service. Commissioning is not a requirement, and many residents choose to serve as civil servant (Federal Government) employees. However, after completion of residency training, the Commissioned Corps offers opportunities to serve beyond your duty station through deployments and projects that promote global health advancement.

The PGY1 and PGY2 application deadlines for the 2020-2021 residency year is Midnight EST December 20, 2019. The IHS Residency Match process is separate from the ASHP Match, and selections will be finalized in February 2020. This allows 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/>.

Fall 2019

North to Alaska

Submitted by: Joe Mauer, PharmD Candidate, North Dakota State University School of Pharmacy
Preceptor: CDR Anne Marie Bott, PharmD, BCPS, BCOP

As I approached my final year of pharmacy school and prepared for rotations, I knew I wanted to travel home for some of my rotations. Being a lifelong Alaskan, I thought it would be very rewarding to serve the communities I grew up in. This brought me to the Alaska Native Medical Center (ANMC) for an oncology rotation.

The oncology rotation at ANMC is both unique and challenging. Daily activities range from checking chemotherapy orders, counseling patients on home medications, and various pharmacy-related projects. All of the aforementioned activities provide ample opportunity to learn more about oncology and the processes to run an efficient infusion center. The staff are extremely knowledgeable, welcoming, and supportive of its students. They appreciate your work and provide valuable feedback to help you improve. During my rotation I was also fortunate to be a part of a marrow donor registry drive to help expand the number of potential donors for the Alaska Native people.

When you aren't at the hospital, there are a million places to explore in the state of Alaska. From getting pizza at Moose's Tooth or climbing Flattop Mountain, there are an abundance of activities to fill your free time. The sights are absolutely first class and are just one more thing that made this rotation a great experience.

If you're looking for an adventure, then this is the rotation for you. Not only do you get the opportunity to expand your knowledge, but you get to see the intricacies of a public health facility and to serve the Alaska Native community. This rotation has made a lasting impact on me and I hope to utilize the knowledge and skills I've developed here to enhance my future practice.



Fall 2019

Advanced Pharmacy Practice Experience with FDA's Division of Drug Information

Submitted by: Lauren McKinley, PharmD Candidate 2020, The Ohio State University

Preceptor: LCDR Zachary Oleszczuk, PharmD, BCGP

In school, I tried to imagine opportunities for pharmacists on a larger scale than what is seen in traditional retail or clinical roles. I dreamt of being able to practice pharmacy and create positive changes for all patients. My experience during this rotation at the FDA's Division of Drug Information (DDI) has opened my eyes to endless possibilities for pharmacists to impact patients' lives.

Over 330 pharmacy students will participate in Advanced Pharmacy Practice Experience (APPE) rotations at the FDA this year and I am grateful to have spent four weeks with about 25 students and the DDI team. Immediately upon arriving, I noticed the pharmacists comprising DDI were truly the friendliest and most sincere people I have ever encountered! Besides gaining invaluable professional knowledge, I was able to have many informative and meaningful interactions with others at FDA during the month and that has undoubtedly influenced my future career.

The main function of an APPE student within DDI is to field inquiries from the public and to help callers report adverse events or product quality problems from drugs through FDA's MedWatch line. Anyone around the world can call the FDA with questions, report adverse effects or potential problems and speak with a real person. Previously, I was completely unaware that this amazing service existed and was impressed by how efficiently it is managed. The range of call topics were diverse and challenged me to flex a different communication skillset than I am used to, it involved combining my clinical background with the regulatory parameters of the FDA. I learned and could also educate callers about the importance of their adverse effect reports, how they were collected and analyzed and the impact they could have on drug labeling, safety communications, and/or regulations in the future.

