

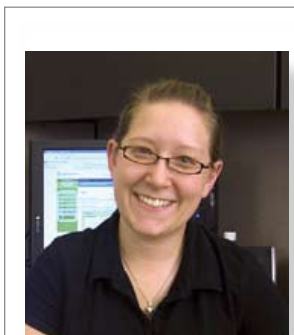
Career Profile

Rebekah Jackowski, PharmD
Medication Management Specialist
University of Arizona College of
Pharmacy

I always knew I'd end up with a career in a health care-related field. In high school, I discovered my love for chemistry, and in exploring careers in this area, I found pharmacy. After job shadowing at the local independent pharmacy and working in a local chain pharmacy, I knew I had found my calling.

When I started my pharmacy education at the University of Michigan College of Pharmacy, I figured I would end up working in community pharmacy upon graduation. During my fourth-year rotations, I discovered clinical pharmacy within the community pharmacy setting. My passion in pharmacy comes from talking to people and I enjoy the close relationships that form between pharmacists and their patients. Providing clinical services in the community would allow me to blend both of these interests. I knew that I would need additional training, so I started exploring community pharmacy residencies.

I started my search by looking at the Community Pharmacy Residency Locator on APhA's Web site. I started sending e-mails to the residency directors and set up more than 17 interviews during the Personal Placement Service at the ASHP Annual Meeting. At the meeting, I met with many different residents and directors to discuss the residencies. This allowed me to decide the programs for which I wanted to apply. I was very interested in finding a program that was well-established, and quickly learned that the University of Iowa had an outstanding community pharmacy residency program. During my residency at the University of Iowa and Osterhaus Pharmacy, I spent my days focusing on delivering patient care from the prescription filling process to providing other health care services, such as hypertension, cho-



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lesterol, diabetes, and weight management. One of the things I enjoyed the most was the ability to work with student pharmacists. I really enjoyed opening their eyes to the opportunities that exist in community pharmacy.

Plenty Of New Responsibilities

After completing my residency, I accepted a shared faculty position at the University of Arizona (UA) College of Pharmacy and Bashas' United Drug. Half of my time was spent on university responsibilities, such as teaching, advising, and research. The rest of the time, I worked at Bashas'—a grocery store chain—developing clinical pharmacy services. During this time, I got involved in providing information regarding Medicare Part D. Working with the UA NCPA student chapter, I set up community presentations, where we paired student pharmacists with seniors to go online and help them look at the different plans.

I also started working with a colleague on a project to contract the UA College of Pharmacy with NCPA and Community MTM Services LLC, a subsidiary of NCPA, to create a call center, the Medication Management Center (MMC). The Center provides medication therapy management (MTM) services to eligible seniors. NCPA worked with MemberHealth, Inc., to develop Community Care RX, one of the only Medicare Part D plans that reimburses pharmacists for providing MTM services. MMC functions as a back-up to community

pharmacies. If a pharmacy chooses not to provide MTM services this year or is unable to provide the service, the call center pharmacists provide this service.

I was then offered and accepted the position of medication management specialist and director of student education at the Center when it officially opened this past April. I have many daily tasks, but my main responsibility is working with senior citizens to provide MTM. This is accomplished by speaking with seniors across the country that qualify for MTM services and assessing their medication profiles. During the MTM session, I go over all the patient's medications and disease states to make sure they are not experiencing any adverse reactions and that all disease states are currently being treated. If any problems are identified, I contact the patient's physician with my recommendations. As the director of student education, I precept two or three fourth-year PharmD students each cycle. I also manage 21 pharmacy and pre-pharmacy students who work in the Center to provide computer and technical support for community pharmacies providing MTM across the country. In addition, I am a clinical assistant professor at UA and provide selected lectures for first- and second-year PharmD students.

Helping To Shape The Future

Looking back, I could never have imagined where I am now. Everyday, I do something new. I am able to work with students, pharmacists, and professors within the university setting. This allows for a collaboration of ideas, which in turn, allows all of the pharmacists in the Center to provide patients with the best possible care.

The thing I enjoy the most about my job is that I am on the cutting-edge of pharmacy. Right now, the world is waiting to see how pharmacy will respond to Medicare Part D. In my current position, I'm not waiting. I'm taking charge and I believe that I am helping to shape the future of MTM services.

Resident's Corner

Presenting and Publishing Your Project

By Jean-Venable "Kelly" Goode, PharmD. Excerpted by New Practitioner Kushal Shah, PharmD.

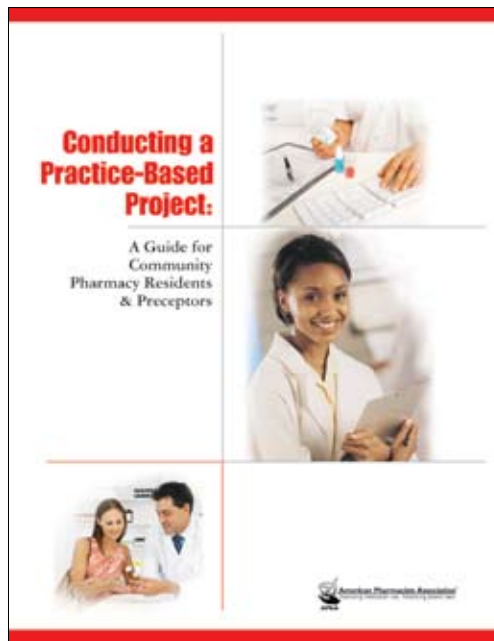
Making presentations about your residency project and seeking to publish your findings helps you practice essential skills. The time to start planning for presenting and publishing your residency project is when you first develop your overall project plan. Your project timeline should not only include steps to keep you on track for writing the final project report, but should also incorporate opportunities to gain presentation and writing experience throughout your residency year.

