



UNIVERSITY POINT OF CONTACT NEWSLETTER

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Pharmacists Professional Advisory Committee (PharmPAC)
University Points of Contact (UPOC)

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APhA 2014 Annual Meeting and Exposition - Don't miss the boat!

submitted by LT Michelle Williams, PharmD

One of the best avenues for recruitment is through professional organization conferences. This year's American Pharmacist Association (APhA) conference was held in Orlando, Florida. It is one of the most highly attended professional organization conferences for pharmacists. USPHS officers dominated the attendance amongst Uniformed Service members at both the Federal Forum and the main conference.

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From top (left to right): CAPT Carmen Clelland, LT Michelle Williams, CDR Damion Killisback, LCDR Khang Ngo, LCDR Stephen Rabe, LT Quinn Bott, LCDR Alister Rubenstein, LT Amy Luo, LT Lindsay Davison, LCDR Matthew Kirchoff and LT Marie Johnston

Winner of Excellence in Public Health Pharmacy Practice Award

submitted by LT Jay Wong and CDR Vicky Ferretti-Aceto

The USPHS Excellence in Public Health Pharmacy Practice Award recognizes pharmacy students who find innovative ways to address public health challenges through pharmacy practice. Kristen Fodero, a PharmD candidate from the School of Pharmacy and Pharmaceutical Sciences, University at Buffalo (State University of New York), was presented with the award on Thursday April 10th by LT Jay Wong, a clinical pharmacist with the Immigration Health Services Corps. *Continued on page 2.*



LT Wong presents award to Ms. Fodero

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BOP, FDA and IHS had recruitment booths set up within the federal pharmacy section at the exhibition hall. The recruitment booths were well attended as over 100 pharmacists and pharmacy students stopped by the tables. They were interested in and asked several questions regarding USPHS and the agencies that different officers are assigned to. Many even signed up to receive more information and follow-up after the conference. These contacts made during conferences often turn into qualified leads and future USPHS pharmacy officers.

The potential opportunity to reach so many pharmacists and pharmacy students in such a brief period of time is hard to match. As uniformed officers, we stand out from the rest of the crowd, creating ample opportunities to make an impact, to share our knowledge and experience, and to affect others in positive ways. Don't miss an opportunity to network, you never know what you may learn from others and what you can impart to someone else. When it comes to the unique opportunities presented at conferences like APhA, don't miss the boat!

Continued from page 1...Public Health Pharmacy Practice Award

Ms. Fodero was nominated for the award for her role in organizing, planning, and executing an interprofessional health fair in the heart of an underserved area in the city of Buffalo. The health fair was conducted in collaboration with a faith-based organization and included coordination with the university Medical, Dental, and Nursing programs as well as 15 other health-related organizations. This health fair provided health services to hundreds of families in the area, many of which lack access due to transportation and financial challenges. In addition, Ms. Fodero was also involved in the Good Neighbors Health Care Free Clinic, where she helped to organize pharmacy students to assist underserved and financially stressed patients in obtaining medications through government and manufacturer assistance programs. Through these accomplishments, Ms. Fodero had a tremendous impact on the promotion of health and wellness in her community by facilitating access to health care for hundreds of underserved families. Upon graduation, Ms. Fodero will be starting her PGY1 residency at the Buffalo VA Medical Center serving our nation's veterans.



Editor's Note:

Welcome to the Spring 2014 edition of the UPOC Newsletter! The UPOC newsletter has served as a gateway for pharmacy students to learn about the roles and activities of USPHS officers as well as for UPOC officers to share their recruitment activities. I am extremely excited to serve as your new editor. In this issue, a couple of additions have been made, such as the Residency Section and COSTEP Corner. I work with a very talented group of officers who are striving to make this newsletter as relevant to pharmacy student issues as possible. We hope you find this edition enjoyable and informative. As always, we welcome your comments and suggestions.

Yours sincerely,

LT Honeylit Cueco, PharmD

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Check us out:

<http://www.usphs.gov/corpslinks/pharmacy>



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Promoting Cultural Competence to First Year Pharmacy Students

submitted by LT Nabeel Babaa, PharmD

In the spring of 2014, the Notre Dame of Maryland University School of Pharmacy (NDMU), located in Baltimore, Maryland, welcomed me as a guest lecturer to first year pharmacy students taking a course entitled, *Care of Diverse Populations*. This course emphasized the importance of cultural competence and sensitivity in the everyday work practice of a health care professional. In coordination with Dr. Michelle Fritsch, Professor and Chair of Clinical & Administrative Sciences at NDMU, I attended two class sessions. Using a team-teach approach, I facilitated the first presentation alongside Dr. Fritsch, and subsequently gave the second lecture entitled, "Conflict Resolution," on my own.