Additional opportunities for students allow for the rotation to be customized. Student lectures are informal presentations about regulatory processes within various divisions of the FDA and enable a student to interact with leaders and other students. These lectures repeat monthly. Other student mentoring pearls, job opportunities, NIH, ASHP, APhA, and historical U.S. Public Health Service (USPHS) mittee (PharmPAC) meetings provide pharmacists serve the nation. I really my schedule to complete the tasks and tizing which sessions I wanted to attend

FDA also hosts other events for em-students can also attend. I attended a about antimicrobials. The FDA was perts, patient advocacy groups and/or to see how interactive the Agency is these meetings occur, covering many program, Rx for Change, a smoking for healthcare providers. This is also



Caption: (Left to Right): Student Lauren McKinley at FDA's White Oak Campus

student sessions include topics such as tours to outside facilities (the Pentasites) and much more. The monthly Pharmacy Professional Advisory Com-real exposure to the USPHS and how enjoyed the independence of managing my projects in the office, while priori-(highly recommend them all!).

ployees and the general public that public meeting discussing a proposal seeking feedback from industry ex-any interested citizen. I was surprised with participants and how frequently subjects. I also completed a training cessation counseling certification/CE provided on a monthly basis and open

Continued on page 19

Fall 2019

Centers for Medicare & Medicaid (CMS) Offers a New Perspective

Submitted by: Ms. Amy Nguyen, PharmD candidate, St. John's University College of Pharmacy and Health Sciences
Preceptor: CDR Jerry Zee, PharmD, MPH, CPH, BSPMM

Throughout my academic career as a pharmacy student, I was always focused on a career in an institutional setting, with the possibility of pursuing a Post-Graduate Year I (PGYI) residency. After some time, my exposure to different organizations at St. John's University introduced me to various career paths within pharmacy, other than the traditional pharmacist roles in community and hospital settings. Thus, my interest in managed care pharmacy sparked over the years while in school. This summer, I had the opportunity to complete my Advanced Pharmacy Practice Experience (APPE) rotation with my preceptor: CDR Jerry Zee, at the Centers for Medicare & Medicaid Services (CMS), New York Region II Office, offering yet again, a new perspective on a pharmacist's role in managed care.

During my rotation with CMS, I was able to partake in various activities that I

had never experienced before, including a Part C & D Coverage Determinations, Appeals, and Grievances (CDAG) audit, a Part D Formulary and Benefit Administration (FA) audit, and a Medicare outreach event. The first week I was there, CDR Zee conducted a CDAG audit. This was the first time that I had ever observed such a meticulous process for making sure that Medicare Part C & D sponsors were appropriately abiding by Medicare rules, regulations, and laws to ultimately provide beneficiaries access to their medications safely and efficiently. I also had the opportunity to shadow the Lead Regional Pharmacist: John Cocchiara, in conducting a FA audit. Here I gained more insight on the auditing process and its associated terminology. Through these experiences, I learned greatly about the ins-and-outs of Medicare Part C & D than I had ever learned in my didactic years. This exposure allowed me to feel comfortable with taking part in a Medicare outreach event at a community health fair in New Jersey. Community members stopped by our table to ask questions about their Medicare coverage, to clarify differences between original Medicare and Medicare Advantage (MA) coverages, and to inquire about Medigap policies.

Furthermore, I had the opportunity to join multiple teleconferences, such as the weekly CMS Regional Pharmacists meetings, USPHS Commissioned Corps PharmPAC general meetings, and various workshops. These teleconferences exposed me to issues and challenges that other CMS regions were faced with, such as the recent concerns with the modification of the Medicare Plan Finder tool linked with a MyMedicare account. Regional pharmacists were able to work collaboratively together to find resolutions to these issues on a higher national level. In addition to these Regional Pharmacists, and PharmPAC general meetings, I joined several webinars and workshops conducted by both pharmacists in the field and pharmacy students, covering topics that range anywhere from alternative treatments to opioids to the history of drug rebates in Medicare. Under the supervision of John Cocchiara, I even created my own presentation about the history of pharmacy benefit managers (PBMs) in hopes of presenting it to CMS regional pharmacists in the fall.

I highly recommend future student pharmacists entering their final year to experience a four-week APPE rotation with CMS, not only to explore a pharmacist's role in another avenue of managed care, but to also gain hands-on experience in and application of Medicare rules and regulations. I truly enjoyed my time here and I'm grateful for the experiences and connections that I have created with the team.



CDR Jerry Zee and Ms. Amy Nguyen at a Medicare Part C & D outreach event in Newark, NJ in August, 2019

Fall 2019

An Unforgettable Experience at Phoenix Indian Medical Center

Submitted by: Ensign Megan Day, PharmD Candidate, JRCOSTEP Summer 2019

Preceptor: CDR Jing Li, PharmD, BCPS

In my second year of pharmacy school, I decided to pursue a USPHS Junior Commissioned Officer Training Extern Program (JrCOSTEP) position to gain more experience in pharmacy, learn more about working for the Public Health Service, and apply my knowledge in both public health and pharmacy. I was very fortunate to have been selected to complete my JrCOSTEP at Phoenix Indian Medical Center (PIMC) in Phoenix, AZ.

