U.S. PUBLIC HEALTH SERVICE

PharmPAC Perspectives

Pharmacist Professional Advisory Committee Vol. 2 SPRING 2014

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RADM Scott Giberson
Pharmacy Category CPO

Fellow Pharmacy Officers,

At a recent Pharmacy Leadership Summit (photo below), I spoke of our profession being at the "tipping point" of being widely-known and recognized providers of patient care. Since the release of the *Pharmacy Report to the Surgeon General*, pharmacists, organizations, and many profession-wide stakeholders have rallied around the recognition we are receiving within expanded scopes and patient care services provided. The Report has been utilized widely as a tool of evidence-based qualitative and quantitative data, as well as referenced for legislative proposals, academic curriculums, and missions of professional organizations. A growing number of states (23), including California, have now granted pharmacists provider status in legislation, expanded practice acts, and in some states for payment. Over 66% of the population (via random survey) now considers a pharmacist as a 'health care provider'.

The profession of pharmacy is changing. Its central message is that pharmacists can provide many more services and direct patient care to prevent health issues and improve overall health. The profession now comes up in discussions to improve the *Nation's* health because the Nation's needs match our profession's capacity. We are part of the solution to move from a discussion around health care to a discussion around health. I believe we have made a justifiable case and are seeing the results unfold daily. You are all to be credited with this movement that is based upon what you all do to support the mission(s) you serve.

The USPHS is in a unique position to push the profession through this threshold and over the 'tipping point'. If you have ever read Malcolm

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CPO's Message (cont.)

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Gladwell's book, *The Tipping Point*, I would contend that our category illustrates the "Law of the Few". In our complex and multi-faceted health care system, we, in the PHS, can facilitate the net-centric pharmacy leadership that the Nation needs. As leaders in the profession, we have visibility and depth of expertise in more Departments and Agencies in the U.S. Government than any other cadre of pharmacists. The more traditional way pharmacy had addressed the turf issues, static legislation, reimbursement and outputs in health care is now being replaced with dynamic provider collaboration, progressive advocacy based on access challenges, changing payment systems, and outcomes based performance models. This transformative way of thinking however is not just being promulgated by our colleagues in the profession, but also from many non-pharmacy partners and stakeholders. That said, we should seize the opportunity and continue to demonstrate that the health needs of the Nation parallel our capacity as a profession and we have evidence to demonstrate it. We must continue to build on this momentum, for our profession and more importantly, for our Nation's health.

Between 2010 and 2014, reflecting on the status and partnerships of PHS Pharmacy 'then and now', tremendous changes have occurred. You have all made a remarkable impact through tireless efforts, unparalleled volunteerism and productivity, and exemplary diplomacy. We are unified, we are advancing the profession, we are recognized as a profession-wide lead, and we continue to protect, promote, and advance the health and safety of the Nation. We have increased visibility and built stronger coalitions across the profession in both the federal and private sector in many areas of pharmacy in addition to patient care. The PHS Pharmacy 'brand' is evident! **Reflecting upon the last 4 years as CPO, I realize the incredible privilege you have all afforded me. The pharmacist officers in our category exemplify what it means for our Corps to be relevant, valued and mission-driven. It is, without doubt, the most inspiring category of officers in the entire Corps. Bravo Zulu, my fellow pharmacists and officers…..Bravo Zulu!**

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PAC Chair's Corner

Welcome to the PharmPAC Perspectives Spring Issue. Spring marks a time of new beginnings, a time when the sun warms up the earth, the rains fall, and the trees blossom. We can reflect on the seasons we have in our lives and our careers. There are seasons and cycles within the PharmPAC as well. We have promotions, professional meetings, and residency programs that all have their own timelines. In particular, every four years, the cycle of the Chief Professional Officer (CPO) comes to an end and also a new start. RADM Scott Giberson has fulfilled his CPO term and has served the Pharmacy category and the Corps with commendable leadership and with focused dedication.

At our last PharmPAC general meeting, we were able to acknowledge RADM Giberson's contributions to our category and to the pharmacy profession. He has accomplished so much in a very short time and still remains an energetic and highly motivated officer who passes his enthusiasm for life and for pharmacy on to us. He is the embodiment of a committed officer, and he selflessly asks for nothing in return except that we each do something to advance the pharmacy profession and the Commissioned Corps. What are you going to do to advance the pharmacy profession? It could be creating an innovative collaborative practice, educating pharmacy students about their potential as providers, or making a positive change in a patient's life that leads them to pursue a healthy lifestyle. There are innumerable ways to contribute to pharmacy and the extraordinary legacy left to us by our CPO.

There is much appreciation for RADM Giberson's unwavering leadership these last four years and we are grateful and proud of the bright spotlight he has left on our profession. His passion and innovation has driven our category to be the strongest it has ever been. Even though his term has ended, it is the beginning of a new chapter for him and the Commissioned Corps. We will make a new start with our greatly anticipated incoming CPO. There will be new ideas and new ways of doing things, but together, we will continue to uphold the momentum that has propelled PHS pharmacy to the forefront of innovative health care practice.

LCDR Marisol Martinez
PharmPAC Chair

Healthy Lifestyle and Fitness

ANTI-INFLAMMATORY FOODS FOR HEALTHY LIVING

CDR Ed Houser, RPh

As we get older our bodies hurt a little bit more. This can be a result of enjoying our time taking advantage of outdoor activities such as hiking, mountain biking, or backpacking in the Grand Canyon and Havasupai Indian Reservation. There are ways we can help with the inflammation associated with these body aches and pains.

Let's face it, the American culture has poor eating habits. We consume soft drinks and unhealthy fats while there are more healthy alternatives. Unfortunately, often one has to go out of the way to find these foods. Following are some anti-inflammatory food choices to consider.

Chocolate

We all enjoy chocolate. There are healthy alternatives to my hometown's Hershey bars. Those that contain 70% cocoa or more are recommended in small amounts. Example products are Godiva and Ghirardelli.

Tea

Many of us like tea. I enjoy my east coast hometown's Swiss Premium tea that is now available in Minnesota. White, green, and oolong teas are

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Healthy Lifestyle and Fitness

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good options. Green tea is also available caffeine free. Adding sugar lessens the benefits.

Fruits and Vegetables

The mainstay in any diet is something many of us neglect to eat on a daily basis: fruits and vegetables. You cannot go wrong with eating any type of berry; such as raspberries, blueberries, or strawberries. If you cannot buy these fresh (they can be expensive), consider frozen.

Whole Soy

Whole soy foods are good for anyone striving to eat healthier. These foods do not contain unhealthy fats. Recommendations are to eat a low red meat diet. This is not easy for me since I like Lebanon bologna. Examples of soy based foods are tofu and soymilk. I eat tofu right out of the plastic container. Here is a link for tofu recipes: http://allrecipes.com/recipes/everyday-cooking/vegetarian/vegetarian-protein/tofu/.