The opportunity to guest lecture at NDMU was of interest to me as I had previously worked as a Teaching Assistant at the Center for International Development and Conflict Management (CIDCM) during my undergraduate years at the University of Maryland, College Park. When informed of the subject focus for the course at NDMU, I was immediately engaged in the material, as the topic of cultural awareness is applicable to the everyday practice of a pharmacist in the work place. In addition to emphasizing the scientific and clinical knowledge needed for a health care professional to succeed in their career, I found it proactive on the part of NDMU

to present to their first year students the importance of non-clinical skills such as cultural competency.

In my lecture on "Conflict Resolution," I discussed the various causes of conflict in the work place, which include cultural and value differences, ambiguity in communication, opposing needs, time constraints, and competition. Although the negative outcomes of conflict were noted, such as feelings of ill will and negative associations, I also emphasized the positive outcomes of conflict if handled in a mature manner. Positive outcomes from conflict include growth, innovation, and new or alternative ways of thinking. Various hypothetical case scenarios were also presented with an open dialogue and request for feedback from the students on how they would address each of the conflict situations.

In speaking to the first year students, I was able to parlay my own professional experience as both a part-time retail pharmacist at an independent pharmacy and a full-time Commissioned Corps officer at the FDA when establishing the importance of cultural awareness in the care of diverse populations. I explained to the students that pharmacists not only engage coworkers that may come from different educational and cultural backgrounds, but they also regularly interact with patients of various ages and health experiences. In this regard, it is necessary for a pharmacist to be able to work with diverse type of people in order to engender cooperation among interdisciplinary health care teams to deliver the highest quality health care services and information to patients.

Dr. Fritsch was appreciative of my participation and many of the students thanked me personally for my visit, as they were not aware of the extent of alternative career opportunities available to them as pharmacists, especially in the uniformed services. Several students expressed an interest in learning more about the Commissioned Corps and I was happy to share with them my own experience of applying to the USPHS. I encouraged all of the students to get a head start on their careers by thinking about what type of impact they would like to have towards promoting and advancing the nation's public health in the future.

It was an honor to represent the USPHS Commissioned Corps as a guest lecturer. I am grateful to CAPT Aaron Sigler, the Acting Deputy Supervisory Project Manager for the Review Support Branch at the Office of Generic Drugs, and CAPT Robert Tosatto, the Director of the Division of the Civilian Volunteer Medical Reserve Corps, for bringing this volunteer opportunity to my attention and supporting my representation of the Commissioned Corps at NDMU.



NOTRE DAME
OF MARYLAND
UNIVERSITY

SCHOOL OF PHARMACY

COSTEP Corner: Frequently Asked Questions submitted by LT Stephanie Daniels

What exactly is a COSTEP?

COSTEP stands for **C**ommissioned **O**fficer **S**tudent **T**raining and **E**xtern **P**rogram. There are two kinds of COSTEPs, Junior (JR) and Senior (SR) COSTEPs.

JRCOSTEPs are 4-12 week paid internships working directly with USPHS officers at various duty stations and agencies across the country, and students are eligible any time after the 1st professional year. Most pharmacy students serve their internships within the Food and Drug Administration (FDA), Indian Health Service (IHS), or Federal Bureau of Prisons (BOP).

SRCOSTEPs are for students about to enter their final year of full-time study, and selected students can receive up to 12 months of full-time pay and benefits in exchange for agreeing to serve a USPHS agency following graduation and licensure. The service obligation is equal to twice the amount of time sponsored, e.g. a student who receives 10 months of pay while in school must complete 20 months of service to his/her sponsoring agency.

Why should I consider a COSTEP?

JRCOSTEPs are excellent opportunities to directly experience non-traditional pharmacy careers and life in uniform. They offer incredible networking prospects and chances to positively impact both underserved populations and the overall health of our nation.

SRCOSTEPs are one of the very few ways to be selected for a full-time active duty commission when the USPHS Commissioned Corps are not accepting general applications for pharmacists. They also ensure that students will have a guaranteed income and position beginning immediately after graduation, and help provide financial security during the high-stress clinical year.

What benefits are COSTEP participants eligible for?

COSTEP students are active duty officers. As such, they receive basic pay as an O-1 (Ensign), tax-free housing and subsistence allowances, and costs of travel between their home and duty station may be paid. You can view military pay scales at the following website: <http://militarypay.defense.gov/pay/calc/index.html>. SRCOSTEP students receive full health care benefits through TRICARE for themselves and their dependents, and JRCOSTEP officers are eligible for emergency health care coverage.



If they are selected for an active duty commission in any uniformed service following graduation, both JR- and SRCOSTEP students are also able to apply time served during an internship toward their "time in service", which can positively impact both pay rates and eligibility for promotion.

When should I apply for a COSTEP?

If you're considering a JRCOSTEP, the best time to apply is the fall before the year(s) you'd like to serve an internship in. For example, if you'd like

to complete your internship during the summer break between your 2nd and 3rd professional years, apply during the fall semester of your 2nd year. The application deadline is December 31st annually.

If you'd like to apply for a SRCOSTEP, you must apply during the fall semester of your 3rd professional year, so that applications can be reviewed and students can be selected prior to beginning their final year of school. The annual application deadline is December 31st.