My experience began by dispensing and counseling patients receiving new prescriptions, which enabled me to remember important counseling points for medications and practice using open-ended questions. Throughout my 10 weeks at PIMC, I rotated through the outpatient, inpatient, primary care, pediatric, and specialty pharmacies. My preceptor, CDR Jing Li, did not hesitate to schedule me to work alongside pharmacists in pharmacy-run clinics such as the Anticoagulation, Tobacco Cessation, Cardiovascular, Immunization, Birth Control, HIV, Hepatitis C, and Latent Tuberculosis clinics. During each of these clinics, I was quizzed on clinic-associated therapeutics and learned more about how to approach patients such as by using motivational interviewing in the tobacco cessation clinic or sensitive language approaches in the HIV clinic.

I was also able to shadow nurses and physicians in wound care, respiratory, dermatology, and ear/nose/throat to better understand the patient care process and how to counsel patients on their new prescriptions. I attended Pharmacy & Therapeutics meetings and even authored and presented a couple of proposals for new medications to be added to the formulary. My preceptor also arranged for me to spend time in the pharmacies at Salt River Clinic and Whiteriver Indian Hospital. At these locations I was able to round on patients on dialysis, vaccinate patients, attend a substance abuse conference, and assist in a pain clinic.

Pharmacists in the Public Health Service (PHS) are dedicated to their patients, motivated to keep learning, and determined to excel beyond standard requirements. The world of pharmacy in PHS is extremely innovative and progressive. Pharmacists are recruited to reduce patient burden on physicians through the management of chronic conditions by means of collaborative practice agreements.

My time at PIMC flew by and I learned something new every day. I will value the pharmacists that took the time to ask me hard questions and pushed me to excel. My experience as a COSTEP at PIMC far exceeded my expectations and I could not have received better exposure to ambulatory care as a pharmacy student. Working for PHS has further assured my desire for a future career in the Commissioned Corps.



Fall 2019

From The Land of Enchantment to the Last Frontier

Submitted by: Danielle Hess, PharmD Candidate 2020, Virginia Commonwealth University School of Pharmacy

Preceptor: CDR Anne Marie Bott, PharmD, BCPS, BCOP, NCPS

To understand a culture is to live among its people, listen to their stories, and experience their traditions. Different cultures have diverse perceptions of medicine, healthcare expectations, and patient preferences. Therefore, an important healthcare provider characteristic includes cultural responsiveness so that one may truly provide patient-centered care. With this mindset, I have strived to learn from, understand, and immerse myself into as many cultures as possible to provide my future patients with culturally responsive, patient-centered care.



Gallup Indian Medical Center in Gallup, New Mexico.

Knowing that public health studies populations and engages in communities, I wanted to explore the role of a pharmacist within the U.S. Public Health Service (USPHS) from the beginning of my student pharmacist career. Thus, I completed an externship in the “Land of Enchantment” – New Mexico. While serving as a student extern at the Gallup Indian Medical Center, I was not only able to conduct patient visits through the ambulatory care clinics, but also attend Blackening ceremonies around a fire on the floor of a hogan. Through learning the Navajo traditions and witnessing the Medicine Man’s work, a clear illustration of the connection between natural and western medicine was drawn.

In order to gain further experience within the USPHS and to learn from another culture within the Indian Health Service, I completed the Junior Commissioned Officer Student Training and Extern Program (JRCOSTEP) after my second year of pharmacy school. While working at the Stockbridge-Munsee Health and Wellness Center in Wisconsin, I observed and learned the culture of the Band of Mohican Indians. The “people of the waters that are never still” taught me of their traditions, pow-wows, and perception of healthcare. Again, as I observed and learned their culture, I was able to provide

more understanding and thoughtful care to my patients.

