From MSHP President John Clark:

Greetings!

It’s hard to believe that the MSHP year is ending.

I would like to thank all of those that contribute to MSHP in any way to make it the successful society that it is. In particular, I would like to especially thank and congratulate the outgoing Board members as they have worked tirelessly to advance the practice of pharmacy in Massachusetts. Paul Arpino, Marty Goldberg, and Antoinette Lavino – a huge thank you! Newly elected Nicole Clark (President-Elect), Monica Mahoney (Secretary), and Kevin Horbowicz (Director) – you have big shoes to fill.

As was recently announced, James Gilmore is stepping down from the Board due to relocation. He will be a great loss to the Board and I would like to wish him well. With that, Antoinette Lavino has been selected to serve out the rest of his term. Please join me in welcoming the new and returning Board members as I look forward to continuing the good work of MSHP in the upcoming year.

The newly elected Board members were all active committee members prior to their election. Not only does this demonstrate the importance of our committees to the success of MSHP, it also opens up more opportunity for those of you that are interested in becoming involved.

MSHP recently held its Annual Meeting and Honors and Awards Banquet where Melissa Ortega was installed as our next President by current ASHP President Paul Bush. I am proud and honored to pass the torch to Melissa, or the gavel, as is the case with MSHP. She is already thinking about and planning our annual Board strategic planning retreat and the rest of the year ahead.

As always, please do not hesitate to reach out to any officer of the MSHP Board or a committee chair with any comments, questions or concerns. It has truly been an honor to serve as your President. Finally, congratulations and best of luck to those that are graduating programs and leaving Massachusetts for their next opportunity.
Spring Event Wrap-Up

Honoring Health-System Pharmacy’s Finest for 2018: MSHP’s Honors and Awards and Installation of Officers

At the Honors and Awards Banquet held at the Sheraton Framingham on May 14, 2018, MSHP recognized the following award winners:

Student Excellence Award
Joseph Oliva
MCPHS Boston

Student Excellence Award
Christina Johnson
MCPHS Worcester/Manchester

Student Excellence Award
Olivia Iskaros
Northeastern University

Student Excellence Award
Karolina Kwietniak
Western New England University

Outstanding Residency Research Project
Michael Lorenzo
Baystate Medical Center

Technician Excellence Award
John Caressimo
Brigham and Women’s Hospital

Preceptor of the Year
David Berkowitz
Newton-Wellesley Hospital

Practitioner Excellence Award
Amy Lemieux
MelroseWakefield Healthcare

Health-System Pharmacist of the Year
Nathan Lamb
Boston Children’s Hospital

Pharmacy Health-System Award
Beth Israel Deaconess Hospital-Plymouth

MSHP William Gouveia Outstanding Service Award
Caryn Belisle
Brigham and Women's Hospital

MSHP Fellow
Nicole Clark
MelroseWakefield Healthcare

Congratulations to all the award winners this year. We had many great nominations, which indicates the high level of service that health-system pharmacists, students, and technicians are providing for patients here in Massachusetts. Thanks to the hardworking Honors and Awards Committee for time and effort spent in the selection process. We encourage all MSHP members to keep these awards in mind and begin to consider potential nominees for awards next year. It is a great way to encourage and honor the hard work that is done in health-system pharmacy.

The nomination process for MSHP Honors and Awards usually opens up in January each year and the application process is easily found at our website: www.mashp.org.

Following the awards ceremony, the MSHP officers for 2018-2019 were installed by ASHP President Paul Bush.

President: Melissa Ortega
President-Elect: Nicole Clark
Secretary: Monica Mahoney
Director: Kevin Horbowicz

The gavel was passed from current president John Clark to incoming President Melissa Ortega, who gave remarks to close a wonderful evening of recognition.
MSHP Reverse Expo

MSHP Photo Booth

MSHP Fellow Nicole Clark with Monica Mahoney

ASHP President Paul Bush, Outgoing MSHP President John Clark

Paul Bush with Incoming President Melissa Ortega

ASHP President Paul Bush with Incoming President-Elect Nicole Clark, Incoming Secretary Monica Mahoney, and Incoming Director Kevin Horbowicz

ASHP President Paul Bush presents Keynote Address

MSHP Annual Meeting Exhibitors

MSHP Officers Richard Wojtowicz, John Clark, Melissa Ortega

David Fett, lead author on the winning MSHP Poster

Joshua Etheridge, winner of GoPro HERO6 raffle prize
MSHP Spring Event Hugely Successful