Beets

Beets have excellent anti-inflammatory properties. Betanin and vulgaxanthin are the two most studied betalains from beets. Both have been shown to provide antioxidant and anti-inflammatory properties. Preparing beets can be a very time consuming process. I have found the best way to prepare them is to cut the large ones into quarters and steam them for 15 minutes. Be careful not to overcook. The betalains are very sensitive to temperature and overcooking will result in reduced health benefits. WARNING: Beeturia (Reddening of the urine) and reddening of bowel movements is very common in every day amounts!

Food Pyramid

The food pyramid is a more extensive food guide that suggests foods which have anti-inflammatory properties. I still enjoy pizza, ice cream, and my sweet iced tea but try to limit the amounts. I hope by allowing myself to eat small quantities of my favorite foods, I

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Dr. Weil's Anti-Inflammatory Food Pyramid

Healthy Lifestyle and Fitness (cont.)

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will be more likely to make wise food choices the rest of the time, resulting in lifelong healthy habits.

Running a Half Marathon, A Beginner's Perspective

by LT Andrew Gentles

It is 7:00 a.m. on a chilly Sunday morning in downtown Phoenix when the ultimate race we have trained for is about to begin in 50 minutes. There are over 20,000 runners of all ages from different states and countries with looks of excitement, nervousness, and pure uncertainty. At 7:30 a.m., my exact thoughts however were: *What am I doing here*? *Did I train well enough*? *Am I truly ready to race my first half marathon*? For some unknown reason, I did not know why these questions seemed to get louder as the clock ticked down to race time. I quickly realized that my success in this race was going to depend on 90% mental toughness and 10% physical fitness. It is you versus you! Fortunately, I remembered an inspirational quote by Doris Brown Heritage, who stated that "Running is a road to self-awareness and reliance; you can push yourself to extremes and learn the harsh reality of your physical and mental limitations or coast quietly down a solitary path watching the earth spin beneath your feet." This quote would prove invaluable as I grudgingly looked forward to the challenge of running my first half marathon.

Dr. Andrew Coogan, PharmD; LT Andrew Gentles, PharmD, BCPS; LT Valerie Cooper, PharmD, BCPS, NCPS and LT Carlisha Gentles, PharmD, BCPS

At 7:48 a.m., there is a moment of silence as we all pay our respects to the victims of the Boston Marathon bombing. My wife, LT Carlisha Gentles is on the sidelines proudly cheering us on and after giving the thumbs up to my fellow teammates, LT Valerie Cooper and Dr. Andrew Coogan, the race begins! We are now officially running the 2014 P.F Chang's Rock 'n' Roll Arizona Marathon & Half Marathon. Our teammate, Dr. Coogan has quickly left us in the dust as LT Cooper and I stick to our game plan of running our own race. Our strategy was simple. By running a slower pace during the first half of the race, we planned on having a smart and enjoyable race. It is easier said than done, but the music blaring from the rock 'n' roll bands and screaming spectators served as a wonderful distraction with each mile marker. The difficulty of sticking to an 11:00 pace becomes even more challenging as pain and self-doubt begins to increase in frequency.

However after passing mile marker #6, a remarkable feeling of "mental clarity" and being "in the zone" took over. It was clear: This half marathon would not defeat us, it would become our personal best! For the next 7 miles, we were comfortably running an 8:30 pace. Crossing the finish lane imparts a mixture of emotions as we realized that mental toughness & teamwork is truly the key to success when there are physical and professional challenges. I finally ran my first half marathon!

As officers assigned to the Chinle Service Unit in Chinle, Arizona, preparing for the half marathon meant weekly training runs after work in 6000 feet of elevation. It also meant encouraging each team member to stay focused on our training plan. There were times that our work schedules prevented us from running, but the advantage of training as a

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Healthy Lifestyle and Fitness (cont.)

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team helped us keep physical fitness a top priority for everyone. Whether helping other PHS officers with their Annual Physical Fitness Tests (APFTs), hiking, cycling or swimming, fitness became a natural part of our team's lifestyle. Next on our list is to participate in the 2014 Steamworks Half Marathon and the San Francisco Marathon. Wish us luck!

How do YOU train for the APFT?

LCDR Reasol Agustin and CDR Juliette Touré

CARDIOVASCULAR TIPS:

Walk as much as possible. Take the stairs and park in one of the farthest spots. Play/run around with my dogs, for at least 30 minutes one to two times every evening and multiple times on the weekend. They need to be played with and I need to be physically active. I try to keep active with outdoor hobbies. My wife and I love being outdoors and you will often find us riding bicycles, hiking, playing soccer, climbing mountains, jogging, white-water-rafting, etc. Whenever we travel, we try to do at least 1-2 outdoor physical adventures. These are some of my favorite memories and none of them felt like I was working out, but rather having fun.

LT Christopher LaFleur

The routineness of just lifting weights, or just running most days of a week became dull. I started mixing it up by taking gym classes like Boot Camp and Total Body Conditioning once or twice per week. On other days I might jog a few miles or do weight training.

CDR Dan Brum

Running has never been my strong suit, so I am starting off with a walk-run routine for now. I run the first quarter mile at 5.5 mph, then walk for half of the first curve and then run the remainder of the quarter mile at 5.6 mph, and so forth increasing my speed with each quarter of a mile. I tell myself that I can do it and that I will get better if I keep working at it.

CDR Kenda Jefferson

This is for those who are not avid fans of running. I start by walking on the treadmill at a high incline (10 -12). I walk at a moderate speed for 10 minutes, increase the speed for 3 minutes, then back to a moderate speed to bring my heart rate down for 5 minutes and repeat. I do this for at least 30 minutes, ideally 50 minutes. I also had someone run with me who was a runner, and he pushed me to keep going and even speed up towards the end.

CDR Tracy Reed

In the Last Frontier, training for APFTs can be a challenge. I have picked up some new hobbies here in Alaska; namely snow/ice running, cross-country skiing, snow biking as well as snowshoeing. All are great endurance exercises that prepare me well for the APFT. Not only does it make me a better runner but I have developed awesome core strength and have a blast while I'm doing it! This type of cross-training about five days a week keeps my stamina high so that I can pass my APFT. Find a sport that you enjoy and indulge!

LT Jessica Thompson

I stay fit during the year with activities I enjoy, while taking advantage of what the area I live in has to offer. For example, I snow ski in the winter and I hike in the summer. In the months leading up to

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Healthy Lifestyle and Fitness (cont.)

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APFT, I will dry-run the test to double-check my level of fitness. Once I know what my weaknesses are, I put in extra work to improve my score. For example I will shorten my run distance to 2 miles from 4 to improve my run time. The key for me in staying fit is to keep it interesting and always be willing to participate in new activities, e.g., volleyball, disk golf and ultimate Frisbee. There are lots of activities available that do not involve membership in an expensive health club, which you may or may not use. Keep up the "PACE!"