With a desire to learn from the largest Indian Health Service site in the United States, I have now spent the past five weeks working with the Alaska Native people at the Alaska Native Medical Center (ANMC). As the oncology referral center for the entire state, ANMC has provided great opportunities to engage with patients each day as I counsel individuals on their chemotherapy and home medications. With the beautiful mountain range in view from each infusion chair window, I have heard fishing stories, home remedies for various ailments, and stories of growing up in the villages. By lending an ear and listening to these stories, I have gained a great appreciation for the Alaska Native culture and a further understanding of its people. This has further allowed me to relate to my patients, build trusting relationships with them, and provide them with valuable knowledge about their medications. I am always grateful when I hear the word “quyana” upon leaving an infusion room.



Alaska Native Medical Center in Anchorage, Alaska.

Continued on page 19

Fall 2019

Fairleigh Dickinson University Career Fair

Submitted by CDR Liatte Closs, PharmD, CDR James Mason, PharmD and LCDR Nancy Scheraga BS Pharm

On November 1st, CDR Liatte Closs, CDR James Mason, and LCDR Nancy Scheraga joined dozens of pharmaceutical companies, hospitals, and federal agencies by manning a booth at the Fairleigh Dickinson University (FDU) College of Pharmacy Career Fair. We engaged with approximately 60 students, speaking to them about both the United States Public Health Service Commissioned Corps (USPHS) and The U.S. Food and Drug Administration (FDA). The students, ranging from PGY1 to PGY4, were enthusiastic regarding opportunities for possible careers in government following their studies.

A distribution list has been created based on the list of all students who visited the booth and were interested in keeping apprised of future opportunities. Our aim will be to send out monthly emails indicating when there are open positions for consumer safety officers within FDA, as well as open vacancies for the pharmacy category in the USPHS. Many students were interested in careers with agencies such as Indian Health Service (IHS) and Federal Bureau of Prisons (BOP) and seemed open to relocation opportunities. With two of us having worked at a total of three BOP sites combined and one officer with Temporary Duty experience with IHS, we were able to share personal experiences with the students.

The career fair, which local officers have attended for the past four years, is also being used as a catalyst to begin hosting Fairleigh Dickinson University (FDU) pharmacy students for rotations in the near future. The relationships we have established at the university will aid in this endeavor.



LCDR Scheraga and CDR Closs manning the FDA and USPHS Booth at FDU's College of Pharmacy Career Fair

Fall 2019

A Wonderful Time at the White Earth Service Unit

Submitted by: Saidee Oberlander, Student Pharmacist Class of 2020, North Dakota State University
Preceptor: Ashley Piehl, Pharm D

When I was looking at rotations for my final year of pharmacy school, there was one thing I knew - I wanted to have a rotation with Indian Health Service (IHS). Everything I had heard about IHS and the role of pharmacists within it excited me. Professors, pharmacists, and peers all said that rotations with IHS were a must do. Now I see what they meant! My time at the White Earth Service Unit has been one of the best rotation experiences I could have asked for, and has opened my eyes to the great impact that pharmacists can make.

During my time in White Earth, I was able to participate in a wide variety of patient care areas. I spent time with pharmacists in the tobacco cessation, anticoagulation, and Hepatitis C clinics helping with managing patients' disease states. To assess safety and need for continued opioid therapy, I worked-up patients for presentation at Medication Safety Committee meetings. I interviewed patients and helped to make therapy recommendations with pharmacists as part of the Pharmacy's Self-Care program. I observed Pediatric Advanced Life Support training, and learned about the ways to care for some of our most vulnerable patients in critical moments. In addition, I conducted a brief pharmacy in-service demonstrating the proper use of Broselow tape in the event of an emergency.

Some of my favorite experiences, however, were the opportunities I had to spend time in the community. On my first week, I assisted with "Diabetes Bingo," a monthly event put on by Tribal Health to educate Elders and other community members about healthy living with diabetes. I also spent a day with a Tribal Home Health nurse making home health visits within the community. One night, I helped provide flu shots at a "Women's Night Out" event at the casino, which promoted health awareness and gave women from the community a fun night out with dinner and an Elvis impersonator. I returned to the casino later in the rotation to help provide Smokylizer testing to Tribal employees.