Where can I find more information on the COSTEP program?

The USPHS Commissioned Corps website is always the best place to start: www.usphs.gov. More specific information on the JRCOSTEP is available at <http://www.usphs.gov/student/jrcostep.aspx>, and on the SRCOSTEP at <http://www.usphs.gov/student/srcostep.aspx>. The PharmPAC's UPOC newsletter often includes perspectives from recent JRCOSTEP participants (such as those on pages 5 and 6 of this issue).

You can also reach out to the USPHS pharmacy officer who has volunteered as your school's University Point of Contact, or UPOC. The list is located at: <http://www.usphs.gov/corpslinks/pharmacy/documents/UPOCMasterList.pdf>

How do I apply for a COSTEP?

Applications are available through each COSTEP's respective page on the USPHS website during the annual application period. You can find links to them from the general student page at <http://www.usphs.gov/student/default.aspx>.

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JRCOSTEP Internship : Choctaw Nation Pharmacy Learning

submitted by Jonathan Schroer, MBA,
MS in Drug Dev, PharmD candidate

In January 2013 I received two voicemails from an Oklahoma phone number. Puzzled, I listened to them and smiled as I learned I had been offered a JRCOSTEP pharmacy internship with the Choctaw Nation of Oklahoma! Then, last summer I served the Choctaw Nation of Oklahoma as a JRCOSTEP intern pharmacist via the Indian Health Service. With a central hospital and seven outlying clinics, the Choctaw Nation Health Authority provides care to one of the larger US Native American tribes. I enjoyed this opportunity to learn and explore in a health system focused on serving Native Americans, within the framework of the United States Public Health Service. Through my experiences with caring providers, appre-

ciative patients, and wise administrators, I became a better future pharmacist.

This internship helped my classroom skills flow into “hands on” clinical practice, with friendly and knowledgeable pharmacists. I learned workflow and clinical skills in inpatient pharmacy, outpatient pharmacy, smoking cessation and anticoagulation clinics, a leadership week, a pediatrics week, and a diabetes week. In clinic, I was honored to listen to a Choctaw native-speaker’s accent in English. I also learned how to say “yakoke” (thank you) in Choctaw, and continued my Choctaw culture immersion by attending a pow-wow with traditional Native American dancing and watching a game of stickball.

The pharmacists and other providers knew their patients well, and I could tell they cared. I owe much of my current knowledge to the safe learning environment the Indian Health Service pharmacists and hospital staff fostered. My Choctaw Nation of Oklahoma pharmacists

taught me about joining the Commissioned Corps, the uniform, national service opportunities, and promotion potential. One of my best work memories is my service to providers and tribe elders concerned about the high acquisition price of adding the shingles vaccination, Zostavax, to the formulary. I was able to help analyze potential reimbursements and network to help secure funding. Zostavax was subsequently added to the formulary! In summary, the providers, patients, and administrators gave me insight into a health system and helped me improve my pharmacy practice —I highly recommend exploring this opportunity to my student pharmacist peers.



Life in Whiteriver

submitted by Kevin Gan, PharmD candidate

Three and a half hours east and 5,164 feet up from Phoenix lies a beauty of Arizona that is rarely seen. The Apache tribe live in this beautiful site known as the Whiteriver, named after the White Mountains that surround the tribal land. The Indian Health Service (IHS) Hospital at Whiteriver is one noted for excellence in both the clinical pharmacy opportunities provided and the wondrous experience of working with the Apache tribe. For anyone wanting to work at Whiteriver, it is important to understand the history and culture of the Apache in order to communicate effectively and give the best care possible.

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Whiteriver Service Unit

Continued from page 5... Life in Whiteriver



Whiteriver is a hidden jewel filled with many opportunities for student pharmacists to explore. As the 2013 JRCOSTEP intern for the Whiteriver service area, I have gained far more knowledge than I could have learned in a classroom setting. There are many pharmacy-managed clinics available for students to rotate through, including the chronic pain, anticoagulation, and immunization clinics. There are also clinics not traditionally staffed by pharmacists, which students can experience such as surgery, acupuncture, and podiatry where opportunities await the future pharmacist who can see the need for clinical pharmacy services in those specialties. In addition, I experienced the interprofessional dynamics of a diverse interdisciplinary team. I experienced the leadership and expertise that each specialist can give when discussing patients, their disease states and the therapeutic plans.

It was amazing to see physicians, nurses, physical therapists, nutritionists, and pharmacists teaming together and using their expertise to

work out plans for their patients' well being. It models the ideal interdisciplinary teamwork that many hospitals are now aspiring towards when assessing patients and practicing clinical-based outcomes.

The IHS prides itself on providing the best environment for students to develop their patient counseling skills. In the outpatient setting, there is an abundant amount of time to ask the three prime questions (what is the medication for, how do you take your medication, and what do you expect) and to counsel patients about their medication regimens. As I talk to other pharmacists about IHS, many recount the amazing experience students receive when going through the program. If patient counseling is one of your areas that could be improved, I strongly encourage doing a rotation or applying to the JRCOSTEP for IHS, as it will expand your communication skills immensely and build your clinical competence.