LCDR Mark Iseri

Sign up for a race with fellow officers and motivate each other until race day.

LCDR Chung-Davies, LCDR Skariah, LT Corser, and LT Fox

ABDOMINAL STRENGTH TIPS:

For the sit-ups, I place my toes under a bar or the couch and do as many as possible. Now turn around and put your hands under the bar or couch and do as many straight leg lifts as you can do. Again, do 3 sets.

CDR Kenda Jefferson

For the side-bridge, what has worked for me at the time of the APFT: 1) having a soft-non-slip surface, e.g., yoga mat, 2) distraction in the form of good music, motivating group setting, or conversation with my proctor, 3) having a time goal in mind and having my proctor alert me of milestones, e.g., every 30 seconds, 4) focusing on breathing throughout, and 5) shifting my focus on different parts, e.g., when my fore-arm hurts, I focus my attention on anything but the pain and lift my side up.

CDR Juliette Touré

UPPER BODY TIPS:

For the push-ups, I have to start out doing modified push-ups or "girl" push-ups on my knees. I do as many as I can, then rest for 30 seconds and do it again. I do a set of 3 and then move on to regular push-ups. Again, I do as many regular push-ups as I can but when I can't do anymore, I drop down and do as many modified push-ups as I can. Sometimes I will just maintain the starting position of the regular push-up and hold it as long as possible.

CDR Kenda Jefferson

Every Monday, Wednesday, and Friday, myself and 2 other officers, will do 3 sets of push-ups before we eat lunch. We only have a 30 minute lunch, but we get our lunches ready between sets, allowing us to still have time to eat, relax, and get a workout in. As for Tuesdays and Thursdays, we do the same thing as far as timing, however we do planks to improve abdominal and core strength.

LT Christopher LaFleur

I just wanted to quickly share what we have adopted in our pharmacy. All 3 pharmacists currently working at the Peach Springs Health Center Pharmacy are officers in the Public Health Service. We recently adopted a push-up routine to help us prepare for the push-up portion of the APFT. If you Google 100 pushups in 6 weeks, or go to www.hundredpushups.com, you can print out a 6-week regimen that you can follow and tailor to your individual strength. We all tried to follow the 6 week schedule to see if we were able to complete 100

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Healthy Lifestyle and Fitness (cont)

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pushups in 2 minutes after working out for 6 weeks. Only one of us successfully completed that challenge, but it really helped us increase our strength and endurance, and I personally went from only being able to do 10 pushups (after sitting around doing nothing for 6 months) to level one in the pushup section of the APFT. I then tried to combine doing the pushups 3 days a week with running a mile and a half right after completing the pushups, to further prepare me for the APFT. It has been a great tool for me and for my colleagues!

LT Scott Myers

Push-ups – set a goal of 10 every day. Do as many standard push-ups as possible, then do "girlie" push-ups if needed to get to your goal. Increase doing the standard push-up by 1 each day. When you reach 10, increase your goal to 15, etc. It also helps to do these fast vs. slow.

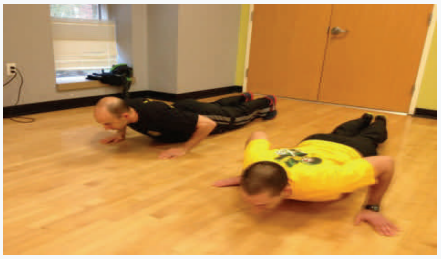
CDR Tracy Reed

In preparation for the APFT, I have a goal of how many push-ups I want (or need) to do and a strategy of how to break it up. Throughout the push-ups, I focus on breathing out with each push upward. I do sets of pushups that add up to my goal and hold in plank position between sets. The sets inevitably get smaller toward the end, i.e., sets of 1 or 2, but with the goal in mind, I usually get there.

CDR Juliette Touré

GENERAL FITNESS TIPS:

I try to do something fitness-related every day because I know something will come up at least one of those days. I decided to join two gyms, one at work and the other within five minutes of home. On my busiest days I tell myself that even 20 or 30 minutes is OK. There are 1440 minutes in a day; we should all strive to use at least 30 of them for physical exercise.



CDR Dan Brum & Colleague

I enjoy doing long-distance endurance events from time-to-time. Some of my favorite events were completing a 47-mile trek of the South Rim of the Grand Canyon, Ironman Arizona, and the Leadville Trail 100 mile run. I also fit in weight-training and calisthenics a few times each week at a local CrossFit gym. I maintain my fitness by staying active and eating a plant-based diet. For me, so much of physicality is mental fortitude. I just sort of make a decision and follow through on that promise.

CDR Peter Diak

The important thing is to do something. Don't compare yourself to others around you. Do what your body will allow you to do and keep doing it. You will eventually get better and feel better about yourself. Hopefully you will increase your APFT fitness level and submit the paperwork for a PACE certificate. I read somewhere that a body in motion stays in motion. It's time to get in motion!

CDR Kenda Jefferson

As I have gotten busier at work and with graduate school, I find it harder to motivate myself to go to the

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Healthy Lifestyle and Fitness (cont)

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gym regularly. So, I force myself to keep fit, at least during the summer and fall, by signing up each year for a race event. This year I signed up in March for a September sprint triathlon. Registering for a future race is one sure-fire way to force you to adopt some type of training schedule that will keep you moving & on track until you meet your race goal. And then you get the personal satisfaction just by finishing! In my case, since I am a faster swimmer than runner, my triathlon swim training actually helped me achieve a high score in my APFT this year, by doing the 500 yd swim rather than 1.5 mile run.

LCDR Kelly Ngan

Get Connected...

To help you train like an Admiral, you now have APFT and fitness resources at your fingertips. PharmPAC has launched a one-stop shop for setting, training for, and achieving your APFT goals. We are leveraging technology to connect us on the ***NEW APFT Initiative Website*** at:

https://sites.google.com/site/usphspharmacyreadiness/

APFT Locator Map Help your fellow officers, especially those in more remote locations, by volunteering to proctor their APFT or providing information on upcoming or regular APFT events.

APFT Fitness Resources Try looking for a pool or indoor gym at a local military facility. This page has the link and other fitness resources for each of the exercise components of the APFT, e.g., smart phone app suggestions. Feel free to share with us your favorite fitness resources, so others can benefit too!

"Dear Jess" Column Do you have specific questions about fitness or the APFT? Pharmacists with experience in personal training are here to help. Don't worry, your information will be confidential.