Caption: (Left to Right) Heather Granvold, CPhT; Saidee Oberlander, Pharm D Student; Ashley Piehl, Pharm D

While all of these were great, one of the best experiences from my rotation was the Naytahwaush Community Health Fair. For the event, my preceptor and I decided to prepare a poster educating about vaping. E-cigarette use is shaping to be one of the biggest health issues of our time, and we felt it was important to present information about it at this event, which we knew would draw people of all ages. It was a wonderful challenge to design a poster to appeal to a wide variety of people and encourage them to take action for themselves and those around them. It was so rewarding to hear people say how happy they were to receive information on vaping, because they were concerned about their children, grandchildren, or friends. One grandmother even told us that she was going to take the information we gave her and drive to her grandson's college to talk to him about it that weekend! Responses like that

really encouraged me to want to pursue more opportunities like that during the rest of my rotations and in my career.

I am so glad I was able to spend time with the wonderful pharmacists and staff at the White Earth Service Unit. They are truly practicing at the top of their licenses and making a difference in the community they serve. I am honored that I was able to spend these five short weeks with them, and I know that I will carry on the lessons they taught me into my future pharmacy practice.

Fall 2019

Continued from [page 4](#)...An Eye Opening Experience at FCC Victorville

sions. The discussion provided us with a good opportunity to educate them about the importance of receiving a flu shot to stay healthy.

We would love to one day join the team at FCC Victorville to expand clinical pharmacy services to include a chronic obstructive pulmonary disease clinic and to focus on the needs of that population. In the clinic, we would provide inmates with proper inhaler techniques as well as counsel on the difference between maintenance and rescue inhalers. This will provide inmates with useful knowledge while at FCC Victorville and in the future. Our rotation at Federal Correctional Complex Victorville was a very rewarding experience. We would recommend it to any student who is interested in this career pathway as well as students who are still undecided.

Continued from [page 6](#)...My Alaska Oncology Rotation Experience

I am so grateful for the opportunity I had to spend so much time counseling patients, it allowed me to form connections and empower patients with knowledge of their treatments. I look forward to applying what I learned about chemotherapy, chemotherapy support medications, and quality patient care to my future practice right here in Alaska!



Idaho State
UNIVERSITY
College of Pharmacy



Fall 2019

Continued from [page 12](#)...Advanced Pharmacy Practice Experience with FDA's Division of Drug Information

to all pharmacy students on rotation with FDA.

DDI encourages students to present journal clubs or public meeting summaries. I wanted to learn as much as possible during my rotation and was proud to contribute to data collection for drug label changes and outreach for the experiential program. A very unique day fell during my rotation. Pharmacy students from Keio University in Japan visited. We attended their presentation and participated in round table discussions.

This rotation far exceeded all of my expectations. I am incredibly thankful for all of the dedicated preceptors and professionals who contribute to the success of the experiential program and take time to teach students like myself all year long. This unforgettable rotation has shown me how pharmacists can have a global impact through the FDA and USPHS. I look forward to applying the knowledge I gained on this rotation towards my dream of contributing to global health. I encourage anyone to apply for this rewarding opportunity. It will benefit all student pharmacists no matter where you plan to practice!

To learn more about the FDA Pharmacy Student Experiential Program visit www.fda.gov/pharmstudentprogram or contact Pharmacy.Student@fda.hhs.gov.

Continued from [page 15](#)...From The Land of Enchantment to the Last Frontier

In addition to connecting with the Alaska Native people, I experienced the work of several interdisciplinary teams by attending weekly Tumor Board meetings, where oncologists, surgeons, pathologists, and many other healthcare professionals meet to discuss unique oncology cases and come to a treatment consensus. I have also observed a bone marrow biopsy and intrathecal methotrexate administration in the operating room, where I learned from the oncologist, anesthesiologist, and nurses. Overall, ANMC has welcomed me with a rich learning environment full of healthcare professionals eager to teach and share their experiences.

With these invaluable experiences, I look forward to continuing to learn from different cultures throughout my career, carrying the knowledge and understanding that I gain with me, to best serve my patients.

**VCU**

School of Pharmacy

Fall 2019

Continued from [page 7](#)...JRCOSTEP Journey

Apache reservation, completed inventory in their pharmacy and assisted pharmacists in the pharmacy-run clinics.

I was able to enhance my public speaking skills by presenting a patient case related S.O.A.P. note, by leading a journal club on a recent diabetic trial, and by giving a topic presentation on cystic fibrosis.