As a student pharmacist, there are multiple opportunities to meet other students from other disciplines and to understand their role in the health care team. It is an outstanding opportunity to meet students from different fields, different backgrounds, and different states all with the same goal, which is to provide optimal patient care. For those who are less adventurous or who have not been in a rural setting, this experience will take you out of your comfort zone. I am from

a very urban area, and I was afraid I might not be able to handle life in a rural setting. Not only did I grow clinically, but I also grew as a person by experiencing life from a different point of view. I found greater appreciation for a variety of lifestyles and experiencing more of the human condition.

My experiences in Whiteriver will always be the highlight of the beginning of my pharmacy career. I learned to think more clinically and developed the skills necessary to practice as a pharmacist. IHS challenges both pharmacists and students to practice at the highest levels of their education. I highly encourage second year student pharmacists to apply to the JRCOSTEP program and see the positive impact that pharmacists have in the healthcare system and on patients' daily lives. I also encourage third year pharmacy students to select IHS sites for rotations as part of their clinical year and to live a little outside of what they know. I would not give up the opportunity to be a JRCOSTEP if I could do it all over again. There is just no other experience like the Indian Health Service.

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Advanced Pharmacy Practice Experience (APPE) at the Centers for Medicare & Medicaid Services (CMS)

submitted by Staci Kleinberg, PharmD Candidate



Over the course of my six-week APPE rotation, at the New York regional office of the Centers for Medicare & Medicaid Services (CMS), I experienced the pharmacy profession in an entirely new way. My previous APPE rotations and pharmacy experience have focused around direct patient care in the setting of a clinic, community pharmacy, or hospital. This rotation has required me to take a step back from the more clinical and direct side of pharmacy and enter into the world of health insurance companies and pharmacy benefit managers. With this new perspective, patients become beneficiaries, enrollees or consumers. However, the goal remains the same: Ensure that patients or beneficiaries receive optimal, prompt and cost-effective care.

My time spent at CMS has been an eye-opening experience of the behind-the-scenes operations of Medicare Part D. I have been exposed to the operations of Part D insurance plans and their interactions with various delegated and down-stream entities, the intricacies of coordinating additional Medicare benefits for beneficiaries, as well as the complexities and challenges of putting out regulatory and sub-regulatory guidance and proposed regulations such as the 2015 42 CFR proposed regulation. I have spent time shadowing regional staff on a day-to-day basis and reading chapters from the Prescription Drug Benefit Manual to better understand Medicare policy, all while observing the challenges and triumphs of working for the Federal Government on behalf of the beneficiaries. I have also witnessed the efforts put forth by

government agencies, including CMS, and professional pharmacy organizations at the state level to coordinate a brighter future for the pharmacy profession.

As a student pharmacist, my duties have included listening in on relevant conference calls between numerous entities, compiling drug information in order to prepare for Medicare compliance audits, aiding in formulary audits, as well as preparing a presentation on a newly approved drug for hepatitis C treatment (sofosbuvir [Sovaldi™]). While the main focus of my time at CMS has not been clinical, with respect to patient education and therapeutic monitoring, clinical knowledge plays a key role in these behind-the-scenes operations. Between exploring Medicare Part D plan formularies with their utilization management edits and developing guidance on topics ranging from Hospice to End Stage Renal Disease, the need for therapeutic knowledge and a pharmacy background is evident.

This rotation has been an amazing learning experience that can be owed to working with Lead Regional Pharmacist John Cocchiara and LCDR Jerry Zee, CMS Regional Pharmacist (NY, NJ, Puerto Rico and Virgin Islands). They have provided me with a unique experience that has made my pharmacy practice experience well rounded and will allow me to apply a new perspective when analyzing future situations.



Albany College of Pharmacy
AND HEALTH SCIENCES

My Experience at the FDA

submitted by Margaret Lim, PharmD candidate

In August 2013, I traveled from the west coast to the east coast to complete a six-week APPE rotation at the Food & Drug Administration (FDA). Prior to entering pharmacy school, I knew little about the role of the pharmacist at the FDA. However, when I completed my JRCOSTEP at Phoenix Indian Medical Center, I learned that not only are there pharmacists at the FDA, but that they are also commissioned officers. My goal at the FDA was to learn about the functions, decisions and actions that contribute to ensuring safety and efficacy of medications. This was also an opportunity to learn how Commissioned Officers provide public health services while stationed in the Washington, DC area.



Ms. Lim pictured with RADM Scott Giberson, Acting Deputy Surgeon General and USPHS Chief Pharmacy Officer

During my experience in the Division of Neurology Products, I saw the importance of the pharmacist's role in promoting public health through guidance, communication and involvement in critical decision-making. I attended meetings between pharmaceutical companies and the FDA, where I observed the collaboration involved in the drug development and approval process. This collaboration allows for discussion that will ensure the safe and effective use of medications, thereby improving the quality of care for all patients.