Apply for Poster and Podium Presentations

Scientific and association meetings use two methods for communicating the results of research or projects: the poster presentation and the podium or platform presentation. Podium presentations, which are formal presentations of 10 to 15 minutes with slides, are often considered more prestigious than poster presentations. A poster presentation is an enlarged display on a bulletin board, which is available for viewing throughout most of the meeting, accompanied by time slots when the author is available to answer questions. To be chosen to participate in either type of session, you must apply and your work must be carefully reviewed.

Follow the Correct Submission Process

To be considered for a poster or podium presentation, you must write an abstract about your project and submit it to the sponsoring organization. An abstract is a short paragraph summarizing important points from the project, which reviewers use to determine the work's merit. Each association has standard criteria for submission of the title and abstract. It's very important to follow all instructions and to adhere to the sponsoring organization's submission requirements, including the following:



- Deadline for submission
- Appropriate submission form
- Font size
- Format for title and abstract
- Word count for title and abstract

Understand the Essentials of Abstract Review

When the sponsoring organization receives the abstracts, they go through an initial screening process and are then sent to three or more reviewers with expertise in the specific area. (The abstracts are blinded so the reviewers do not know who submitted them). Abstracts are evaluated for the content and appropriateness of each section plus overall quality, originality, relevance, and interest. Because each reviewer may be responsible for evaluating 10 or more abstracts, it's important that you follow all instructions and be clear, concise, and neat.

Write the Title and Abstract Properly

Check the sponsoring organization's word count requirements for the title and abstract before you write them. The abstract serves not only to synopsise the project and convey its value, but it also attracts viewers to the poster or presentation. Although you should always check the specific submission requirements of the particular organization, abstracts generally include the following sections:

- Introduction (objective); may also include background
- Materials and methods (also may be called Design, Setting, and Patients/Participants)
- Results
- Conclusion (also may be called Discussion)

Plan Your Poster after Acceptance

The detailed planning process for your poster presentation begins after you are notified that your abstract has been accepted. Be sure to follow all instructions carefully. First, decide what information will be included in it. Pick a few points for major emphasis. The following topics should be included in the poster presentation:

- Title, authors' names, and affiliations
- Abstract
- Introduction (objective); may also include background
- Materials and methods (or Study design)
- Discussion
- Results
- Conclusions

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Presenting and Publishing Your Project *continued from page 2*

Generally, a poster display is a mixture of text, illustrations, summary tables, graphs, charts, and diagrams. Be creative in displaying the important information from your project in a visually appealing manner. After you have decided the content to include in the poster, its layout and design should be planned according to the allotted space.

Be a Professional, Savvy Presenter

Being a presenting author at a poster session offers opportunities for networking, establishing future collaboration with attendees interested in the same research area, and receiving feedback from senior investigators. Interact in a friendly and professional way with potential viewers. Handouts of the poster are not necessary, but are a nice touch. Don't forget to introduce yourself to your poster-session neighbors, especially if no one else is around. Bring business cards and hand them to viewers who express interest. While you're at the meeting, review the other posters to get design ideas for the future and to trigger your thinking about additional projects you could do in your practice area.

Prepare Slides and Practice for Podium Presentation

Planning and preparing a podium session is very similar to the process for a poster session, except that the podium session involves as a slide presentation of 10 to 15 minutes with three to five minutes for questions. The order of content on the slides follows the same order as in a poster presentation, except the abstract is not presented. The key to successful podium presentations is practice, practice, practice.

Plan Carefully for Publication

Practice-based research can be published

in two types of journals:

- Peer-reviewed journals, which require that all manuscripts pass scrutiny by experts in the subject matter.
- Non-peer-reviewed journals only require review by the editor or editorial staff.

Peer-reviewed journals are more prestigious. Before submitting a manuscript, follow all instructions for writing and submitting the manuscript carefully. Author guidelines, located in the January issue of the journal, provide information about authorship, financial disclosure, copyright transfer, acknowledgements, manuscript preparation, and journal style.

Write the Manuscript

The first step in publishing practice-based research is writing the manuscript. An original research article is organized in the following format:

- Title
- Abstract
- Introduction
- Methods
- Results
- Discussion

An abstract for a manuscript should clearly outline and summarize the content of the article. Follow the abstract style of the journal for which you are submitting.

Submit the Manuscript

A good first choice for submitting your manuscript is the journal of the association where you presented the abstract. You may have to change the manuscript to adhere to another journal's style. Always proofread the manuscript to check spelling, punctua-

tion, and grammar. Double check tables, graphs, diagrams, and references for accuracy before you submit the manuscript. Be sure to follow all the journal's instructions for authors. Submit the manuscript with a cover letter addressed to the current editor. Include in the package the correct number of manuscript copies as well as all necessary forms and signatures.