PharmPAC-PACE Program Challenge your level of fitness this year and earn the **PHS APFT Certificate of Excellence (PACE).** PharmPAC-PACE certificates will be awarded to pharmacists who meet any of the following criteria:

- Complete first time APFTs and attain APFT Fitness Levels 1 - 4 (awarded one-time only)
- Increase APFT Fitness Level compared to the previous APFT Fitness Level recorded (awarded with each increase in APFT Fitness Level)
- Attain APFT Fitness Level 4 on any APFT (awarded once per year) Qualifying APFT must be completed on or after May 1. Send an email: PharmPACReadiness@fda.hhs.gov or reach out to your PharmPAC-PACE liaisons – they will be happy to help:
- **PharmPAC Pace Liaisons**:

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Pharmacy Spotlight

Food and Drug Administration Advanced Pharmacy Practice Experiential Training: The District Field Office Perspective

CAPT Thomas Berry, CDR Matthew Dionne, and Fallon Wu, Pharm.D. Candidate, University of Colorado.

The last year of pharmacy school includes experiential rotations, exposing Pharm.D. Candidates to various aspects of pharmacy practice which may interest them. This process allows each student to contribute their efforts to more focused career tracts. Although multiple aspects of clinical and community practice are emphasized, there has been a deficiency in the opportunities that students can elect from within the realm of regulatory affairs. The Food and Drug Administration (FDA) offers experiential rotational training which is supported by the Center for Drug Evaluation and Research. During this current rotation year, 246 students were selected for Washington, DC area experiential positions, with no options for students within other regulatory field offices.

Viewing this situation as a potential outreach opportunity, the Denver District Office of the FDA, with support from the District Director, Branch Directors for Investigations and Compliance, Denver Laboratory, and many other essential personnel, offered a regulatory field experiential rotation for pharmacy students. In conjunction with the University Of Colorado School Of Pharmacy, Adjunct Professors CAPT Thomas Berry and CDR Matthew Dionne organized and operated the rotation. Each of these officers brings extensive experience in regulatory affairs, applicable to the high quality standards expected from pharmaceutical production as well as the clinical application of significance to regulatory outcomes.

The six week experiential rotation has been offered since May 2012. Thus far, we have had six students participate. The experience includes exposure to current Good Manufacturing Practice (cGMP) for pharmaceuticals, product recalls, and regulatory analytical processes; access to training modules offered through the Office of Regulatory Affairs University (ORAU); and an orientation to regulatory compliance law associated with the Federal Food, Drug, and Cosmetic Act. As a final outcome, students are expected to produce a well written paper and subsequent formal presentation relevant to a past or current regulatory issue related to pharmaceuticals. Examples of presentations given thus far include: current and future legislation pertaining to pharmacy compounding; patent issues associated with bio-similars; the use of red yeast rice in dietary supplements; FDA regulatory oversight of stem cell derived drug products; Naegleria fowleri and nasal irrigation devices; and regulatory discretion pertaining to orphan and drug shortage issues.

Fallon Wu, Pharm.D. Candidate of the University of Colorado, provided insight into her experience during her recent FDA rotation: “With previous traditional rotation experiences, I found myself compounding sterile products in hospital clean rooms and counseling patients in the aisles of retail pharmacies. In these individual pharmacy settings, healthcare professionals primarily concern themselves with the well-being of individual patients. Here at the FDA’s Denver District Office, the actions of investigators and compliance officers have the potential to impact the health of millions of patients. The regulatory scene is incredibly dynamic, requiring FDA personnel to frequently interact with members of the general public, manufacturers, and other regulatory agencies. As a student, I had the opportunity to learn about the different regulations the FDA is tasked with enforcing in order to protect our population. If necessary, the FDA will take action to ensure that the products available to patients are both safe and effective.”

“My time at the FDA Denver District Office has been challenging and remarkably different from any other rotation I have completed. I would highly recommend this rotation experience to all pharmacy students, as regulatory decisions and actions have the

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Pharmacy Spotlight (cont.)

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potential to impact each and every subfield of the pharmacy profession."

The students receive significant exposure to FDA procedures and responsibilities for ensuring food supplies are safe, wholesome and sanitary; human and veterinary drugs are safe and effective for use; and biological products including blood, vaccines, therapeutics and related drugs and devices are reviewed and approved for use. They also observe our regulatory efforts to promote and protect the health of the public.

The student program has given FDA employees a renewed appreciation for the significance of their work, and all students have left our program as advocates for the FDA. This outreach experiment is an ongoing success story validated by requested participation from other schools of pharmacy and significant competition for our limited slots. Consequently, we hope that this program will be replicated by other FDA field offices.

CDR Matthew R. Dionne, Pharm.D., BCPS, MBA
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The FDA Denver District Office of Compliance (from left to right): Fallon Wu, Pharm.D. Candidate, CDR Caroline Le, Nancy Schmidt, Carolyn Pinney, Sarah Dellafave, Howard Manresa, CDR Matthew

Pharmacy Spotlight (cont.)

"IHSC Salutes CAPT Don Brown"

CAPT Chae Chong

I still remember the day when I was sitting nervously at the corner of an empty exam room at the BOP answering interview questions from CAPT Don Brown for a position with legacy Division of Immigration Health Services (DIHS), now Ice Health Service Corps (IHSC). I recall how CAPT Brown introduced himself during my interview as "The Chief of Tele-Health." I thought to myself, "What exactly is a Chief of Tele-Health?" In order to understand that and many other roles CAPT Brown had assumed throughout the years, one had to know what being a PHS officer meant, and what that could possibly translate into with pharmacy as a base. As a PHS officer, the professional pharmacy category affords unparalleled career versatility, professional achievement, and public service. As I got to know CAPT Brown, I learned that he had many different and unique roles simultaneously both at DIHS Headquarters and DIHS facilities across the country. As such, CAPT Brown had been a Health Service Administrator, Chief Pharmacist, Chief of Tele-health, and an Interim Director of DIHS. In these past 14 years of knowing him, CAPT Brown has been an instrumental and inspirational force as my supervisor, advisor, mentor, and sincere friend who encouraged and challenged me to advance my career further.

"Chae, I know covering multiple sites can be challenging, but you can operate the central tele-pharmacy to fill three facilities in the East region. I will help you."

"Chae, I need your assistance covering the pharmacy program as Acting. You can do it. I will help you."

"Chae, you can pursue your Doctor of Pharmacy degree; I am sure you will be able to do it well."

From CAPT Brown's numerous statements, he was prescient because I was able to accomplish all the things that he had encouraged me to do as a junior and senior officer. In addition, he had kept his promise to help me numerous times while not wanting any type of recognition in return for his time and professional opinions. Without his guidance and friendship, I don't think that I could've been the best that I could be, and I'm proud to be wearing the uniform of a PHS officer.