I was also involved with reviewing prescription labeling requirements, where I compared the published label to a proposed label.

Continued on next page.

Advanced Pharmacy Practice Experience at Department of Behavioral Health (DBH) Saint Elizabeths Hospital

submitted by Tram-anh Nguyen, PharmD candidate

I had the privilege of completing an Advanced Practice Clinical rotation at DBH, Saint Elizabeths Hospital in Washington, DC. Shadowing my preceptor, Chief Pharmacist CDR Renee Taylor, allowed me to see institutional pharmacy from a different perspective. Not only did the experience enhance my clinical skills but I also gained a greater appreciation for the administrative side of pharmacy. I was able to learn the process for updating departmental policies and procedures. For instance, I gained experience in researching Hepatitis C treatment and

updating policies related to Hepatitis C treatment. I assisted with the justifica-



tion for funding the new high cost therapy. Additionally, I learned steps to take in order to meet Department of Health standards for hospitals. I also managed adverse drug reactions, and assessed medication variance reports. I even got the chance to collect data for a medication use evaluation on combination antipsychotic therapy.

It was quite rewarding to see other disciplines appreciate the work that the pharmacy department contributes to the Pharmacy & Therapeutics Committee meetings. Students are challenged by drug information questions and have opportunities to research evidence based medicine. The most important skill I took away from this rotation was how to handle relaying difficult and sensitive issues to other healthcare professionals that keeps the focus on making changes to achieve better outcomes. This is especially in a population with mental illness, since they require unique patient care

considerations. The rotation ran smoothly, primarily due to CDR Taylor's willingness to teach and share her experience with the students. Despite being pulled in the many directions that comes with her Chief Pharmacist position, Dr. Taylor always found time to sit down with us and offer guidance personally.

The lessons learned and relationships made at Saint Elizabeth's Hospital are ones that I will certainly take with me as I begin my career as a pharmacist.



Continued from page 7... My Experience at the FDA

The prescribing information of a drug is one of many forms of communication to the healthcare community. The language and format is scrutinized by the multidisciplinary team to reflect the accuracy of current evidence. The labeling information may change or be updated as results from trials demonstrate critical information in patient care outcomes. Post-marketing trials allow the FDA to continually monitor the safety of the medications even after drug approval. The various regulatory activities allow the FDA to promote, protect and advance public health.

In addition, I also learned about the Commissioned Corps Officers' involvement in public service through their extracurricular activities. I attended a US Public Health Service Pharmacy Professional Advisory Committee meeting,

where I learned about charitable commitments such as participating in races sponsored by American Heart Association and how officers are becoming Basic Ready. All the officers I have met truly inspired me with their role at their agency and their commitment to public health. Despite their different backgrounds, their diverse experiences still lead to a single goal of public service. I can proudly say that these pharmacists shape our profession and pave the path for young pharmacists like me.



Residency Highlight : LT McMurray (2014 Crownpoint Pharmacy Resident)

submitted by LT Kristina Snyder

LT Dakota (Cody) McMurray is a graduate of the South Carolina College of Pharmacy in Columbia, SC. He joined the USPHS Commissioned Corps in June 2013 and is the current pharmacy resident at the Indian Health Service (IHS) Crownpoint Service Unit in Crownpoint, NM.

Crownpoint Healthcare Facility has both an inpatient and outpatient unit. The outpatient unit sees about 22,000 unique patients every year. The residency at Crownpoint is composed of both block rotations and longitudinal rotations. The block rotations are Orientation, Ambulatory Care I and II, Inpatient I and II, Administration, Nephrology, an elective, and Rural Health. The longitudinal rotations include teaching pharmacology courses at the local nursing school and an informatics rotation with the Office of Information Technology.



What led you to pursue a career with the USPHS Commissioned Corps and specifically the Indian Health Service (IHS)?

I knew early on in my pharmacy school career that I wanted to pursue a career within the USPHS Commissioned Corps and more specifically the IHS. What sparked my interest early on was one of my first courses, Introduction to Pharmacy Practice. In this course, we had pharmacists from various fields of practice come speak with us on what exactly their job entailed. One of these speakers was CDR Rosalind Chorak, who spoke about her exciting career in the IHS. She came in wearing her Service Dress Blues with all her ribbons proudly displayed. When she started to speak about her job, and all

the clinical opportunities she had over the years, I knew I wanted to do just that with my life. I had the opportunity during my fourth year rotations to complete a rotation under CDR Chorak, and that experience solidified my desire for commissioning with the USPHS and to start my career with IHS.

What can students expect and how can they prepare for the IHS residency selection process?