Make Needed Revisions After Acceptance

Congratulations! Your manuscript has been accepted. It may be accepted without revisions, with revisions, or subject to extensive revisions. If the manuscript needs revisions, you will need to address each comment from the reviewers.

Submit Again

If your manuscript is rejected, don't be discouraged. Not every manuscript is accepted on the first try. Sometimes, it may take two or three attempts to locate the best journal for a manuscript. Use the reviewers' comments to improve the manuscript. You may have to revise the manuscript further to fit the style of each journal for which you submit. Keep trying, and best of luck!

*Excerpted from **Conducting a Practice-Based Project**, 2006, APhA. This guide was written to help residents and preceptors understand the basic steps and principles of conducting practice-based projects in the community setting. Pharmacists who want to conduct practice-based projects can also benefit from the information in this guide. To order this book (\$25 for APhA members), go to www.pharmacist.com/store.cfm.*

Just Life

Home Ownership: Is It Right For You?

By Rebekah Cole Dube, PharmD

So you've probably already reached many milestones in your life—graduating high school and college, beginning your career, and maybe you've gotten married and had a child or two along the way. Maybe one of the next milestones you would like to reach is buying a home.

Before taking the leap into the home buying process, weighing the advantages and disadvantages of purchasing a home and looking at the steps involved could help you decide if ownership is right for you and if this is the right time to buy.

Some advantages of home ownership include:

- **Impact on your taxes.** Mortgage interest and local property taxes on your primary residence may be deductible from your federal income taxes, benefits that may not be available to renters.
- **You can build equity.** Equity is an asset equal to the portion of your home that you actually own. Equity is determined by calculating the difference between the market value of your home and the balance owed on your loan.
- **Experience of ownership.** Owning your own home can fill you with the pride and experience of owning something that is all yours.

Along with the advantages of home ownership come disadvantages:

- **Necessary upkeep.** Owning a home comes with the responsibility of maintaining it. Keep in mind that older homes usually require more maintenance and care than newer homes.
- **Your home's value could decrease or depreciate.** This may result from neighborhood changes or wear and tear on the property.



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- **Your monthly mortgage payment may far exceed what you used to pay for rent.** This can happen if you were paying low rent in proportion to your income level and then applied for the maximum mortgage amount available to you. Monthly responsibilities such as utilities, maintenance, and insurance that were previously taken care of in your rent payments may also have you paying more.

The U.S. Department of Housing and Urban Development offers the following nine steps as a guide when buying a home (www.hud.gov/buying).

Step 1: Figure out how much you can afford

How much you can afford is really a function of two things: How much you can borrow and how much of a down payment you can make. As a rule of thumb, your annual mortgage payment, taxes, and homeowner's insurance should not exceed 28% of your gross income. Then determine how much you have for a down payment, leaving yourself enough left over to pay closing costs, which can add up

to 3% to 5% of your total home's value.

Step 2: Know your rights

As a homebuyer, you will have to put your trust in many different individuals and institutions. When doing so, you should understand what rights you have and what exists for your protection. The Real Estate Settlement Procedures Act (RESPA) is a federal law that regulates the settlement practices within the real estate industry. RESPA is one of the most important laws to familiarize yourself with when buying a home.

Step 3: Shop for a loan

Save money by doing your homework. There are many different types of loans and mortgages available, so talk to several lenders, compare costs and interest rates, and negotiate to get a better deal.

Step 4: Learn about homebuying programs

Homebuying programs may differ from state to state. HUD has links to many state programs at www.hud.gov/buying/localbuying.cfm.



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Home Ownership: Is It Right For You? *continued from page 4*

Step 5: Shop for a home

This step generally begins with choosing a real estate agent. You should feel comfortable that the person who is helping you through the process of buying your home is experienced and committed to meeting your needs. During this step, you will also begin to really figure out what you want in a home, if you have not already. Your agent will look for homes that closely resemble the criteria you have talked about and arrange times for you to see the properties.

Step 6: Make an offer

Once you have found a home, the next step is making an offer to purchase. Your real estate agent will most likely help you draft an offer to purchase. This document spells out the details of your offer, including the purchase price, what furnishings and appliances are included in the deal, the type of mortgage, and various contingencies upon which the offer may be dependent. Be confident you agree with the terms of the offer to purchase when you sign it, as it is a legally binding document.

Step 7: Get a home inspection

A home inspection is an evaluation of a home's condition by a trained expert. During a home inspection, a qualified inspector takes an in-depth and impartial look at the property you plan to buy. The inspector will:

- Evaluate the physical condition.
- Identify items that should be repaired or replaced.
- Estimate the remaining useful life of the major systems, equipment, structure, and finishes.

Step 8: Shop for homeowners insurance

Most lenders require that you hold homeowners insurance, to minimize the financial loss to both you and your lender in the event of property loss or damage due to a fire, storm, or other natural disaster. Be sure to get pricing from several different insurance companies before making a decision.