Thank you, CAPT Brown, for your trust in me from day one. I really appreciate your kindness and keen leadership not only in my career, but the careers of many others in our organization. Behind the scenes, you have been such a fortress and visionary for the program that we can proudly say "The IHSC Pharmacy Program is one of most efficient, organized, and well-run programs that provide the highest quality of pharmaceutical care for our patients!" With the path that you laid out as a shining example, it is now my turn to continue the wonderful tradition of officership, mentorship, and friendship for our junior officers in pharmacy. "LT, you can initiate; you can achieve; you can lead; I will help you!"

On behalf of all IHSC Pharmacy staff, we would like to thank you for everything, and wish you all the best in the next chapter of your life's journey.

Note from the contributor: The pharmacy program within the agency, the ICE Health Service Corps, grew from 10 pharmacists in 2000 to a total of 19 elite

CAPT Brown at the Tinian Island Mission of 1999 with fellow Emergency Medical Response Team members (CAPT Brown is the second from the left)

Pharmacy Spotlight (cont.)

pharmacists under his quiet leadership, in order to provide quality and comprehensive pharmaceutical care to all undocumented immigrants detained by U.S. Immigration and Customs Enforcement.

A Junior COSTEP's perspective on the Office of the Surgeon General

LT Melody Sun

As I walked to the stage of the U.S. Public Health Service (USPHS) Commissioned Corps Promotion and Award Ceremony on August 6, 2013, I felt incredibly honored to be a part of the only Uniformed Service globally with a sole focus on supporting public health. At the time I was called to Active Duty, I had no idea that this would turn out to be an opportunity of a lifetime.

I had a summer assignment working in the Office of the Surgeon General (OSG). Through this experience, I had been fortunate to witness the historic leadership transition from the 18th U.S. Surgeon General VADM Regina M. Benjamin to the current Acting U.S. Surgeon General RADM Boris D. Lushniak. The Surgeon General is responsible for providing the best scientific evidence to support the Nation's public health, and overseeing the operation of more than 6,700 highly qualified public health professionals dedicated to advance our Nation's health.

Because I am a junior officer in the USPHS Pharmacy category, the main focus of my office responsibilities involved research surrounding the Surgeon General's Call-to-Action on Medication Adherence. Many factors influence medication adherence in an individual, from personal beliefs to access to care. This complex issue involves the coordination of care between physicians, other health care professionals and patients. The OSG takes careful measure to provide guidelines to stakeholders on reducing the potential risk associated with medication non-adherence. As a pharmacy student, I was excited to be involved with the policy-making process. I believe that this unique experience will certainly enrich my professional development in the future.

In the Office, my dual identity as a doctor of pharmacy student and a junior commissioned officer student extern (JRCOSTEP) gave me priceless insight into the exploration of possible career paths. From serving as the aide-de-camp to RADM Scott Giberson (currently Acting Deputy U.S. Surgeon General) to participating in the *Surgeon General's Walk to Wellness,* every event showcases the core values of the Commissioned Corps. RADM Giberson's mentorship and his obvious passion for the Corps and the pharmacy profession certainly have inspired me to strive to become the same kind of effective, efficient and enthusiastic pharmacist with the bonus of leadership skills.

As we celebrate the 100th anniversary of the U.S. Public Health Service Commissioned Corps, it is important to realize that there is still work to do in promoting our Nation's health. As a temporary member of the Office of the Surgeon General, I was lucky because I happened to work for a summer in a place where one can witness leadership, integrity and impact. As a JRCOSTEP, my real take away is "to have the good fortune to be made welcome as part of the USPHS team -- the most skilled and dedicated uniformed health professionals on the planet."

Leading with Sole

LT Dien Nguyen

On the 15th of February 2014, LCDR Jodi Nakai, LCDR Burt Tamashiro and I attended the 15th annual *West -Mitchell Invitational Drill Meet* at Phoenix Sky Harbor Air National Guard Base. The event was hosted at the 161st Air Refueling Wing with 23 schools in attendance and included more than 400 students from all over Arizona, representing the U.S. Air Force, Army, Marines and Navy. To some, this may be just another competition but to these Junior Reserve Officers Training Corps (JROTC) cadets, partici-

Pharmacy Spotlight (cont.)

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pation in this competition displayed their dedication and pride for their program. “We are all so close and nothing in the world compares to the JROTC program,” said Cadet John Simon, Thunderbird High School.

When we were invited by MSgt. David Morgan and TSgt Brian Jones (US Air National Guard) not only to attend but also as guest judges, we humbly accepted the invitation. To be frank, we were not familiar with drill meets. However, the opportunity to expose the United States Public Health Service (USPHS) Commissioned Corps to other uniform services outweighed our discomfort and we dedicated the time to prepare ourselves for the event. We wanted to take this opportunity not only to educate ourselves of our sister services but also provide our sister services an opportunity to learn about us as well.

Over fifty volunteers dedicated their time to help make this meet a successful event for the JROTC cadets. My commanding officers and I had the honor to work alongside other uniformed services. Of those we were in contact with, only one individual was familiar with the US Public Health Service. We seized this opportunity to provide education and proudly exclaim “We are pharmacists of United States Public Health Service!”

Although it was a long day under the sweltering Arizona sun, the volunteer crew hosted a very successful meet for the JROTC cadets. We are truly proud to see these dedicated students pour their hearts into each step of their drill routines. May we be inspired to follow the examples set by these young leaders to wear our uniforms with pride and dedicate ourselves to serve the mission of the United States Public Health Service Commissioned Corps.

Courtesy of U.S. Air National Guard 1st Lt. Rebecca Garcia

CW Vitt, SrA Holmes, LCDR Nakai, TSgt Sanchez (left to right), Photo by LT Nguyen

Pharmacy Spotlight (cont.)

Semper Paratus. PHS Pharmacists Serving the US Coast Guard Mission with Honor, Respect and Devotion to Duty

LCDR Khang Ngo

What is it like to be a Public Health Service pharmacy officer in the US Coast Guard (CG)? I was recently given the unique opportunity to complete a temporary duty assignment (TDY) at the USCG Base Seattle to get a glimpse of the tremendous responsibilities of a Coast Guard pharmacist. It was a distinct privilege and an inspiring experience to witness one of the many locations around the world where PHS officers serve our country.

The US Coast Guard is a multi-mission, maritime military force. Today's Coast Guard roles include maritime safety and security, law enforcement, protection of natural resources, management of maritime traffic, commerce and navigation, and national defense. However, the Coast Guard is in many ways a humanitarian service. This is certainly what I observed during my TDY. No matter the duty, the men and women with whom I interacted displayed a sincere desire to help others. Beyond professionalism, I saw first-hand the integrity and genuine commitment to teamwork. It's almost as if being a Coast Guardsman transcends work and extends into a way of life. The service members of the Coast Guard embody the core values by which they work and live – Honor, Respect and Devotion to Duty. It was very evident that these values are engrained in the people and culture of this organization.