MSHP’s Annual Meeting Event “Pharmacists and Technicians are Healthcare Heroes” was held on May 14 and 15, 2018. Day 1 of this superhero-themed event kicked off with our 4th Annual Directors’ Forum with 25 health systems participating. Ross Thompson, Vice President and Chief Pharmacy Officer, Tufts Medical Center, and Chris Fortier, Chief Pharmacy Officer, Massachusetts General Hospital, led the technician-focused programming, which began with a presentation by ASHP President and Duke Health’s Chief Pharmacy Officer, Paul Bush. Dr. Bush led a discussion on strategies to support the pharmacy technician workforce and several other presenters from the group of pharmacy leaders and pharmacy technicians further discussed other innovative ideas such as implementation of a technician-training program, technician career ladders, and technology-check-technician programs. Later that day, the pharmacy directors and their colleagues participated in the 4th Annual Reverse Expo, in which they interacted with 21 vendors. President-Elect Melissa Ortega was Master of Ceremonies for this very successful event that allowed vendors to have dedicated meeting time with Massachusetts health-system leaders. We thank all the vendors and health systems for participating!

The evening continued with the Annual Honors and Awards Banquet. With over 130 people in attendance, this event kicked off with a cocktail and networking reception, followed by the awards ceremony and installation of MSHP Officers by Dr. Paul Bush (see separate article for award winners and 2018-2019 MSHP officers). The event was a wonderful evening of honoring our healthcare heroes.

The 43rd Annual Meeting, on Day 2, was very successful, with more than 230 attendees, including pharmacists, new practitioners, technicians, students and residents, along with 49 vendors. The programming was focused on showcasing the heroic work of our colleagues at both the local and national levels. Our superhero captain, Dr. Paul Bush, started the day as the keynote speaker with his motivating talk “Everyday Heroes: Caring for Patients and the Front-line Pharmacy Staff”. We also heard from the national drug shortage expert, Erin Fox PharmD, BCPS, FASHP (Senior Director of Drug Information and Support Services at University of Utah Health) and Areta Kupchyk, JD (Foley Hoag, LLP) and Janice Peters, MPH (Massachusetts Health & Hospital Association) who shared their State and Federal Advocacy efforts (e.g. drug shortages, Massachusetts Sterile Compounding regulations, etc.).

The learning sessions throughout the day were led by a cast of heroes from around the Commonwealth and highlighted the importance of creating strong teams by leveraging the skills and strengths of ALL team members to design efficient and innovative solutions to improve patient outcomes, as well as understanding the role of advocacy at the state and federal levels and the impact on key current issues. Eighteen professional posters were presented; the “best poster” was awarded to David Fett and colleagues from Boston Medical Center (see details below). A clinical pearls session showcased the superhero work of seven colleagues from across the Commonwealth. An MSHP Town Hall was held to present the policies being reviewed and to gather feedback to share at the June House of Delegates meeting in Denver. Throughout the day, attendees visited vendors who handed out MSHP Superhero trading card raffle tickets for the grand prize of a GoPro HERO6.

It truly takes a sports team to organize this meeting! Special thanks to Nicole Clark, Erin Taylor, Monica Mahoney, Anne Selig, Lisa McCabe and the entire Annual Meeting Planning Team. Thank you again to all our vendors for their support, especially Platinum Sponsor McKesson, and Gold Sponsors B&V Testing, CutisPharma, Shire, TraceLink and Mallinckrodt. Thank you to all who attended the events over the two days; the team has already begun the planning for next year. Hope to see you there!

Poster Awards

Winner:

Implementation of a Pharmacy Driven Protocol for the Inpatient Administration of Darbepoetin

Authors: David Fett, PharmD; Hope Serafin, PharmD, BCPS; Melissa Bachman, PharmD, BCPS; Sandeep Ghai, MD

Institution: Boston Medical Center
1st Runner-Up:
The Impact of a Pharmacist on Opioid Prescribing and the Patient Experience in Orthopedic Surgery
Authors: Lindsay Colyer, PharmD; Shawn Whitehead, PharmD, BCCCP; Roshani Patolia, PharmD; Kevin Horbowicz, PharmD, BCPS; Jason Mordino, PharmD, BCCCP
Institution: Boston Medical Center

2nd Runner-Up:
Evaluation of Vancomycin and Piperacillin-Tazobactam Associated Nephrotoxicity at an Academic Medical Center
Authors: Rachel Britt, PharmD; Christopher McCoy, PharmD, BCPS AQ-ID; Monica Mahoney, PharmD, BCPS AQ-ID
Institution: Beth Israel Deaconess Medical Center

CE Corner
The New Big Shots in Town: 2018 Vaccination Update
Speaker: Jason Mallada, PharmD, BCPS
(1 hour Pharmacist and Technician CE credit)
July 25, 2018 at 4:30 pm
Beth Israel Deaconess Medical Center, Boston MA
Click for more information.

