

2018 MPA Spring Seminar

April 20-21, 2018
An offering of the MPA Health-Systems Academy



Skaggs School of Pharmacy, University of Montana – Missoula
Mary Alice Fortin Education Center, Billings Clinic – Billings

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The University of Montana Skaggs School of Pharmacy is accredited by the Accreditation Council for Pharmacy Education (ACPE) as a provider of continuing pharmacy education. This agenda has been approved for a total of 9.25 contact hours / 0.92 CEU for pharmacists and 6.0 contact hours / 0.6 CEU for pharmacy technicians. There are 5 modules. Participants must attend all sessions in a module to receive the credit for that module.

Friday – April 20, 2018

1:00 – 2:00 pm

Conference call
Billings⇒Missoula

Montana Pharmacist Patient Care Alliance Meeting

Carla Cobb, PharmD, BCPP – Owner, Capita Consulting, Billings
(Registration not required to participate in this meeting. Not ACPE approved.)

2:00 – 2:30 pm

Registration

2:30 – 2:40 pm

Welcome, Announcements, and Pre-Test Questions

Module 1 (2:45 – 7:00 pm): Approved for 3.5 contact hours / 0.35 CEU for pharmacists and pharmacy technicians. Must be present for entire module to receive credit. Partial credit for module is not available. **UAN: #0035-9999-18-018-L04-P/T.**

2:45 – 3:05 pm

Missoula⇒Billings

Montana's Antimicrobial Stewardships: Time for Pharmacists to Consort?

Vince Colucci, PharmD, BCPS, AQ-C, AACC, CPP – Professor, Department of Pharmacy Practice, Skaggs School of Pharmacy, University of Montana, Missoula

At the close of this presentation, pharmacists and pharmacy technicians will be able to:

1. Name two advantages of having a Montana Pharmacist Infectious Disease (ID) network.
2. Recognize the opportunities that Antimicrobial Stewardship offers to pharmacy and pharmacists.

3:05 – 3:25 pm

Missoula⇒Billings

Are You Hip to New Info? A Review of Relevant Articles for Antimicrobial Stewardship

Tom Richardson, PharmD, BCPS, AQ-ID – Pharmacy Clinical Coordinator, Residency Program Director, St Peter's Health, Helena

At the close of this presentation, pharmacists and pharmacy technicians will be able to:

1. Discuss key concepts from presented literature that may help augment education and/or practices as it relates to antimicrobial stewardship.

3:25 – 3:45 pm

Missoula⇒Billings

Development and Implementation of a Urinary Tract Infection (UTI) Treatment Protocol in a Skilled Nursing Facility

Jenner Minto, PharmD - PGY1 Pharmacy Resident, University of Montana, Missoula

At the close of this presentation, pharmacists will be able to:

1. Discuss the importance of using facility-specific data to develop a UTI treatment protocol in a Skilled Nursing Facility.
2. Describe the steps involved in creating a facility-specific UTI treatment protocol.

At the close of this presentation, pharmacy technicians will be able to:

1. Describe the steps involved in creating a facility-specific UTI treatment protocol.

3:45 – 4:05 pm
Missoula⇒Billings

Improving a Medication Reconciliation Service at a Community Hospital
Staci Hemmer, PharmD - PGY1 Pharmacy Resident, Community Medical Center, Missoula

At the close of this presentation, pharmacists will be able to:

1. Identify patients at high-risk of experiencing an adverse event during hospitalization due to errors on the home medication list.
2. List several strategies for quickly training APPE students to become contributing actors in a hospital medication reconciliation service.

At the close of this presentation, pharmacy technicians will be able to:

1. Identify patients at high-risk of experiencing an adverse event during hospitalization due to errors on the home medication list.

4:05 – 4:10 pm

Break

4:10 – 4:30 pm
Billings⇒Missoula

Improving USP <800> Compliance in a Community Healthcare Organization
Brady Conner, PharmD - PGY1 Pharmacy Resident, St. Vincent Healthcare, Billings

At the close of this presentation, pharmacists and pharmacy technicians will be able to:

1. Recognize or implement strategies to improve USP <800> compliance in health care settings.

4:30 – 4:50 pm
Billings⇒Missoula

Implementation of a Risk-score-dependent Antiemetic Protocol to Reduce Post-Operative Nausea and Vomiting (PONV) in Inpatient Surgical Patients
Eugene Eldridge, PharmD - PGY1 Pharmacy Resident, St. Vincent Healthcare, Billings

At the close of this presentation, pharmacists and pharmacy technicians will be able to:

1. Recognize the value of standardized protocols in achieving optimal healthcare.

4:50 – 5:10 pm
Billings⇒Missoula

Implementation of a Pharmacy-Driven Transitions of Care Service after Hospital Discharge
Sonja Clausen, PharmD - PGY1 Pharmacy Resident, Bozeman Health, Bozeman

At the close of this presentation, pharmacists will be able to:

1. Understand the impact of post-discharge transitions of care pharmacists on patient care.
2. Identify potential opportunity for post-discharge pharmacist –led patient appointment prior to the patient’s primary care provider appointment.