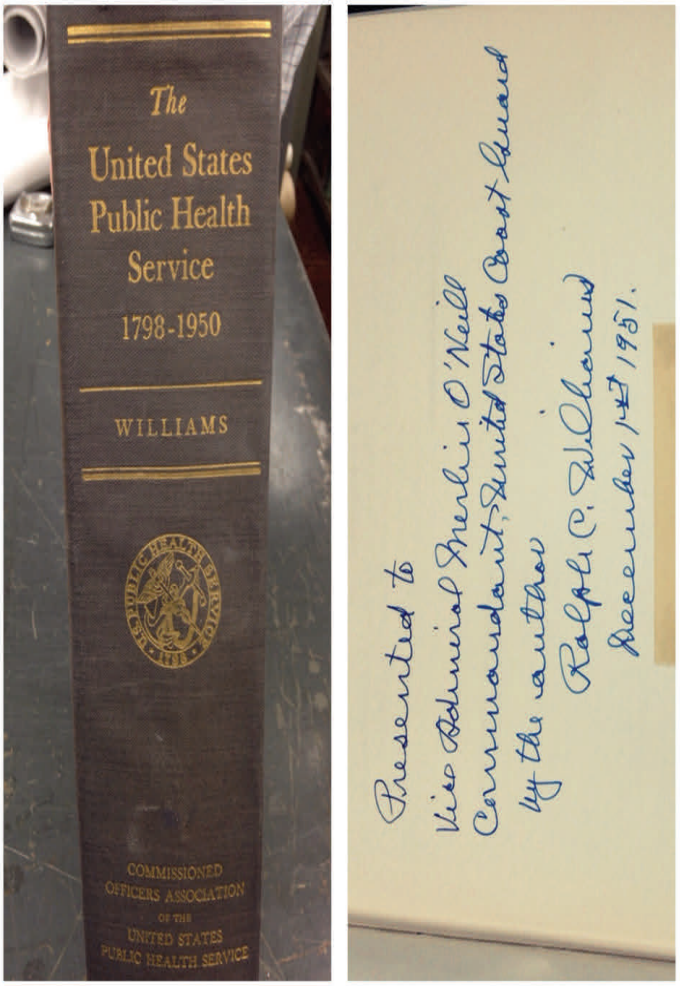
As impressive and varied as the breadth and depth of the USCG mission, so are the duties of a Coast Guard pharmacist. Although the primary purpose of my TDY was to provide direct patient care in support of pharmacy operations, it was clear that the CG pharmacist is responsible for much more than managing the operations of a base/station clinic pharmacy. In fact, as a Regional Pharmacy Executive (RPE), the CG pharmacy officer's duties include providing collateral duty oversight to all units ashore and afloat (clinics and sickbays) within the RPE's area of responsibility, not to mention formulary management, quality control, logistics, and other duties as deemed necessary to support operational units in the entire district. The CG pharmacist serves to provide healthcare to active duty service members, CG reservists, and other eligible beneficiaries; as educator and subject matter expert; and to provide critical mission support in ensuring medical readiness and deployment health. *Semper Paratus*, which means "Always Ready," is the Coast Guard motto. To be a Coast Guard pharmacist requires a Public Health Service pharmacy officer to fully exemplify the PHS core values of Leadership, Service, Integrity and Excellence. In so doing, the CG pharmacist ensures that the men and women who put their lives in harm's way to protect and defend our maritime interests and who save lives of those in peril are *Always Ready*.

In addition to working in the pharmacy, providing patient care, and consulting with providers and health services technicians, I had the privilege of taking a tour on the USCGC HEALY (WAGB-20). This massive 420-foot vessel is the largest cutter in the CG fleet. Commissioned in 1999, HEALY is the United States' newest and most technologically advanced polar icebreaker. HEALY serves in the Arctic, and is designed to conduct a wide range of science and research activities, as well as providing supplies to remote stations. As a Coast Guard cutter, HEALY is also a capable platform for supporting other potential missions in the polar regions, including logistics, search and rescue, ship escort, environmental protection, and enforcement of laws and treaties. From the tour and after speaking with personnel aboard the ship, I came away in full circle with a better understanding of the essential role and functions of a CG pharmacist in providing mission support.

Pharmacy Spotlight (cont.)

(Continued from page 15)

And on my last day of TDY, as I briefly studied the history of this honorable service and appreciate its deeply-rooted heritage at the Coast Guard Base Seattle museum, the gentle-souled historian, a retired USCG Captain of 40+ years, let me peek at a rare find in the back of the archives room – *The United States Public Health Service, 1798-1950* publication by RADM Ralph C. Williams, USPHS as presented to VADM Merlin O'Neill, the 10th Commandant of the US Coast Guard, in 1951. Reflecting on my TDY experience with the US Coast Guard, it is true then of what has been said many times by our PHS leadership. In serving the various missions of the agencies to which we are detailed, we thereby, as Commissioned Corps officers, proudly advance the US Public Health Service mission to protect, promote and advance the health and safety of our Nation.



The United States Public Health Service, 1798-1950 publication by RADM Ralph C. Williams, USPHS as presented to VADM Merlin O'Neill, the 10th Commandant of the US Coast Guard, in 1951.

Recent Publications…

Fine AJ, Sorbello A, Kortepeter C, Scarazzini L. Central nervous system herpes simplex and varicella zoster virus infections in natalizumab-treated patients. Clin Infect Dis. 2013 Sep;57(6):849-52. http://www.ncbi.nlm.nih.gov/pubmed/23728144

Fine AJ, Sorbello A, Kortepeter C, Scarazzini L. Progressive multifocal leukoencephalopathy after natalizumab discontinuation. Ann Neurol. 2014 Jan;75 (1):108-15.http://onlinelibrary.wiley.com/doi/10.1002/ana.24051/full

Lind J. N., Perrine C.G., Li R. Relationship between Use of Labor Pain Medications and Delayed Onset of Lactation. J Hum Lact. 2014 Jan 22. [Epub ahead of print]. http://www.ncbi.nlm.nih.gov/pubmed/24451212

Did You Know?

What's New at the Office of Generic Drugs?

CDR Dat Doan

The Office of Generic Drugs (OGD) is responsible for reviewing Abbreviated New Drug Applications (ANDAs). Their mission is to provide safe and effective equivalent generic medications to the American public. Last year, approximately 84% of prescription medications dispensed were generic medications. Historically, ANDA holders did not pay a user fee for

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Did You Know? (cont.)

(Continued from page 16)

their applications to be reviewed. Consequently, OGD's personnel resources were limited, thus causing the backlog of ANDAs to grow annually.

The enactment of the Generic Drug User Fee Amendments (GDUFA) in October of 2012 required generic drug companies and their various suppliers to pay user fees to the Agency. The fees have enabled OGD to increase their resources and subsequently strive to review the ANDAs within a more predictable timeline. Currently, OGD is in cohort year 2 of 5 for GDUFA implementation. By cohort year 5, GDUFA requires that OGD will take action on 90 percent of the applications within 10 months of submission.