Residency Update
MA MPJE Preparatory Review Well-Attended
MSHP sponsored a Massachusetts MPJE (“Law”) review webinar for incoming residents and new practitioners on June 5, 2018 from 9 AM to 12 PM, coordinated by the Residency Committee. Frederick Frankhauser, JD, RPh was the presenter. Ninety-three attendees participated, representing 16 MSHP institutional member hospitals. Five non-member registrants were in attendance. The event included a live webinar with recording, a 100-question test with answer key, chat function during the webinar, and study materials.
The on-demand webinar recording will be available until October 31, 2018 for those who were not able to attend "live". This is a great opportunity for those pharmacists planning to practice in Massachusetts to get “test-ready”. Read More

Resident Welcome Event: Save the Date
Incoming residents, fellows and their program preceptors and directors will be invited to the annual Welcome Event, scheduled for August 14, 2018 on the Spirit of Boston dinner cruise ship. Boarding will begin at 6 PM on the pier near the World Trade Center (200 Seaport Boulevard, Commonwealth Pier, Boston, MA 02210). Cruising time around Boston Harbor will be from 7 PM to 9 PM. A delicious buffet dinner with freshly prepared entrees, salads and desserts will be served along with unlimited coffee, hot tea, iced tea and water. Cocktails, wine and beer will be available from the cash bar. Relax by the large observation windows in the climate controlled indoor decks or enjoy spectacular Boston skyline views from the open-air upper deck. Onboard entertainment with DJ music, dancing and games (tabletop shuffleboard, giant Jenga, corn hole, etc.) will add to the fun!

Registration fees will be: MSHP member resident/fellow: $30; MSHP member preceptor/RPD: $45; Non-member resident/fellow: $45; Non-member preceptor RPD: $90. Read more.

From ASHP
ASHP Creates New Section of Specialty Pharmacy Practitioners
New Membership Section to Provide Valuable Opportunities for Specialty Pharmacy Practitioners and Enhanced Focus on Important Specialty Pharmacy Issues
On June 2, 2018, the ASHP Board of Directors voted unanimously to create a new ASHP Section of Specialty Pharmacy Practitioners. The new section will provide an enhanced focus on ASHP’s efforts to help its members provide optimal patient care and comprehensive medication therapy management in the specialty pharmacy environment in hospitals and health systems.
The new ASHP Section of Specialty Pharmacy Practitioners will be composed of ASHP members
who practice in broad and diverse specialty pharmacy areas, as well as individuals who help manage and support the interface between specialty pharmacies, their organizations, and the patients they serve. Members of the new section will be vital leaders in shaping ASHP's agenda to provide a broad range of education, tools, resources, strategic initiatives, professional policies, and advocacy in support of their interests as specialty pharmacy practitioners.

ASHP is extremely excited about the creation of this important new Section of Specialty Pharmacy Practitioners, said ASHP Chief Executive Officer, Paul W. Abramowitz, Pharm.D., Sc.D. (Hon.), FASHP. “We believe that ASHP is the perfect home for all pharmacy practitioners in hospitals and health systems who are interested or engaged in specialty pharmacy, including pharmacy technicians, residents, and students. We look forward to the formation of the new section executive committee so that we can quickly advance ASHP’s efforts to provide the education, tools, and resources to help them be effective practitioners and leaders on behalf of their organizations and the patients they serve.”

ASHP is now working to appoint the new section executive committee that will begin meeting in fall 2018. Membership and engagement in the new section will be available to all ASHP members soon thereafter. More information about the new section will be made available this summer.

### MSHP Member Spotlight:
#### Looking for MSHP Members Who are Making a Difference

In our MSHP Member Spotlight series, we are looking to highlight MSHP members who are “making a difference” in pharmacy and/or their communities. We’d like the MSHP community to be aware of the good works our members are doing.

Do you know someone? Maybe you’re one?

Nominations can be made for others or for yourself. Please include the following information. Submissions should be sent to communications@mashp.org.