Some of the greatest knowledge I have accrued over the many weeks at PIMC came directly from speaking with the other pharmacists about their experiences working with Indian Health Services and the Federal Bureau of Prisons. I knew before I arrived that I was highly interested in a career in the ambulatory care setting following graduation. Not only has this experience reinforced my goal to follow patients in a clinic-based setting, it has also solidified my desire to serve the U.S. Public Health Service Commissioned Corps and to seek the Senior COSTEP (SRCOSTEP) as progress towards this ambition.

I knew that my time at PIMC would be challenging and educational, yet the phenomenal staff made the expedition extraordinary, priceless, and full of warm memories. I will cherish my PIMC JRCOSTEP journey for many years and am extremely grateful to all those who made an impact on my future.

P.S. As of September 2019, I have been tentatively selected to serve as a SRCOSTEP with Indian Health Service!



Naloxone Prescribing at Zuni Comprehensive Community Health Center

Submitted by: LT Sara Mantick, PharmD and LT Falisha Begay, PharmD

As many of us in the Public Health Service are aware, the opioid epidemic has taken a huge toll in morbidity and mortality in recent years. Because of this, the Zuni Service Unit made naloxone education and prescribing a priority from August 2018 – to the present via the newly formed Zuni Chronic Pain Committee. Prior to the committee's inception in August 2018, only 4 naloxone prescriptions were prescribed at the facility from 08/01/2018 to 12/31/2019. Through education of pharmacy and medical staff, along with education provided to EMS and the community, the committee was able to increase naloxone prescribing by over 100% from 01/01/2019 to present. Eighty – one naloxone kits were dispensed during this time frame, and the committee ensured that all of Zuni's buprenorphine - naloxone patients, and chronic opioid patients were prescribed a kit.

LT Sara Mantick and LT Falisha Begay further aided in this effort by creating a naloxone pharmacist prescribing policy and educating all pharmacy staff on naloxone prescribing and patient counseling. LT Begay also updated all opioid quick orders to include a naloxone kit with pre-conceived directions to help remind pharmacists and providers to evaluate each patient for naloxone kit criteria.

LT Mantick, LT Begay, and the additional members of the Chronic Pain Committee are part of an ongoing effort to ensure safe opioid prescribing, naloxone access, and education to the Zuni Pueblo Community.

Fall 2019

From the Midwest to the Last Frontier

Submitted by Sarah Noble, Pharm.D. Candidate, Class of 2020, St. Louis College of Pharmacy

Preceptor: CDR Anne Marie Bott, Pharm.D., BCOP, BCPS

For as long as I can remember, I've loved to travel. Not only to see new things, but to learn about new places and people from a first-hand perspective. With plans of residency, and then trying to establish myself in a new practitioner role, I knew when I began looking at the available APPE rotation options, I wanted to travel for as many as I could. In looking at the Alaska Native Medical Center rotation and talking to past students, I heard only positive things inside and outside of the hospital. I plan on specializing in pediatric hematology/oncology, but only one elective that our school offers combines those and space is limited. Thus, doing a rotation in each seemed like a great option and ANMC was a great place to not only travel and learn more about their culture, but gain experience in an area of interest.



Caption: (left to right) Carolann, Lauren, Molly, and myself at Matanuska Glacier.

Despite the complexity of cancer treatment, I never felt overwhelmed by the treatment options. The National Comprehensive Cancer Network provides recommendations for standard treatment for each cancer with extensive flow charts, treatment guides, and references. The chemotherapy orders also provide other relevant studies, which back up treatment options or additions to the regimen. There were plenty of opportunities to interact with the patients by counseling them on home medications related to their chemotherapy regimen.

The rotation also brought many opportunities outside the pharmacy. Attending the monthly P&T Committee meeting allowed myself and other pharmacy students to see how the process of getting drugs approved for formulary or the review of recently added medications takes place in the real world. Attending tumor board meetings, although I have no background knowledge about the scans and pathology shown, has also been a fascinating and informative opportunity to see the patient cases being presented and observing the process of collaborative care. Outside of direct patient care, I assisted with various projects. Notable projects include preparing the beginnings of a drug monograph, preparing a drug utilization review, and obtaining information on closed system transfer devices (CSTDs) for subcutaneous and intramuscular injections. All of these opportunities offered insight into the continuum of care and the various parts of cancer treatment and drug utilization that are part of an oncology department.