Step 9: Sign Papers

The final step of home buying is often referred to as the "closing" or "settlement." At the closing you will sign the mortgage note, mortgage, or other evidence of indebtedness promising to repay the loan. Make certain that you understand what you are signing. Don't be afraid to ask questions about the legal terminology involved. The seller will execute a deed, which will convey ownership of the property to you. At the closing you will receive many important documents that you will want to keep. These papers include the receipts for the payments you made, a copy of the land survey, if performed, and your closing statement or settlement sheets.

Deciding to purchase a home requires a lot of thought and is very different for each individual, but being educated and staying well-informed throughout the process is the best way to ensure you are a happy homeowner for years to come.

Rebekah Cole Dube, PharmD, is pharmacy clinical coordinator at Martin's Point Healthcare in Portland, Maine.

Financial Planners Offering Free, Initial Consultations To APhA New Practitioners

Have you checked out the APhA New Practitioner Network Financial Planning Resource Center yet? APhA and the Financial Planning Association® (FPA®) have joined forces to help you discover the value of financial planning. As part of APhA's relationship with FPA, you have easy access to FPA's popular online financial planner referral program, PlannerSearch, which allows you to search for CERTIFIED FINANCIAL

PLANNER(TM) (CFP®) professionals by city and state, zip code, radius, last name, and even specialty. You have the opportunity to search for financial planners who offer free, initial consultations—a benefit exclusive to APhA members—as well as other benefits, including the "Ask a CFP Professional" e-mail hotline.

You will also find financial planning brochures chock full of important

information and access to the College Loan Corporation Web page.

Take control of your financial future today! Go to the APhA New Practitioner Network Financial Planning Resource Center at www.aphanet.org, click on Academies & Interest Groups, then New Practitioners.



Can You Afford to Live with a Pet? Plan Before You Purchase or Adopt

The animal shelters of this country are full of abandoned pets that weren't fully considered before they were brought home. Pet ownership is truly a labor of love, but just like having kids, there's a money aspect to every area of that commitment.

Here are some important money issues to consider before you bring home a pet.

Are you allergic? Wait, what does sneezing have to do with affording Fido? Plenty. According to the American Academy of Allergy, Asthma & Immunology, there are almost 10 million pet owners who have some sort of allergy to their pets. Check to see if you or your kids might be allergic to your chosen animal before you bring him home—or at least check your health care policy for coverage for allergy shots or other medications that can help you co-exist.

Make sure your home/rental policy allows pets. There are some insurers who will reject you if you have a large-breed dog. Check your coverage before you get the pet. You might also get stuck with a large pet deposit if you're a renter, usually half of which is nonrefundable. Keep in mind you're responsible for repairing damages to the rental caused by your pet.

Watch that grocery bill. Depending on the pet and your desire to give them only the best, an annual pet food bill can cost between \$150 to \$400. This isn't an argument for buying generic, but when it comes to pet food, always clip the coupons and check around to various pet stores for case discounts on your pet's gourmet chow. And confirm with your veterinarian whether you're giving your pet the right amount of food and at the right time. Your veterinarian may also recommend some

lower-priced, healthy alternatives.

Your pet's stuff. What stuff does a pet need? Well, lots more than most of us expect. According to the American Society for the Prevention of Cruelty to Animals (www.aspc.org), the average annual bill for toys and treats for a medium-size dog is around \$75. For a cat, it's around \$50. This, of course, does not count multiple pet beds, crates, carriers, litter boxes (and litter), or the occasional piece of couture.

Doctor, doctor. Vet bills can be the scariest financial aspect of pet ownership, and dealing with them spurs the most debate. In major metro areas, annual vet bills can average \$100 to \$250 just for the basics, which include an annual vaccination and checkup—no medication. For more serious matters—cancers, joint, and bone problems—bills easily run into the thousands. There are pet insurance companies, but financial experts argue whether premiums justify the benefits. According to the Humane Society of the United States (www.hsus.org), there are other affordability options:

- Ask the vet to let you negotiate a payment plan.
- Contact your local shelter to see if there are subsidized veterinary clinics in your community.
- If you have a specific breed, contact the national club for that breed and see if they might have a veterinary assistance fund.
- Ask your veterinarian to submit an assistance request to the American Animal Hospital Association Helping Pets Fund (www.aahanet.org).

When looks are everything. There are some people who may wait weeks for a haircut but their dog always looks fabulous. Vanity is one thing, but grooming is an important function for all pets, principally so their claws are maintained and that overgrown or matted hair doesn't get the chance to cause skin or infestation problems. Talk with your veterinarian first about what he or she believes is a proper grooming regimen for your pet and shop for a groomer based on experience and familiarity with your pet's breed. Grooming rates vary by community and size of the pet, with per-visit rates range from \$20 to \$100.

Daycare, pet-sitting, and lodging. Very few people can take time out of their workday to go home and walk and play with their pets. Likewise, many people fear taking pets on cross-country trips in cars and planes. That's why daycare and lodging services are so popular—and not exactly cheap. Depending on the community, daily dog-walking services can cost \$20 and up, overnight kennel fees may go well over \$30, and pet-sitting services can cost \$50 a day or more. It's always best to get references from local services, veterinary clinics, and most important, fellow pet owners. Also, check www.petsitters.org, the Web site for the National Association of Professional Pet Sitters.