- Name, Titles/certifications
- School of Pharmacy (year of graduation optional)
- Current Job Title, Job location--One sentence description of current position
- How the nominee has impacted the pharmacy profession
- How the nominee has impacted the pharmacy profession (patients, workplace) or impacted their community (emergency relief, volunteer work)
- A quote or two from the nominee, or the person nominating them, or from someone they have impacted.

### Technically Speaking

**From PTCB: PTCB Grants 300 Compounded Sterile Preparation Technician (CSPT™) Certifications**

Washington, DC -- The Pharmacy Technician Certification Board (PTCB) has granted more than 300 Compounded Sterile Preparation Technician™ (CSPT™) Certifications since the CSPT Program launched in December 2017. PTCB’s first advanced certification program, the CSPT Program certifies pharmacy technicians in compounded sterile preparation, the process for compounding medications that must be prepared using aseptic techniques. Becoming certified as a CSPT is a way for PTCB-Certified Pharmacy Technicians (CPhTs) to further demonstrate their commitment to medication safety. Employers can incorporate the CSPT Certification into career ladders for their pharmacy technicians.

“Granting more than 300 CSPT certifications is an exciting milestone in the first year of PTCB’s new CSPT advanced certification program,” said PTCB Executive Director and CEO William Schimmel. “By meeting the rigorous standards mandated by PTCB’s certification and recertification processes, CPhTs who obtain the CSPT credential stand out as highly qualified to meet today’s expectations in sterile compounding safety. Unlike certificate courses, PTCB’s CSPT Program requires continuing education and annual recertification.” Read more.
Residency Spotlight: Baystate Medical Center

Baystate Medical Center (BMC), located in Springfield, Massachusetts, is a 716-bed independent academic medical center and the only Level I Trauma Center in Western Massachusetts. BMC currently trains medical, pharmacy, nursing, and physician assistant residents. The pharmacy residency programs at BMC include PGY1 Pharmacy (5 residents), PGY1 Community-Based Pharmacy (1 resident), PGY2 Critical Care Pharmacy (1 resident), and PGY2 Infectious Diseases Pharmacy (1 resident). This year we are graduating our 10th PGY1 Pharmacy Residency class. The mission of PGY1 and PGY2 pharmacy residency programs at Baystate Medical Center is to offer a high-quality, in-depth learning environment that enables pharmacy residents to develop accountability, practice patterns, habits, and expert knowledge, skills, attitudes, and abilities in the respective advanced area of pharmacy practice.

How are the residents involved in academia and developing skills required for them to not only be lifelong learners but also lifelong teachers?

All four residency programs are affiliated with MCPHS University, Worcester, MA and Western New England University, Springfield, MA, which provides the residents with opportunities to educate pharmacy students by serving as a guest lecturer or through co-precepting over 150 APPE pharmacy students that rotate through BMC. The residency programs also provide an opportunity for the resident to complete a teaching certificate through MCPHS University.

What kinds of ambulatory care experiences do the residents participate in as part of their training in these residency programs?

In addition to completing the 10 core required rotations and 2 elective rotations, the PGY1 pharmacy residents are involved in a yearlong ambulatory care rotation experience. As part of this longitudinal experience, one half day per week is dedicated to rotating at a different ambulatory care clinic affiliated with Baystate Health. During the PGY1 pharmacy residency program academic year, the residents rotate through 4 ambulatory clinics: pharmacotherapy clinic, Mason Square diabetes clinic, discharge counseling for heart failure and ACS patients, and Valley Medical Associates clinic.

Beginning in July 2017, our pharmacy residents began offering ACPE-accredited pharmacy grand round presentations once a week. These presentations are broadcast to all hospitals within our health system. The purpose of pharmacy grand rounds is to provide the residents with an opportunity to not only be critical thinkers in clinical practice and provide education to other clinical staff, but also to improve their oral communication skills. In addition to the weekly pharmacy grand round presentations, each pharmacy resident presents an hour-long ACPE-accredited presentation on a topic in their practice area of interest to area pharmacists.