As far as activities outside the hospital, we wanted to explore as much as we could fit in during our rotation in Alaska. We quickly learned "winter" hits mid-September and that some activities, like visiting Denali National Park, would not be a possibility. For the safety of people driving, the road through Denali, and other national parks, closes during the winter season due to increased snow and/or ice. It is open for winter sports, and the North Visitor Center is open to help guests and even provide them with snowshoes. However, given the distance from Anchorage (4 hours) or Fairbanks (2 hours), the unpredictability of winter weather, and our inexperience with mountain trekking, we decided against this idea. Standing at over 20,000 feet, Denali creates its own weather and unfortunately thwarted plans of a flight tour. Nonetheless, we had a memorable time visiting Girdwood, Fairbanks, North Pole, Talkeetna, Matanuska, and Seward. Highlights included the Alaska Wildlife Conservation Center, seeing the aurora borealis, Chena Hot Springs – including meeting the sled dogs, and a tour of Matanuska Glacier. Being from Missouri, where there are no mountains and no glaciers, the unique sights of Alaska are something I will never forget!

I have enjoyed my time at the ANMC Infusion Center Pharmacy, learned a lot throughout the five-week rotation to help my future goals of working in oncology, and I will definitely return in the future to experience even more Alaska has to offer.

Fall 2019

Inspired to Inspire

Submitted by: CDR Trang Tran and LT Daniil Marchuk

Who would have thought that an APPE student experience at FDA would open the door to an exciting journey of inspiration from a preceptor to a student and influence a new complete cycle of similar events in the future? This is exactly what has happened to a PY4 pharmacy student, Daniil Marchuk, who was selected for a 6-week student rotation experience at FDA by a very passionate preceptor, CDR Trang Tran. This story dates back to August of 2014, when CDR Tran (LCDR at the time) selected Daniil as her very first student from Temple University School of Pharmacy (TUSP) for a rotation at FDA. This was an incredible learning experience for Daniil in all aspects of his professional and personal growth. In a matter of 6-weeks, Daniil gained a wide variety of unique experiences that allowed him to obtain a deep appreciation and solid understanding of FDA's role in protecting and promoting the health of the American public. This influence was so overwhelming that fast-forward 5 years later, Daniil is now a Lieutenant Officer in the United States Public Health Service (USPHS) who serves the Nation and has precepted his first pharmacy student in 2019.

As a pharmacy student, Daniil had a great passion for public health and especially serving the underserved populations. From the very beginning of pharmacy school, he was incredibly inspired by Dr. Frank J. Nice, a retired CAPT from USPHS, who was the main speaker at the White Coat Ceremony for the 2015 pharmacy class. Dr. Nice established a long-standing medical mission to Haiti and organized and led more than 50 medical missions to Haiti. He is a living example of self-sacrifice and care for the sick and poor of Haiti who responded to a God given calling. After hearing Dr. Nice's powerful testimony, Daniil went on two medical missions to Haiti in 2012 and 2014 organized by Dr. Nice and provided clinical care services to patients in remote Haitian villages. Daniil was further inspired to pursue his career with USPHS after the student rotation experience with CDR Tran at the FDA. Upon graduation from TUSP in 2015, Daniil was hired as a staff pharmacist at an Indian Health Service (IHS) hospital to care for the underserved population of Native Americans at the heart of the Navajo Nation, near its capital, Window Rock, AZ. This unique experience not only provided the opportunity for Daniil to serve the underserved, but also helped him refine and develop new clinical skills while working in various pharmacist-run clinics such as smoking cessation, anticoagulation, primary care, and more. Concurrently, Daniil also applied for USPHS and was successfully commissioned in 2016.