The IHS residency selection process is different than the ASHP match process. The federal Indian Preference law requires IHS to give hiring preference to candidates of federally recognized American Indian/Alaskan Native tribes, so IHS is not able to participate in the ASHP match, with the exception of one site, Chickasaw Nation Medical Center. There are several forms that must be filled out and sent to the IHS National residency coordinator, as well as each local residency director. Students must also fill out the position application on USAJobs.gov., and decide whether they want to be considered for the Civil Service or Commissioned Corps personnel system. After completing the initial steps of the application, the rest of the process is much more like typical residencies. You will be contacted by residency directors regarding whether you will be offered an interview or not; interviews are conducted, and then selections are made. The best way to prepare for the selection process is to research each site and find out which will best work for your needs. Each IHS site has different opportunities that it can offer its residents, such as the highly variable balance between inpatient and outpatient practice.

What have been the biggest challenges of your position?

The challenges of my position as a pharmacy resident with IHS have been numerous. Time management is a skill that you must learn very quickly to be successful in completing any residency., since you'll be tasked with many projects, sometimes simultane-

ously. The other major challenge I encounter is staff turnover. Being in a very remote site has its difficulties. For one, most people like city life and might stay at Crownpoint for a year or two, but then often leave to pursue a job in a more urban location. This can sometimes cause problems with continuity of care if a pharmacist starts a new clinic and then leaves shortly after.

What has been the most rewarding experience of being an IHS resident so far?

The most rewarding experience so far with IHS has been the exposure to a different culture. The Navajo people have a culture that is alive and thriving. The people completely embrace outsiders and want to immerse you in the culture. I have learned so much about this culture and truly respect and value the community..

What advice do you have for students considering a career with the USPHS Commissioned Corps?

Research, research, research. The Commissioned Corps is not just a job, but a career. Learn as much as you can about each of the agencies and sites you are interested in. Apply for JRCOSTEP and SRCOSTEP positions. Contact a recruiter for the Commissioned Corps. There are many people who want to see the Corps expand and accomplish new objectives and we cannot do that without new pharmacists joining the Corps.

Interested in an IHS Pharmacy residency?

Visit <http://www.ihs.gov/pharmacy/resident/index.cfm?module=home> for more information.

We will highlight a different site in each issue of the UPOC Newsletter.

Recruitment: More Than a Futile Pursuit

submitted by LCDR Bill Lehault



For four years, I have been visiting the University of Rhode Island College of Pharmacy (URI CoP) to give annual lectures about the United States Public Health Service (USPHS). The College has always heavily focused on teaching clinical skills to their pharmacy students, which is an attribute they are quite proud of. The administration goes as far as sharing faculty with Brown University's Medical School and integrates their students with other medical disciplines such as nursing and social workers. During my tenure as the University Point of Contact for URI CoP, pharmacy students have become even stronger and more driven in moving the profession forward in clinical as well as a diverse array of other practice areas. This trend is also noticeable at several other schools for which I have been a preceptor over the years. I have been receiving more phone calls and emails from interested students than ever before, with a greater level of inquiry and follow-up requested. Some may suggest the

cause is a saturated job market for pharmacists or perhaps improvements in PHS recruitment initiatives. While those may be contributing factors, I believe it is the environment we have created in the PHS that is naturally drawing the students in. The accolades pharmacy officers have received, the increasing number of articles that have been published, and the unique and diverse professional opportunities have the students gravitating toward a career in uniform.

But alas, for the time being at least, pharmacy officers are not being commissioned. It can be very discouraging. Despite this, we cannot give up as recruiters. I know at times our current efforts may seem futile, but it is vital to the future of the Corps that we continue to make our work known to the next generation of pharmacists. It was not easy to present to 150 students, get them



excited about the prospect of a career in the Corps, and have to consistently reiterate that at this juncture all they can do is apply. It has not been easy to go through the same process on a weekly

basis via phone and email. However, these efforts generate an increased awareness of who we are, what we do, and what we stand for. These efforts assure that when we do resume commissioning pharmacy officers, we will get the absolute best applicants in the field: those with advance degrees and certifications who will work and fight for what the USPHS stands for. So continue to take the phone calls; continue to respond to the emails. Direct students toward the SRCOSTEP program and PHS residencies. Most importantly, continue to make your face known at each of your associated universities. The future of the Corps depends on it.



Attention UPOCs!

The 2014 PHS Recruitment presentation has been posted to the website under "Recruitment Presentations." Please use this presentation for your upcoming speaking engagements regarding PHS Pharmacy:

http://www.usphs.gov/corpslinks/pharmacy/sc_recruit_pres.aspx

Pharmacist Profile: CAPT Pamela Schweitzer submitted by LT Stephanie Daniels

CAPT Pamela Schweitzer was selected as APhA's 2014 Federal Pharmacist of the Year for her work with the Indian Health Service (IHS) in increasing patient access to pharmacy services. She is currently serving as a Senior Health Insurance Specialist with the Centers for Medicare and Medicaid Services (CMS) in Baltimore, MD. CAPT Schweitzer also practiced as an IHS regional/area clinical specialty consultant pharmacist.

What inspired you to join the Commissioned Corps?