In order to meet the requirements of GDUFA, OGD has been undergoing reorganization projects requiring the establishment of new technologies and policies, as well as the hiring of new staff members. At the start of GDUFA, OGD had 305 employees. Currently, that number has swelled to 438 full-time employees with 89 of those being PHS officers. Furthermore, there continues to be opportunities in several capacities ranging from Project Management, review work with the Bioequivalence and Labeling groups, Regulatory Support, and the Policy Group. Officers being considered include those with supervisory experience, project management experience, any specialized clinical experience, policy development and quality management experience, or any special training that may be relevant to the respective departments.

The opportunities for PHS officers at OGD are numerous and the Office is extremely "Corps friendly". As previously mentioned, there are a high number of PHS officers currently stationed at OGD. Several key leadership positions at OGD are currently held by active duty PHS officers or retired PHS officers including Acting Director for OGD Dr. Kathleen Uhl (ret. CAPT), Deputy Director of OGD Robert West (ret. CAPT), Transition Lead for Operations CAPT Jason Woo, Director Review Support Branch Denise McKan (ret. CAPT), Deputy Director Review Support Branch CAPT Aaron Sigler, Regulatory Support Branch Chief CDR Iain Margand, Special Assistant to the Director CDR Thomas Hinchliffe, and Labeling Branch Team Leaders CAPT Lillie Golson, CAPT Charlie Hoppes, CAPT Koung Lee, and CDR Ruby Wu.

For further information about GDUFA or OGD, please visit the FDA website. For opportunities at OGD, please visit www.USAJobs.gov.

Non-Physician Board Certified Pay —An update to help with frequently asked questions

CDR Dean T. Goroski

What is Non-Physician Board Certified Pay?

Board Certified Pay for USPHS pharmacists, also known as Non-Physician Board Certified Pay (NPBCP), is available to pharmacy officers who have successfully passed one of 5 recognized Board of Pharmaceutical Specialties (BPS) examinations. The 5 currently recognized specialties include Pharmacotherapy, Nuclear Pharmacy, Nutrition Support, Psychiatric Pharmacy, and Oncology. A sixth specialty, Ambulatory Care Pharmacy, has been recommended for NPBCP pay but recognition is still pending.

When will the Ambulatory Care Specialty be approved?

The process for getting the Ambulatory Care Specialty approved for NPBCP is beyond the level of Public Health Service Commissioned Corps policies. The recognition and approval for any pharmacy board certification pay is tied into the Consolidated Special Pays of the National Defense Authorization Act. The leadership in the USPHS and other sister services have submitted all necessary information to request approval of the Ambulatory Care Pharmacy Specialty for NPBCP. Once results of this pro-

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Did You Know? (cont.)

cess are available, they will be disseminated expediently to the ranks of pharmacy officers in the USPHS.

How much do I get paid for NPBCP?

Board Certified Pay for pharmacists is based on an officer's Creditable Service Entry Date (CSED). This date reflects the officer's years of active duty service as a pharmacy officer in any of the Uniformed Services. Annual award amounts for Board Certified Pay are displayed in the table below. The annual amount below, based on years of creditable service, is paid in equal monthly installments.

Less than 10 years of creditable service	$2,000
10 but less than 12 years	$2,500
12 but less than 14 years	$3,000
14 but less than 18 years	$4,000
18 or more years	$5,000

How do I become board certified in a specialty?

Information on applying and testing for board certification through the Board of Pharmaceutical Specialties is available at www.bpsweb.org. As of 2014, testing windows for the specialty exams will be twice yearly. These two windows of testing are April/May and October. Please refer to the bpsweb.org website for more detailed information.

I have passed one of the 5 approved board certification specialty exams. How do I get my NPBCP started?

Once you receive a letter or certificate from the Board of Pharmaceutical Specialties indicating your achievement of board certification status with effective and expiration dates, you will need to fax or mail a copy of this document to the Compensation Branch. DO NOT send in a copy of your test scores. Test scores do not display effective and expiration dates, and will not qualify you for NPBCP pay. Additionally, you may wish to email or telephone your pay technician at the Compensation Branch to give them a heads up on the paperwork you are sending.

When will I start receiving pay and for how long?

Effective dates from the Board of Pharmaceutical Specialties are usually the last day of the month (e.g. December 31). For military pay purposes, this date will be bumped to the first day of the next pay cycle (e.g. January 1). This pay will continue until the expiration date of certification, which is currently 7 years.

How long can I receive NPBCP?

As long as an officer maintains his/her board certification, they are eligible to receive the NPBCP throughout their career. Board certification is approved for 7 years at a time. Board Certified pharmacists must recertify by completing the appropriate number of approved CE recertification credits or through retesting. Specifics for recertification in each specialty can be found on the Board of Pharmaceutical Specialties website. When an officer successfully recertifies, they will receive a letter and certificate from the Board of Pharmaceutical Specialties indicating successful recertification and a new expiration date. A copy of this information will need to be forwarded to the Compensation Branch to extend the officer's NPBCP eligibility.

Are there any other benefits to becoming board certified?

Aside from the pay incentives offered to USPHS officers, board certification helps with achieving the category of promotion benchmark #2 for nationally recognized certification. Additionally, it may offer benefit in hiring preference and/or helping an officer qualify for certain billets. The CE available for recertification is ACPE approved and can help satisfy state licensure requirements.

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Did You Know? (cont)

(Continued from page 18)

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Career Development

Do you have a mentor?
Do you have a mentee?

CDR Chi-Ann (Ruby) Wu, LCDR Liatte Krueger and CAPT Andrew Meagher

Did you feel lost at sea without a compass when you first embarked on your PHS career? Do you understand the different career paths and steps to increase your promotion potential? If so, a great resource exists in the Commissioned Corps Pharmacy Mentoring Network (CCPMN). The CCPMN is here to help you serve as a mentor, or if you need a mentor, we can match you with one!

Here are the few nuts and bolts of the mentoring program:

What?

The CCPMN is a formal, voluntary, one-on-one mentoring program for active duty Commissioned Corps pharmacy officers. The mentor-mentee commitment is 6 months in duration and matches officers of similar backgrounds. The mentor (an experienced senior officer, O-4 to O-6) provides guidance to the mentee (a less experienced officer, typically with an O-4 grade or below) on defining career goals, developing a career plan, and identifying continuing education/skill development needs.

Why?

The CCPMN helps define expectations, develop career direction, and builds esprit de corps. It is crucial to the success of the USPHS to have trained, competent, and well informed officers capable of transitioning into leadership positions and carrying out the goals of the USPHS. Pharmacist officers play a vital role in public health teams responsible for promoting and protecting the health of our country. The CCPMN is a program by which leadership can be developed. The mentee, the mentor, and the Corps all benefit from participation in the CCPMN.