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Carreer Manager

Find Time To “Become Active!”

By Fred Gattas, PharmD, BCNP

“Become active!” It’s a phrase that is taught, preached, and shouted throughout pharmacy school and it makes sense. You owe your livelihood to the profession of pharmacy and if you are going to continually make it better for yourself and your patients, you need to take up the torch previous pioneers have left us and take ownership of that progress. The problem? It’s easier said than done. Telling someone to “be active” is not the same as telling them how to become active. There are only 24 hours in a day and that time needs to be balanced between work, personal life, and that elusive activity called sleep.

As the past chair of the APhA New Practitioner Network, I have had the opportunity to learn a few things in this juggling act. Currently, I am chair of the Tennessee Society of Pharmacists, a practicing nuclear pharmacist, and was married in mid-August. I recently was promoted to senior quality assurance associate at Tyco Healthcare/Mallinckrodt, which necessitated relocating from Memphis to St. Louis, which meant selling my house, which also meant purchasing a new house. Stressful? Yes. Did it keep me from being involved? No. One easy solution would have been for me to quit an activity, but since my wife wouldn’t let me cancel the wedding, I decided to use some time management skills I learned as an APhA officer.

Check With The Boss

One of the first items I have on my checklist before becoming involved in a professional task or running for an elected position is to talk to my supervisor. There are many benefits to a company when one of their employees is professionally active. Volunteering challenges the employee and prevents them from becoming bored and looking for positions with other



Fred Gattas

companies, is a great opportunity for the employee to stay in tune with the profession and become a more educated pharmacist, and allows the pharmacist to create change that most likely is beneficial to the employee as well. Last but not least, from a public relations point of view, it’s good for company recruiting to show the public that the company—by way of its employee—is involved in the profession and its advancement. If you can discuss with your manager and be able to use company time to perform professional duties, that solves most time crunching issues.

Avoid Surprises

Secondly, be organized. It is one of the most important tools for being a professionally active pharmacist with minimal stress. Most association positions or projects can be performed over an extended time period, so it is crucial to avoid keeping tasks on the backburner until the day before the deadline. Working small amounts of time over multiple days is not only advantageous for work flow issues, but it also gives you many times to “sleep on it” and allows you to reflect on your

work and critique it. Many pharmacists have their own organizational methods and mine is using a PDA. The fact I can always access my contacts, to-do list, and calendar, all with alarm reminders, helps me stay aware of what needs to be done when. A PDA is even more useful when it is synched with a program on the computer that you use every day. So whether you stay organized digitally or with pen and paper, the point is to come up with some method that will keep you from being surprised with due dates and places you on a slow but steady schedule.

Association Involvement Is Fun, Rewarding

After graduation, remembering to pay association dues to APhA and your state and local pharmacy association is a great first step. A close second is contributing your time and talent. If you can devote a little time to give back, the rewards to your fellow pharmacists and patients is many-fold. With new and veteran pharmacists working for the betterment of pharmacy, there isn’t any challenge that cannot be overcome. And, remember, becoming active does not mean sacrificing work or personal time with proper management and organizational skills. You will find involvement on any scale not only rewarding and doable, but fun as well. The friendships and professional contacts you gain will last a lifetime. In fact, it’s how I met my future wife!

For information on the numerous ways to get involved and “Become active!,” please contact APhA Associate Director of New Practitioner Development Tom English at tenglish@aphanet.org.

Fred Gattas, PharmD, BCNP, is a senior quality assurance associate at Tyco Healthcare/Mallinckrodt in St. Louis.

Internet Connection

SurveyMonkey.com

By Leticia R. Moczygamba, PharmD

Are you looking for a quick way to seek feedback from your colleagues at work? Are you conducting a survey of pharmacists for a research project? SurveyMonkey.com can help!

From conducting a survey of my department to surveying pharmacists about medication therapy management services, using SurveyMonkey has allowed me to create and conduct surveys efficiently and professionally. My local pharmacy association even used SurveyMonkey to conduct officer elections.

SurveyMonkey is one online survey tool that can be used by pharmacists to collect various types of information. The purpose of SurveyMonkey is “to enable anyone to create professional online surveys quickly and easily.” Programming skills are not necessary to use SurveyMonkey and the user-friendliness and cost-effectiveness of this online survey tool make it an attractive option for professionals conducting online surveys.

Types Of Services

SurveyMonkey offers basic and professional subscriptions. While the basic subscription is free, it is limited to 10 questions and 100 responses per survey. Additionally, the basic subscription does not offer any of the advanced features (listed below) of SurveyMonkey. The basic subscription may be ideal for individuals who are conducting short surveys that do not require any of the advanced features.

The professional subscription is \$19.95 per month or \$200 per year. Up to 1,000 responses per month can be received. There is an additional charge of \$0.05 per response after 1,000 responses. Professional users can create an unlimited number of surveys, with an unlimited number of questions. Professional users also have access to the following advanced features:

Skip logic, Require answers, Randomize answer choices, Add a logo, Custom



Leticia R. Moczygamba

themes, Popup invitations, Custom redirect, Filter results, Share results, and Download results.