Through collaboration with our inpatient practitioners and outpatient clinics, we provide our residents with strong foundational knowledge in hematology and oncology, critical care, emergency medicine, and infectious diseases. Twenty-one PGY1 pharmacists went on to pursue clinical pharmacist or faculty positions. The graph below illustrates the PGY2 positions obtained by graduating BMC PGY1 pharmacy residents.
Pediatrics: FDA approves epinephrine auto-injector for infants and toddlers

The standard pediatric dose available in epinephrine auto-injectors (0.15 mg IM) is relatively high for an infant or toddler. Previously the only option for giving an infant or toddler a more appropriate dose (i.e., about 0.1 mg IM) was to use an ampule of epinephrine and a syringe that requires caregiver training and can be impractical and error-prone. The FDA recently approved Auvi-Q in a dose of 0.1 mg for patients weighing between 7.5 and 15 kg, and is the first approved epinephrine auto-injector that delivers a dose that is appropriate to treat allergic emergencies in most infants and toddlers. Auvi-Q 0.1 mg includes a shorter needle length and uses a voice-guided system to instruct caregivers step-by-step. Although cost or coverage may be an obstacle, this product may be a safer and easier option for families of children with serious allergies. Source: FDA approves epinephrine auto-injector for infants, toddlers. (AAP News January 24, 2018 American Academy of Pediatrics.)

Pediatrics: Revised recommendation on doxycycline use in young children

Tetracyclines have generally been avoided in children <8 years old because of permanent tooth discoloration associated with prolonged or repeated use. However, doxycycline binds less readily to calcium than other tetracyclines, and the risk of dental staining with short courses of doxycycline appears to be minimal. In 2018 the American Academy of Pediatrics (AAP) revised their recommendation on doxycycline and now considers its use for up to 21 days appropriate in children of all ages. Although additional guideline recommendations are needed, doxycycline may become a useful alternative for management of several infections seen in smaller children such as Lyme disease and infected bite wounds. Children and caregivers of those who are prescribed doxycycline should be counseled to avoid excess sun exposure due to photosensitivity. Source: Red Book Online Section 4: Antimicrobial Agents and Related Therapy; Tetracyclines. AAP 2018

Ambulatory care, community practice: USPTF modifies calcium and vitamin D supplementation recommendations in community

Many adults supplement with calcium, vitamin D, or combined therapy to prevent fractures and maintain optimal bone health. The United States Preventive Services Task Force (USPSTF) aimed to determine if supplementation prevents primary fractures and if the potential benefit of supplementation outweighs any potential harm with long-term use. By conducting a meta-analysis of nine randomized clinical trials that evaluated both benefits and harms of taking vitamin D and calcium to prevent fractures, the USPSTF found that taking low doses of vitamin D and calcium does not prevent fractures in healthy “community-dwelling” adults. There was not enough statistically significant evidence to show that any potential harm would outweigh any potential benefit from supplementing with either vitamin D or calcium, but there were multiple case reports of kidney stone formation. Of note, these studies were comprised of healthy men and pre-menopausal women without sign of osteoporosis or high fall risk, and higher daily doses of supplementation (vitamin D >400 units and elemental calcium >1000 mg) were not evaluated. Source: USPSTF, Grossman DC, Curry SJ, et al. Vitamin D, Calcium, or Combined Supplementation for the Primary Prevention of Fractures in Community-Dwelling Adults JAMA 2018 April 17;319(15):1592-1599. (PMID 29677309)

Cardiology: Increased mortality linked to digoxin levels in patients with atrial fibrillation

Digoxin is used as an alternative to beta-blockade or a nondihydropyridine calcium channel blocker for rate control in patients with chronic atrial fibrillation (AF). In a post-hoc subgroup analysis of the ARISTOTLE trial (which compared anticoagulant
therapies in approximately 18,000 patients with AF), digoxin serum levels $\geq 1.2$ ng/mL were associated with a significantly increased risk of death and levels between 0.9 and 1.2 ng/mL showed a nonsignificant trend to increased mortality, when compared with patients not on digoxin. The association between serum levels and mortality was consistent across inpatients as well as outpatients, and patients with and without heart failure. Digoxin levels and renal function should be assessed periodically (e.g., at least annually). In patients whose symptoms and ventricular rate are well controlled on a digoxin-containing regimen with digoxin levels above $>0.9$ ng/mL, these findings suggest that an adjustment to dose may be warranted. Source: Lopes RD, Rordorf R, DeFerrari GM et al. Digoxin and Mortality in Patients With Atrial Fibrillation. J Am Coll Cardiol 2018 March 13;71(10):1063-1074. (PMID 29519345)

Hospital practice: Rivaroxaban followed by aspirin for VTE prophylaxis in low risk patients who undergo knee or hip replacement surgery