Who?

The program is open to all qualified Corps officers appointed into the Pharmacist Category. In order to be eligible to serve as a mentor, the officer must:

Be appointed to the Pharmacy Category for at least 3 years and in the rank of O-4 or above

Be in good standing with the Corps with no adverse personnel actions filed

Be basic ready

Have supervisory approval.

When?

All new call to active duty pharmacist officers are offered mentoring through the CCPMN. However, pharmacist officers may request to be matched with a mentor at any time during their career. . Matches are made according to the Operating Division (OPDIV) and/or geographic location of the mentee. In addition, the mentor should not be in the mentee's direct supervisory chain of command.

Career Development (cont.)

Where?
If you would like to apply as a mentor or mentee, please review the information provided on the PharmPAC website at http://www.usphs.gov/corpslinks/pharmacy/sc_career_mentoring.aspx and register using the on-line Mentoring Program Application that can also be found at http://mentor.usphs-hso.org/MentorNewUser.

Please note that if you volunteered to serve as a mentor before May 2013 (using the paper application), you should create a profile on-line to ensure we have the most up-to-date information. This is vital to the success of the program, as we have transitioned to the on-line database as our primary mechanism for matching.

We will be providing an in-depth look at the CCPMN at the 2014 USPHS Scientific and Training Symposium. Hope to see you there!

How can I support a student? What's in it for me?

LT Quinn Bott, PharmD

Would you like another meaningful activity added to your CV? Consider working with students through the **Senior Commissioned Officer Student Training and Extern Program (SRCOSTEP).** As a pharmacy student, my experiences in federal pharmacy influenced my application to the SRCOSTEP program within the Bureau of Prisons. It was the perfect choice for me as a student and now as a professional I thoroughly enjoy helping current students chart their course. There are many ways to influence students and gain personal benefits that you might not have considered before:

Visit with students at regional and national pharmacy conferences and career fairs. Don't be afraid to approach skittish packs of students and share the role of Commissioned Corps officers. "Hi, have you heard of the Public Health Service?" Follow up with questions about their interests and career goals. Prior to the event, be sure to practice public speaking skills and that PHS "elevator speech" that may have gotten dusty since OBC.

Be a University Point of Contact. Together with the PharmPAC, reach out to the experiential learning, student affairs, or career services directors at local or distant pharmacy schools. This act builds professional networks, enhances CVs, and reinforces commitment to the Public Health Service. Set up a meeting by phone, video, or in person to discuss how to participate in student activities, such as lectures or hosting students. Contact the PharmPAC to find out more about this opportunity.

Host a student, for an hour, a day, a rotation, or a whole summer. Start small, meeting with the supervisor or Human Resources office and start building a checklist. "What needs to be done in order to hire or host a pharmacy student?" In many agencies, requirements for costly background checks and other legal liabilities may seem prohibitive, but are not insurmountable. Use resources and ask for help if needed, especially from other officers with successful student programs. Students can be a welcome challenge, one that educates and perks up the entire pharmacy practice.

Encourage students to pursue a job within PHS or another uniformed service, complete a pharmacy residency at an IHS site, or join the JR/SRCOSTEP program. Build mentor relationships and set reminders to follow up with students for career advice. Don't think that just because applications are not currently being accepted for the pharmacy category that recruitment is a lost cause. There are still plenty of federal pharmacist opportunities for passionate and driven students. Respond to student inquiries honestly and completely, preferably through a candid phone call or an in person meeting.

All Pharmacy officers can become valuable assets, not only to pharmacy students, but also to schools of nursing, pharmacy technician training programs,

Career Development (cont.)

(Continued from page 20)

disaster planning and emergency medical services, and more. No pharmacist should limit themselves to just the pharmacy world. A pharmacist's training, experience, and leadership are worthy of being shared with any group of learners or leaders – get to it!

PHS Pharmacists in Action

From Left to right: LCDR Jose Aparicio, LCDR Carl Olongo
Career Expo at the Midwestern School of Pharmacy in Glendale Arizona

Midwestern is a private university in Arizona with emphasis on health sciences, including a College of Pharmacy, College of Veterinary medicine, College of Dental Medicine, Physician Assistant program, and a Clinical Psychology program. The college of Pharmacy has been organizing the Career Expo every year in February and LCDR Aparicio and I (LCDR Olongo) have been participating in the Expo since 2011.

PHS Pharmacists in Action (cont.)

LCDR Bill Lehault lecturing at the University of Rhode Island College of Pharmacy to over 150 students about the United States Public Health Service and its role in our Nation's public health.

Acting SG, RADM Boris Lushniak (6th from Left) pier side of the USCG Cutter HEALY. Commissioned on 10 Nov 1999, the USCGC HEALY (WAGB-20) is the United States' newest and most technologically advanced operational icebreaker.

Opportunity for *your* contribution!

PharmPAC Perspectives* Reader** - Do you have a story to share? Take the opportunity to contribute to the collective success of ***your newsletter. We are excited to publish your article about important information you would like to share for the good of the whole! Whether it be detailing a program accomplishment, pictures of your committed service in action, or promoting volunteering opportunities, help us give voice to the tremendous mission we undertake everyday to protect, promote and advance the health and safety of the Nation. We are calling for newsletter articles in the following topic areas:

1. Healthy Lifestyle and Fitness - e.g. APFT
2. Did You Know - e.g. uniforms, benefits
3. Pharmacy Spotlight - This is a chance to recognize the wonderful work we ALL do. The section is for pharmacists (officer or civil service) or technicians, or we can highlight a pharmacy group's work.
4. Career Development - Highlight opportunities to develop leaders such as professional development, mentoring, leadership, choosing career paths, HHS agencies, promotions.
5. Bulletin Board - announcements
6. Recent publications– citation format
7. Photographs of PHS pharmacy in action (with a brief caption)

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508 compliance review: CAPT Chrisitine Chamberlain, LCDR Jeanettee Joyner, LT David Stecco, LT Tori Welker

JOIN OUR MEETINGS

PharmPAC Meetings are held the first Thursday of the month at 2pm EST. The next three meetings will be on:

June 5, 2014
July 3, 2014
August 7, 2014
September 4, 2014

Join us for PharmPAC's monthly meetings via teleconference or in person
By Conference Call:

1-866-901-3913 or
301-796-4100
Passcode: 65419

In Person: FDA White Oak Campus
Bldg 22, room 1419

LCDR Tina Bhavsar at asn2@cdc.gov
LCDR Khang Ngo at Khang.Ngo.USPHS@hotmail.com
LCDR Jodi Tricinella at Jodi.Tricinella@ihs.gov
LCDR Rodney Waite at rcwaite@BOP.gov

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