Survey Design

SurveyMonkey users begin survey design by choosing the colors and layout of each survey. Professional users can also customize their surveys by creating a logo. All users have access to more than a dozen types of questions, including single-choice, multiple choice, matrices, rating scales, drop-down menus, and open-ended questions. Users can also import images into their survey. Professional users also have options to create skip logic—you can customize the path a respondent takes through your survey by adding skip logic, which eliminates unnecessary confusion by skipping non-applicable questions—require answers to important questions, and randomize answer choices. At the end of the survey, respondents are directed by default to the SurveyMonkey home page. However, professional users can redirect respondents to a specific Web page.

Data Collection

After the survey is created, SurveyMonkey provides several methods for data collection. The first option is to create a link for an e-mail message or Web page. Users can copy the link in an e-mail to their sample or place the link on a Web page. The identities

of respondents will not be tracked using this method, so this may be a desirable choice for users who wish to keep responses anonymous. For users who wish to track the identities of respondents, SurveyMonkey will send a link to your e-mail list and then manage the list to track non-responders. Another way to collect responses is to create an invitation or survey “pop-up” that appears when someone visits a specific Web page indicated by the user. Responses to invitation or survey popups are anonymous.

Data Analysis

For data analysis, SurveyMonkey allows data to be collected in real time, and the user has access to the results summary at any time during data collection. Professional users can download results into Microsoft Excel or SPSS in a spreadsheet format. The data can be exported as either condensed or expanded, and in text or numerical form. Data can also be downloaded into relational databases, with a separate file of each database table.

Overall, SurveyMonkey is user-friendly and provides pharmacists with a cost-effective tool for conducting online surveys. Professional users have access to many advanced features that can provide customized surveys to meet the needs of any pharmacist. SurveyMonkey also assists pharmacists in the data collection process, thereby decreasing administrative burdens such as mailing out surveys and manually entering data into a computer.

The next time you need to collect information in a timely manner, consider using SurveyMonkey. It is sure to meet all your survey needs!

Leticia R. Moczygamba, PharmD, is a PhD candidate in the division of pharmacy administration at the University of Texas at Austin College of Pharmacy.

No. 1 Way Smart New Practitioners Manage Their Debt

Recently the government increased interest rates on federal student loans by almost 2%. As a result, unless you consolidated before July 1, your monthly payments have probably increased. Avoid the risk of future rate increases by consolidating your student loans today! Consolidation allows you to lock in a low interest rate for the life of the loan, combine all your federal student loans into one, convenient monthly payment, and potentially earn cash back. You can save money by consolidating if you act now.

Today, the average pharmacy school graduate owes \$60,000 in student loan debt, resulting in a monthly payment of more than \$700, if left unconsolidated. New practitioners often find it challenging to manage other expenses, such as rent/mortgage and car payments, with such high student loan payments. College Loan Corporation (CLC) recommends consolidation in order to minimize this financial burden.

Consolidation is a smart financial decision for your future. The savings from reduced student loan payments can be used to pay off high-interest debt such as credit cards, or you can roll the money into investments such as a 401(k) or toward the purchase of a new home.

Additional benefits of student loan consolidation:

- Cut monthly student loan payments by up to 45%.
- .25% interest rate reduction when payments are automatically deducted from your checking or savings account.
- Combine all of your federal student loan payments into one simple and convenient monthly bill.
- Possible tax deduction for many borrowers.



Special APhA cash back benefits!

With the personal service provided by CLC, the nation's seventh largest student loan provider, consolidating student loans is fast and easy.

"Having a personal loan consultant means that customers have a dedicated point of contact to answer questions and walk them through the application process," said CLC President Robert LaBreche. "It's our first-class service that sets CLC apart from other lenders."

Here's What To Do

Check to see if you have any unconsolidated federal student loans. If you have never consolidated before or you think you have loans that were left out of a previous consolidation, this is you.

CLC's personal loan consultants are available 24 hours a day, 7 days a week, to provide financial advice and assistance with the consolidation process. With the APhA VIP program through CLC, members are entitled to special cash back benefits, up to \$4,000*.

Call today at 800-314-0628 or log on to www.collegeloan.com/apha for a free consultation!

*Borrowers who make payments on time each month for 48 consecutive months will receive a cash rebate equal to 5% of their principal balance outstanding, up to \$4,000. Additional terms and conditions apply. Please contact CLC for details.

Five Winners Of CLC "Smooth Transitions Student Loan Debt Payoff" Announced

APhA New Practitioner members provided Smooth Transitions presentations to more than 25 colleges and schools of pharmacy last year, and five lucky PharmD graduates—now APhA New Practitioner members—who attended received \$1,000 checks as part of the College Loan Corporation "Smooth Transitions Student Loan Debt Payoff" prize drawing.

The five randomly selected winners are:

- Nancy Flentge, University of Houston
- Jason R. Green, University of Arkansas
- Courtney L. Price West Virginia University
- Alan S. Tan, University of the Pacific
- Huong Vo, University of Missouri—Kansas City

Smooth Transitions is a 30–60 minute presentation designed exclusively for final-year students focusing on life as a new practitioner. The presentation includes information on what to expect on the first days and months of work, creating a professional image, transitioning into new roles, and the benefits of APhA membership. APhA New Practitioner Mentors and other leader gave the presentations from January through June.