At the close of this presentation, pharmacy technicians will be able to:

1. Understand the impact of post-discharge transitions of care pharmacists on patient care.

5:10 – 5:30 pm
Billings⇒Missoula

Development of a Pharmacist-managed Oral Chemotherapy Program in a Community Outpatient Cancer Center
Danielle Lauridsen, PharmD - PGY1 Pharmacy Resident, Bozeman Health, Bozeman

At the close of this presentation, pharmacists and pharmacy technicians will be able to:

1. Recognize the pharmacist’s role in managing patients on oral chemotherapy.

5:30 – 5:45 pm

Break

5:45 – 6:45 pm
Billings⇒Missoula

Journey to a Resilient and Thriving Pharmacy Workforce
Jennifer Schultz, PharmD, FASHP - Clinical Pharmacy Supervisor/PGY1 Residency Program Director, Bozeman Health, Bozeman

At the close of this presentation, pharmacists and pharmacy technicians will be able to:

1. Explain why clinician burnout is a patient care and healthcare workforce problem that needs addressing.
2. Discuss what is known about burnout in the pharmacy workforce.
3. Describe the National Academy of Medicine Clinician Well-Being and Resilience Action Collaborative.
4. Identify strategies to impact well-being and resilience in pharmacists, pharmacy residents, student pharmacists and pharmacy technicians.

6:45 – 7:00 pm Post-Test Questions and Evaluations

7:00 – 8:00 pm Reception

Saturday – April 21, 2018

8:00 – 8:30 am Registration and Continental Breakfast

8:30 – 8:40 am Welcome, Announcements and Pre-Test Questions

Module 2 (8:45 – 9:45 am): Approved for 1.0 contact hours / 0.1 CEU for pharmacists and pharmacy technicians. Must be present for entire module to receive credit. Partial credit for module is not available. UAN: #0035-9999-18-019-L04-P/T.

8:45 – 9:45 am **Pharmacists Must be Leaders: Perspectives on Leveraging Leadership to Improve Patient Care**
Billings⇒Missoula **Paul Abramowitz**, PharmD, Sc.D (Hon.), FASHP - CEO American Society of Health-System Pharmacists, Bethesda, MD

At the close of this presentation, pharmacists and pharmacy technicians will be able to:

1. Describe contemporary leadership perspectives applicable to colleagues and patients.
2. Identify essential leadership knowledge, skills, and attributes to advance practice and impact care.
3. Describe strategic leadership imperatives in the current environment.
4. Illustrate examples of leadership excellence across the pharmacy enterprise.

Module 3 (9:50 am – 12:00 pm): Approved for 2.0 contact hours or 0.2 CEU for pharmacists. Not eligible for pharmacy technician credit. Must be present for entire module to receive credit. Partial credit for module is not available. UAN: #0035-9999-18-020-L01-P.

9:50 – 10:10 am **Evaluation of a Pharmacist-provided COPD Self-management Intervention Program on Hospital Readmission Rates after Acute Exacerbation of COPD**
Missoula⇒Billings **Clayton Hamilton**, PharmD - PGY1 Pharmacy Resident, VA Montana Health Care System, Fort Harrison

At the close of this presentation, pharmacists will be able to:

1. Describe four key components of a COPD self-management education session.

10:10 – 10:30 am **The Implementation of a Pharmacy Run Outpatient Addiction Clinic Focusing on Patients With High Risk for Negative Outcomes with Active Alcohol Use Disorder (AUD)**
Missoula⇒Billings **Jaime Cantu**, PharmD - PGY1 Pharmacy Resident, VA Montana Health Care System, Fort Harrison

At the close of this presentation, pharmacists will be able to:

1. Discuss the implementation of a pharmacy run outpatient clinic focusing on alcohol use disorder.

10:30 – 10:50 am **Pharmacist Impact on Transition to Home after Hospitalization: An Evaluation of 30-day Readmission Rates**
Missoula⇒Billings **Aspen Klawitter**, PharmD - PGY1 Pharmacy Resident, Benefis Health System, Great Falls

At the close of this presentation, pharmacists will be able to:

1. Recognize a need for pharmacist involvement in transitions of care.

10:50 – 11:00 am Break

11:00 – 11:20 am **Impact of Pharmacist-driven Inpatient Penicillin Skin Testing on Antimicrobial Stewardship Practices**
Missoula⇒Billings **Stacy Harmon**, PharmD - PGY1 Pharmacy Resident, St. Peter's Hospital, Helena

At the close of this presentation, pharmacists will be able to:

1. Identify the clinical interventions that a pharmacist is able to make after completing a penicillin skin test with a patient.