When I was completing my ambulatory care residency, I attended one of the national pharmacy meetings and stopped by the Indian Health Service booth for a closer look. This was my first exposure to US Public Health Service officers, and I really fell in love with both the opportunity for adventure and the service-mindedness of the environment. The idea of serving the underserved and working with communities really appealed to me, since I had done quite a bit of community service throughout my education, and I really wanted to work somewhere that I could continue to make a positive impact. This During my first assignment in Pine Ridge, SD, I was able to practice clinical pharmacy, and really came to appreciate how involved the health care team was with the community at large, and how greatly we were all valued by our patients. Even though I had planned to only serve 2 years and return to civilian life in California, I knew I was hooked on life in uniform, and I've never looked back!

What is one of the most important things that being a USPHS officer has taught you?

As USPHS officers, we're all much more than just pharmacists. My colleagues and I are healthcare leaders with diverse training in all areas related to public health, known for our excellence in both public health practices and advancing public health science. Besides providing direct patient care services to underserved populations, we also have opportunities to provide assistance in times of national health crises. As an officer and pharmacist, I've been deployed to national emergencies and public health crises as part of a trained response team. During the 2009 outbreak of H1N1, I was deployed to Atlanta, GA to help coordinate the receipt and nationwide distribution of vaccine supplies. I've also been fortunate to serve on teams that have been deployed to hurricane impact zones, providing healthcare services to recovering

communities. I've been able to see that the work I've done has made a positive impact on the world, and I've been able to work with other amazingly talented officers that share the same goals and drive. It feels like I really do learn something new every day, and being able to wear this uniform and serve my country has been an incredibly rewarding experience.

What is the biggest challenge you've encountered since joining the Corps?

My biggest challenge has always been trying to achieve balance in my life, juggling my personal and family life with a demanding career. I really love what I do, so sometimes it can be difficult to walk away at the end of the day knowing how much there still needs to be done. There have been times when I've been on the road almost every week, and then I ended up working over the weekend to try and catch up. As officers, we need to "walk the walk" in terms of maintaining fitness, nutrition, and getting enough rest so that we can set an example for our patients and colleagues. My family and friends understand how passionate I am about our mission, and they've always supported me in helping me keep my priorities in line. It's also been a challenge to continue to get out of my comfort zone to experience new things. I have a tendency to jump at new opportunities before I completely evaluate them, and that's really broadened my horizons and allowed me to experience things that I could have missed.



What would you like pharmacy students to know about your agency?

The Centers for Medicare and Medicaid Services (CMS)' role is to expand access to health care and make the US healthcare system more outcome-driven and cost-effective. CMS is really unique in the fact that we that we serve such an enormous population —nearly 100 million patients, or 1 in 3 US citizens! We're at the heart of implementing the Affordable Care Act (ACA), which has taken significant steps toward improving access to care, as well as the quality and affordability of care. One of the projects that I've been a part of is working with state Medicaid programs to implement the expanded eligibility systems as a part of the ACA. The work that we do here really does impact the health of the nation on a broader scale than anything I've ever done before. The complexity of the problems that we're attempting to solve is bigger than I ever realized before I came to this agency; it's something that's forced me to really open my mind to new methods of problem-solving.

Continued on next page.

Continued from Page 11 — Pharmacist Profile: CAPT Pamela Schweitzer

What advice would you give pharmacy students who are about to graduate?

Throughout your career, make an effort to learn and gain new experiences. The more skills you can bring to the table, the better! Even as a senior officer and pharmacist, I'm doing everything I can to expand my skill set, including going back to school to obtain a Master's in Health Administration. Every class I'm taking applies directly to the work I'm doing, and will help me influence our profession by allowing me to effect positive changes in national healthcare policies. Be open and creative—Always offer solutions instead of just presenting problems. Remain positive and stay enthusiastic—With every challenge you face, there's an opportunity to overcome it.

What is your vision for the future of the Corps?

I see the Corps as a leadership force to innovate, facilitate, and influence changes that improve our nation's health. USPHS Officers are extremely adaptable and have very unique and diverse skill sets and experiences. We're already influencing change to bring about improvements in

public health at the local, national, and international levels. USPHS pharmacists have been leaders in advancing and unifying clinical pharmacy practice for decades, and our research and publications are being used to expand pharmacist privileging and collaborative practice across the country. In these next years, we will continue to build upon our legacy of innovation and service to lead the profession in support of healthcare reform and public health.



Pharmacists' Role in the Fight Against Smoking submitted by LT Lysette Deshields, LT Ashlee

Januszewicz, LT Sadhna Khatri, and LCDR Monica Reed-Asante

Fifty years have passed since the release of the first *Surgeon General's Report on Smoking and Health*. The 50th Anniversary has been marked by the January 2014 Surgeon General's Report, titled, "The Health Consequences of Smoking: 50 years of Progress, the 50th Anniversary Surgeon General's Report on Smoking and Health." The report is a guide which shares the gains we have made since the last 50 years in reducing tobacco use. It also explains the devastating effects of smoking, and looks at the work that still needs to be done in order to achieve this public health mission. Although there has been a reduction in tobacco use over the last 50 years, thanks to various interventions, we need to remain determined in our tobacco control efforts to continue the decline of tobacco use in America.