APhA thanks College Loan Corporation for its generous support of the 2006 Smooth Transitions presentations!

A Look Back To Move forward

By Erica V. Jefferson

“We need to promote the pharmacy profession! No one understands what pharmacists do.” How many times have you heard these comments? Or even made them yourself? No matter when you first heard the comments, it was not a new idea. Pharmacists have been calling for recognition since the profession was established.

William Procter Jr., a founding member of the then-American Pharmaceutical Association, observed in 1867 that “public opinion is in America a forceful agent of reforms and has been the main source of progress in pharmacy.” But it wasn’t until Asheville, N.C., pharmacist Robert J. Ruth introduced the idea of highlighting the profession through an annual celebration that the event took shape. At the 1924 APhA Annual Meeting, Ruth unveiled his plan of a “National Pharmaceutical Week,” and with that the first National Pharmacy Week was born. The first celebration was held on October 11–17, 1925. During this inaugural effort, radio stations across the country broadcast special programs that emphasized the professional side of pharmacy.

A 1959 National Pharmacy Week press kit, recently dusted off in the APhA newsroom, highlighted many of the same issues discussed today: pharmacy careers, medication costs, and standards for training. The kit offered practicing pharmacists displays, posters, radio and television material, newspaper articles, and even speeches (a complete kit cost \$2.00) to promote the profession, much like the promotions available on www.aphanet.org today. In fact, a current APhA consultant, George B. Griffenhagen, was on the public relations committee at that time.

From 1 week to a whole month

After celebrating National Pharmacy Week for nearly eight decades, 2004 marked the launch of American Pharma-



Erica V. Jefferson



American Pharmacists Month

cists Month (APhM). The expansion to a month was in response to APhA member comments that a week was simply not enough time to fully promote the expanding role of the pharmacist. And while the length of time has changed, the goal of the event has remained the same: to highlight pharmacists’ value to the health care system and their role as medication experts.

Since then, APhM has continued to grow. In 2005, President George W. Bush acknowledged the role pharmacy professionals play in the lives of Americans, while an increasing number of state pharmacy associations, pharmacists, student pharmacists, and pharmacy practices participate in the annual celebration.

‘Unsung Heroes’ honored

There have been other highlights, too. “Pharmacists: Unsung Heroes,” an hour-long television special co-sponsored by APhA, provided national exposure to the profession of pharmacy. The program aired last October in honor of APhM. The program stressed the indispensable link between pharmacists and the communities they serve, addressed the current shortage of pharmacists, looked at the implications of the shortage on medical care in certain communities, and outlined the various career opportunities available to students. Because of its success, the program will air again this fall. Look for this television program on your local Public Broadcasting Service station during October.

2006 theme: “Know Your Medicine—Know Your Pharmacist”

This year’s theme is, “Know Your Medicine—Know Your Pharmacist.” (“Pharmacist” is singular to emphasize the idea that you should have one primary pharmacist). For its part, APhA provides its members with a wealth of support and assistance through the *American Pharmacists Month Planning Guide* and an online product guide, which can be found at www.aphanet.org by clicking on the “Know Your Pharmacist—Know Your Medicine” logo. These resources—even more comprehensive than last year’s—are invaluable in helping you decide how best to commemorate the month with respect to marketing and promotion, community outreach, event planning, and media strategy.

If you have questions regarding APhM, please call the APhA Public Relations Department at 800-237-APhA.

Erica V. Jefferson is the APhA manager of public relations.

Moving Outside Of The “Other” Category

By Bob Reynolds

How many times have you been in a meeting waiting to hear someone refer to “pharmacist” as opposed to “other health care professional”? Thanks to efforts by APhA, its affiliates, practicing pharmacists, and student pharmacists, the profession is beginning to break out of that “other” category and assert itself as a group of practitioners on par with traditionally recognized health care professionals within public health, like physicians and nurses.

APhA, A Leading Proponent Of Expanded Role

In 1994, during a meeting with then–U.S. Secretary of Health and Human Services Secretary Donna Shalala, APhA CEO John A. Gans, PharmD, responded to a call to increase immunization rates among the nation’s vulnerable patient populations. Since that time, APhA has facilitated an expanded role for pharmacists in the area of immunizations and public health.

In 1996, the APhA House of Delegates called on pharmacists to assume at least one of three roles: education, facilitation, and/or administration of vaccines. During that time, the APhA Board of Trustees approved the *Guidelines for Pharmacy-Based Immunizations*, which served as the framework for APhA’s nationally standardized and CDC-recognized certificate training program. Over the past 10 years, the number of states authorizing pharmacists to administer immunizations increased to 44, a result of the hard work of pharmacists on the state level and support from APhA.

Coordinating APhA’s immunization policy and outreach efforts is APhA Vice President for Professional Practice and Member Services Mitchel C. Rothholz, BPharm, MBA. Looking back over the past 10 years, Rothholz has seen the reaction of public health and the medical community shift from “Pharmacists want to do what?” to pharmacists being mentioned in

the same breath as physicians and nurses. Rothholz credits current immunizing pharmacists with demonstrating the value of pharmacist involvement in immunization delivery and with providing best-practice examples that Rothholz uses in his advocacy work. In addition to practicing pharmacists, student pharmacists, through projects like *Operation Immunization*, have helped improve immunization rates and have prepared themselves to assume a valuable public health role post-graduation.