After several years with IHS, and now an Officer in the USPHS, LT Marchuk sought an opportunity to impact the public health at large. Having had the APPE experience with CDR Tran, he had a great exposure to the regulatory work at a national level and thus he applied to FDA. Subsequently, he took a position within the Office of Generic Drugs (OGD) as a Regulatory Project Manager to contribute in the efforts to reduce healthcare costs and ensure timely approval of low cost and high-quality generic drugs for the American public. During this time, LT Marchuk became CDR Tran's official mentee and while at OGD, CDR Tran continued to precept many more pharmacy students and sent them all to LT Marchuk for informal mentorship. In addition, CDR Tran and LT Marchuk went on several outreach visits to TUSP to present and talk with pharmacy students and faculty about careers in the USPHS. Through these unique experiences, LT Marchuk became inspired to serve as an official pharmacy student preceptor. In 2019, he precepted his first PY4 student, Sabina Zamanova, from TUSP.

Through these extraordinary rewarding experiences, LT Marchuk had the opportunity to motivate and encourage many students to aspire to their highest potential through the example of his journey and the incredible preceptors that crossed his path by Divine Providence and who deeply inspired him. LT Marchuk is eager to precept more students to promote the cycle of inspiring experiences and continue this legacy. Teaching and mentoring have the profound inspirational effects not only on those that receive it, but on those who practice it.

Fall 2019

Useful Info and Resource Links

Agency	Contact	Telephone	Website	Email
Federal Bureau of Prisons (BOP)	LCDR 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	LCDR 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)	LCDR Jessica Anderson	218-983-6206	www.ihs.gov/pharmacy	Jessica.Anderson@ihs.gov
ICE Health Services Corps (IHSC)	CAPT Jeff Haug	202-494-8081	www.ice.gov/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	CDR Paul T. Michaud	202-475-5171	www.uscg.mil/	Paul.T.Michaud@uscg.mil
Centers for Medicare & Medicaid Services (CMS)	CAPT Jill Peffall	410-786-8826	www.cms.gov	Jill.Peffall@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/
Uniform Information	http://www.usphs.gov/aboutus/uniforms.aspx
USPHS	https://www.usphs.gov/
USPHS PharmPAC Website	https://dcp.psc.gov/osg/pharmacy/
USPHS Pharmacist Listservs	https://dcp.psc.gov/OSG/pharmacy/listserv.aspx
USPHS Student Opportunities	https://www.usphs.gov/student/





United States Public Health Service
Protecting, Promoting, and Advancing the Health and Safety of our Nation.

CORE VALUES

Leadership

Provides vision and purpose in public health through inspiration, dedication, and loyalty

Service

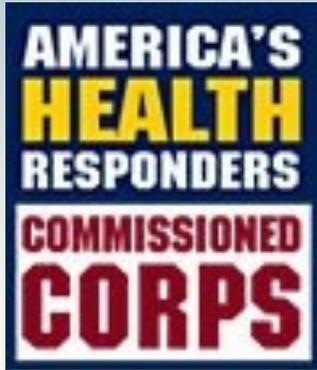
Demonstrates a commitment to public health through compassionate actions and stewardship of time, resources, and talents

Integrity

Exemplifies uncompromising ethical conduct and maintains the highest standards of responsibility and accountability

Excellence

Exhibits superior performance and continues improvement in knowledge and expertise



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!

Editor-in-chief & UPOC Newsletter Workgroup Lead
 LCDR Danica Brown, PharmD, MHCA, BCPS

PharmPAC UPOC Newsletter Lead
 CDR Sadhna Khatri, Pharm.D, MPH, MS, Med



UPOC Newsletter Workgroup 2019

CAPT JoAnn Hittie

CDR Victoria Ferretti-Aceto

CDR Renee Taylor

CDR Ray Ford

CDR G. "Brent" Hobbs

CDR Robert Kosko

CDR Kelley Simms

CDR Christina Thompson

CDR Hawyee Yan

CDR Jerry Zee

CDR Monica Reed-Asante

CDR Carolyn Volpe

CDR Nicole Zelenak

CDR Joshua Wireman

CDR Sadhna Khatri

LCDR Stephanie Daniels-Costa

LCDR Lysette Deshields

LCDR Joshua Hunt

LCDR Ashlee Januszewicz

LCDR Salvatore Pepe

LCDR Steven Rodgers

LCDR Brett Whitehead

LCDR Michelle Locke

LCDR Shannon Saltclah

LCDR Christopher McKnight
 (Workgroup Admin)

LCDR Nga (Nikki) Doan

LT Phuong Nguyen

LT Rachael Oyewole

LT Medison Pavlechko