Smoking has been the number-one cause of preventable death and disease in this country for decades. Although smoking rates have been cut in half since 1964, the current rate of progress is not fast enough. The death and

disease resulting from tobacco—which claims nearly 500,000 lives each year—is overwhelming. More than 20 million Americans have died due to smoking since the first *Surgeon General's Report on Smoking and Health* was issued in 1964.

As pharmacists we play a critical role in smoking prevention by educating the public about the effects of smoking. In addition, we also serve as clinical resources for the various counseling, behavioral and medication therapies used to assist in smoking cessation. Each time a pharmacist comes in contact with a patient who smokes, it is an opportunity for intervention. Pharmacist-assisted smoking cessation programs are available in many communities and pharmacists can even become certified as smoking cessation specialists.

There are many resources available to clinicians to aid them in treating patients, such as the following:

Resources to support and promote the Surgeon General's Report on Smoking

and Health and the campaign to decrease smoking prevalence: <http://www.surgeongeneral.gov/initiatives/tobacco/resources.html#press>.

Quit line Services and other information for smokers that clinicians can provide to patients: <http://smokefree.gov/> and <http://smokingcessationleadership.ucsf.edu/FSStopSmoking.htm>.

Resources for clinicians: <http://smokingcessationleadership.ucsf.edu/Resources.htm>.



Spring 2014

Useful Info and Resource Links

Agency	Contact	Telephone	Website	Email
Federal Bureau of Prisons (BOP)	CAPT Cassandra White	210-472-4510	http://www.bop.gov/jobs/positions/?p=Pharmacist	c3white@bop.gov
Centers for Disease Control (CDC)	LT Jennifer N. Lind	770- 488-5157	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)	LT Jane McLaughlin-Middlekauff	301- 443-1603	www.hrsa.gov	JMcLaughlin@HRSA.gov
Indian Health Service (IHS)	CDR Damion Killsback	301-443-2472	www.pharmacy.ihs.gov	damion.killsback@ihs.gov
Immigration Health Services Corps (IHSC)	CAPT Chae Un Chong	202-210-1773	www.ice.gov/about/offices/enforcement-removal-operations/ihs	chae.u.chong@ice.dhs.gov
National Institutes of Health (NIH)	CAPT Bob Dechristoforo (Ret.)	301-496-5477	www.nih.gov	rdechris@nih.gov
U.S. Coast Guard	CAPT Deborah Thompson	202-475-5181	http://www.uscg.mil/health/cg1122/pharmacy.asp	Deborah.J.Thompson@uscg.mil
Centers for Medicare and Medicaid Services (CMS)	LT Teisha Robertson	410-786-6567	www.cms.gov	Teisha.Robertson@cms.hhs.gov
USPHS Best Kept Secrets (PDF or online view)			http://www.usphs.gov/profession/pharmacist/secrets.aspx	
Facebook Page			www.facebook.com/USPHSPharmacists	
IHS Residency Information			http://www.ihs.gov/medicalprograms/pharmacy/resident/	
Uniform Help Desk Email			www.phscuniform@hhs.gov	
Uniform Information			http://www.usphs.gov/aboutus/uniforms.aspx	
USPHS			http://usphs.gov	
USPHS PharmPAC Website			http://www.usphs.gov/corpslinks/pharmacy/	
USPHS Pharmacist Listservs			http://www.usphs.gov/corpslinks/pharmacy/listserv.aspx	
USPHS Student Opportunities			http://www.usphs.gov/student/	

Upcoming Pharmacy Meetings: 2014

June 10-12, 2014	Commissioned Officer's Association (COA) UPHS Scientific and Training Symposium- Raleigh, NC
June 11-14, 2014	American Society of Consultant Pharmacists (ASCP) Midyear Conference—Phoenix, AZ
June 26-30, 2014	American Association of College Pharmacists (AACP) Annual Meeting—Grapevine (Dallas), TX
October 18-22, 2014	National Community Pharmacists Association (NCPA) Annual Covention—Austin, TX
November 4-7, 2014	American Society of Consultant Pharmacists (ASCP) Annual Meeting - Orlando, FL
December 7-11, 2014	American Society of Health-System Pharmacists (ASHP) Midyear Clinical Meeting—Anaheim, CA



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



We want your submission of articles and pictures! Please email LT Honeylit Cueco and she will forward them to the appropriate section leads!

Did you know?

The UPOC Newsletter is potentially read by the 1,276 subscribers to the PHS-pharmacists listserv and the 567 subscribers on the pharmacy student listserv. In total, there are over 1,800 readers of the UPOC newsletter. BUT... it's up to you to distribute. Please take the time to distribute the UPOC Newsletter to your Universities or take a colored copy for your Career Fair Recruitment table.

Thank you from the UPOC Newsletter Workgroup!

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