Summit Members Develop Strategies For Increased Demand

Pharmacists have earned the recognition and respect of other immunization stakeholders and are being invited to participate in various immunization activities. One example of an activity where APhA and pharmacists are recognized for their contributions is the National Influenza Vaccine Summit. Co-sponsored by the American Medical Association and CDC, the summit is an action-oriented event involving more than 400 members who represent more than 100 public and private organizations interested in addressing and resolving influenza and influenza vaccine issues. Rothholz serves as a member of the Summit Executive Committee, co-chairs the Reimbursement Working Group, and serves on the Community Immunization Provider and Communications Working Groups.

Over the past several years, problems in influenza vaccine production and distribution have challenged providers’ ability to administer, and consumers’ ability to access, vaccine. Stakeholder communication and collaboration is essential if pharmacists are to respond appropriately to situations and prepare for potential pandemics. The public depends on consistent, accurate information being communicated by their health care providers. Work done by the summit over the past year focused on developing consistent messages, creat-

ing strategies for increasing demand and use for vaccine, and addressing vaccine production and distribution issues. A survey conducted during the past season demonstrated that community immunization providers used 10% of the vaccine supply, yet, because they were the providers most visible to the public, were criticized for having all the vaccine. Organizations participating in the summit were educated about these results and were able to respond with facts to questions raised by their constituencies.

‘Walk the talk’

According to predictions for the upcoming influenza season, about 100 million doses will be available for administration. If the predictions remain true, there will be more vaccine available this season than in previous seasons. How do pharmacists ensure that no vaccine is wasted? This is the challenge that the summit has been addressing since January. The summit agreed at its June 22 meeting to create six teams with an aggressive timeline for creating strategies/messages to enhance utilization of influenza vaccine during the upcoming influenza season. These focus areas do not replace the ACIP recommendations, but will complement immunization activities already under way. The six focus areas are:

- Targeting health care workers.
- Targeting children aged 6 months through 18 years.
- Contacting high-priority populations with an eye toward “universal” coverage.
- Extending the vaccination season.
- Unifying/creating a provider toolkit.
- Using partnerships to improve education, reduce barriers for immunizing, and share the financial risk of influenza vaccine.

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Moving Outside Of The “Other” Category *continued from page 11*

One way you can contribute to this effort is to “walk the talk.” APhA has issued a challenge to pharmacy professionals to get vaccinated against influenza and to encourage their colleagues and patients to do the same. Patients have a choice how they wish to receive their vaccine—via needle or nose. Offer patients a choice. If injectable vaccine is not available or in short supply and a patient meets the criteria for the nasally administered vaccine, give them that vaccine instead.

Stay up to date on the latest information by subscribing to APhA’s Immunizing Pharmacist Listserv (send an e-mail to

mrothholz@aphanet.org to subscribe). Work with fellow pharmacists, students, public health practitioners, physicians, nurses, and other stakeholders to improve access to vaccine in your community and extend the availability of vaccine past December, until all vaccine has been used. Educate patients that it is not too late to be vaccinated in February. The ultimate goal for influenza vaccination efforts is to have enough vaccine to cover all individuals wishing to be protected and who would benefit from vaccination—estimated by CDC to be about 218 million people.

In immunization activities, pharmacists have distinguished themselves from the “other health care provider” label. With the upcoming influenza season and the introduction of new vaccines, pharmacists have an opportunity to affect public health dramatically. APhA has worked, and will continue efforts, to address barriers and facilitate collaboration with stakeholders. It is now up to the profession to “walk the talk.”

Bob Reynolds is the APhA copy editor for Student Pharmacist and Pharmacy Today.

APhA2007 Is Just Around The Corner

Did you know that APhA2007 in Atlanta (March 16–19) is the #1 prescription to build your professional network? It’s the one place where you can meet with thousands of pharmacy professionals from every practice setting—chains, independent, hospitals, Federal, managed care, and others. Share experiences and ideas with fellow new practitioners while you learn about the latest advancements in the field.

You can also choose from more than 80 professional workshops and sessions at just the right level of learning for you—advanced, intermediate or professional—and earn up to 20 hours of continuing education credit. Examine five conference themes designed to help you master the most important trends and best practices in pharmacy today:

- Brain Matters
- Spotlight on Cardiovascular Disease
- New Frontiers in Infectious Disease

- Applying Medication Therapy Management Services to Practice
- Work & Life: Achieving More, Enjoying More.

Also enjoy education and networking exclusively for New Practitioners at APhA2007:

- New Practitioner CE Session: “Emerging Trends for New Practitioners.”

- Financial Planning: Sessions on financial planning and how to manage student loan debt.
- Networking: Enjoy “Coffee Talk” and the “Night on the Town” with other New Practitioners.

Plan to attend the one event that has it all: APhA2007. For details or to register, please visit our Web site at www.aphameeting.org.



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