While low molecular weight heparin is the best-studied pharmacologic agent for venous thromboembolism (VTE) prophylaxis after orthopedic surgery, several direct oral anticoagulants (DOACs) are now approved for this use and can be an attractive oral option for many patients. A recent randomized trial including approximately 3400 patients reported comparable low rates of VTE and major bleeding (both $<1.3\%$) comparing rivaroxaban 10 mg orally once daily for 14 to 35 days (i.e., FDA approved regimens) with a hybrid regimen consisting of rivaroxaban 10 mg once daily for the first 5 days and then switching to aspirin 81 mg orally for an additional 9 days in total knee arthroplasty (TKA) or for an additional 30 days in total hip arthroplasty (THA). This “hybrid” rivaroxaban followed by low-dose aspirin strategy appears to be a reasonable alternative in low-risk patients undergoing major orthopedic surgery whose characteristics are similar to those enrolled in this study, i.e., undergoing unilateral TKA or THA, who ambulate within 24 hours of surgery, and have no additional risk factors for VTE or indication(s) for long-term anticoagulation. Source: Anderson DR, Dunbar M, Murnaghan J et al. Aspirin or Rivaroxaban for VTE Prophylaxis after Hip or Knee Arthroplasty. N Engl J Med 2018 Feb 22;378(8):699-707. (PMID 29466159)

Rheumatology: Biosimilars used in rheumatology – ACR expresses confidence

Development of biosimilars has grown with the exclusivity period approaching completion and passing of the Biologics Price Competition and Innovation (BPCI) Act. For example, the FDA has approved several biosimilars for tumor necrosis factor (TNF) inhibitors including infliximab, etanercept and adalimumab. Recently, a panel of the American College of Rheumatology (ACR) evaluated the current state of the biosimilar initiative, including approval requirements, regulatory considerations, testing of immunogenicity, substitution and interchangeability as well as economic impact. It is debatable whether the introduction of biosimilars in the US has yet to increase competition or significantly bring down cost. It is, however, noteworthy that, compared with the ACR’s previous cautionary stance on biosimilars’ safety and interchangeability, the current report reflects confidence that biosimilars are appropriate to incorporate into treatment regimens for patients with rheumatologic diseases. Source: Bridges Jr. SL, White DW, Worthing AB et al. The Science Behind Biosimilars: Entering a New Era of Biologic Therapy. Arthritis Rheumatol 2018 March; 70(3): 334-344. (PMID 29411547)

Ambulatory care, community practice: New data on breast cancer risks and hormonal contraception

Researchers recently used Denmark nationwide registries data to examine contemporary hormonal contraception and the risk of breast cancer. This prospective cohort study followed 1.8 million females between 15 and 49 years old for 10.9 years. A total of 11,517 breast cancer cases were reported with a 1.20 (95% CI, 1.14 to 1.26) relative risk of breast cancer in all hormonal contraception users.
However, absolute increases in breast cancer risk were small, i.e., 13 per 100,000 person years (approximately 1 additional case per 7690 women per year). In younger women (under age 35), the risk was only 2 per 100,000 person years (1 additional case per 50,000 women per year). When counseling patients, it may be helpful to explain the small risk increase in absolute numbers and place these findings in context of the important benefits of oral contraceptive use: reliable contraception and significant reduction in endometrial and ovarian cancer risks that persist for at least 30 years. Source: Mørch LS, Skovlund CW, Hannaford PC et al. Contemporary Hormonal Contraception and the Risk of Breast Cancer. N Engl J Med. 2017 Dec 7; 377 (23): 2228-2239 (PMID 29211679)

Communications Committee

Board Advisor:
John P Clark

Website, Newsletter Layout and Publication:
McKenna Management

Social Media Subcommittee:
Mark Sciaraffa, Shannon Kean, Margaret Wey

Newsletter Subcommittee:
Barbara Irby, Jonathan Zand

Join an MSHP Committee!

- Looking for a way to make a difference in your pharmacy community by participating in MSHP?
- Not sure you want to dive right into running for a leadership position?
- Then why not consider a position on an MSHP committee?

MSHP is looking for interested pharmacists and technicians like you to provide input and feedback!

Check out this link http://www.mashp.org/?page=committee at MSHP and send us an email, or contact us via FB or Twitter.

Communications Committee members at MSHP Annual Meeting

Thanks to our Contributors

John Clark, Anne Selig, Nicole Clark, Erin Taylor, Monica Mahoney, Yulia Murray, Kathy Kopzca, Shannon Kean, Margaret Wey, Jonathan Zand, McKenna Management, Barbara Irby

Thank You to Our Industry Sponsors

Comments & Suggestions on our Newsbriefs? Email us at admin@mashp.org.