11:20 – 11:40 am
Missoula⇒Billings

Clinical Pharmacist Impact on the Management of Uncontrolled Diabetes in a Primary Care Setting

Kaity Harrington, PharmD - PGY1 Pharmacy Resident, St. Peter's Hospital, Helena

At the close of this presentation, pharmacists will be able to:

1. Define CPC+ and explain how a pharmacist can assist in meeting clinical quality measures, set by CPC+, to improve patient care.
2. Identify areas where a pharmacist can provide medication management and education to improve patient outcomes in patients with uncontrolled diabetes.

11:40 am – 12 pm
Missoula⇒Billings

Pulmonary Embolism: Assessment, Risk-stratification and Treatment Plan for Outpatient Management of Low-risk Patients

Josh Wood, PharmD - PGY1 Pharmacy Resident, Providence St. Patrick Hospital, Missoula

At the close of this presentation, pharmacists will be able to:

1. Compare and contrast the various validated tools for the identification of patients with pulmonary embolism.
2. Distinguish between the different risk and mortality algorithms that exist and the merits of using multiple criteria for stratification.

12:00 – 12:15 pm **Lunch**

Module 4 (12:15 – 1:50): *Approved for 1.5 contact hours / 0.15 CEU for pharmacists and pharmacy technicians. Must be present for entire module to receive credit. Partial credit for module is not available. UAN: #0035-9999-18-021-L04-P/T.*

12:15 – 12:45 pm
Billings⇒Missoula

Montana ASHP Delegates Updates

Jason Nickish, PharmD, MBA, BCPS – Director of Pharmacy, Providence St. Patrick Hospital, Missoula

At the end of this presentation, pharmacists and pharmacy technicians will be able to:

1. Describe the proposed policies being considered by the 2017 ASHP House of Delegates.

12:50 – 1:50 pm
Billings⇒Missoula

TECHnicLeigh Speaking

Leigh Scherer, BS, CPhT – Sr. Pharmacy Applications Analyst, St. Vincent Healthcare, Billings, Holy Rosary, Miles City and St. James, Butte

JoEllen Maurer, BS Pharm, MHA, BCPS – Pharmacy Clinical Manager/PGY1 Pharmacy Residency Program Director, St. Vincent Healthcare, Billings

At the close of this presentation, participants will be able to:

1. Review the traditional roles of the pharmacy technician pertaining to medication distribution.
2. Discuss the educational requirements of pharmacy technicians in Montana.
3. Describe opportunities for technician career advancement.

Module 5 (1:50 – 3:10): *Approved for 1.25 contact hours / 0.12 CEU for pharmacists. Not approved for pharmacy technicians. Must be present for entire module. Partial credit for module is not available. UAN: #0035-9999-18-022-L01-P.*

1:50 – 2:10 pm
Billings⇒Missoula

Evaluation of Pharmacist Interventions in Patients with Substance Use Disorder and Mental Illness Managed through a Collaborative Telehealth Educational Model

McKinley Mitchell, PharmD - PGY1 Pharmacy Resident, Billings Clinic, Billings

At the close of this presentation, pharmacists will be able to:

1. Explain the Project ECHO model and the hub-site pharmacist's role within the model.
2. Describe the most common types of medication recommendations made during the Corrections Collaborative ECHO.

2:10 – 2:30 pm
Billings ⇄ Missoula

Assessment of Phlebitis and Infiltrations Following Standard Versus High Concentration Amiodarone Boluses in Hospitalized Adult Patients without Central Venous Access

Brianna Cajacob, PharmD - PGY1 Pharmacy Resident, Billings Clinic, Billings

At the close of this presentation, pharmacists will be able to:

1. Describe the association of phlebitis and infiltrations with peripheral intravenous administration and current practices to decrease the risks.
2. Compare the incidence of phlebitis and infiltrations in standard versus high concentration amiodarone boluses.

2:30 – 2:50 pm
Billings ⇄ Missoula

Treatment Failure Rates in Patients Receiving Low Versus High Oral Bioavailability Antibiotics for Gram-negative Bacteremia

Ryan Gumbleton, PharmD - PGY1 Pharmacy Resident, Billings Clinic, Billings

At the close of this presentation, pharmacists will be able to:

1. State treatment failure rates for patients receiving low versus high oral bioavailability antibiotics for gram-negative bacteremia.
2. Compare 30-day all-cause mortality rates for individuals with gram-negative bacteremia treated with step-down oral antibiotics with low versus high oral bioavailability.

2:50 – 3:10 pm
Billings ⇄ Missoula

Prospective Medication Order Review in the Emergency Department: An Evaluation of Pharmacist Impact on the Medication-use Process

Brittany Berg, PharmD - PGY1 Pharmacy Resident, Billings Clinic, Billings

At the close of this presentation, pharmacists will be able to:

1. Compare time from order entry to medication administration before and after requirement of prospective review among medication orders placed by emergency department physicians.
2. Identify strengths and weaknesses of the prospective medication order review process for the emergency department.

3:10 – 3:20 pm

Post-test Questions and Evaluations

3:20 – 3:30 pm

Closing Remarks / Adjourn