



Newsletter of the

Oklahoma Society of Health-System Pharmacists

February – April 2008

Visit our website at
www.oshp.net

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2008-2009:**

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Mark your Calendar

ASCP 30th Midyear Conference
Las Vegas, NV
May 14th-16th, 2008
For information, go to www.ascp.com

ASHP 2008 Summer Meeting
Seattle, WA
June 8th-11th, 2008
For information, go to www.ashp.org

ACCP Leadership Conference
Kansas City, MO
June 17th-20th, 2008
For information, go to www.accp.com

AACP Annual Meeting
Chicago, IL
July 19th-23rd, 2008
For information, go to www.aacp.org

**54th Grand Council Convention of
Kappa Psi**
Clearwater, FL
August 4th-8th, 2009
For information, see www.swgrad.org

FROM THE PRESIDENT...

Lesley Maloney, Pharm.D.



My husband, Pat, and I moved to Washington, D.C., shortly after we married. We were newlyweds – happy and content – surviving in the “Beltway” as D.C. is often referred to by locals. But the abundance of new cuisines and long hours of work with marginal exercise caught up with a different belt...the one around our waists. We were satisfied with our lives, but our contentedness had rendered our physiques a bit “squishy.”

A similar development can be witnessed in organizations. We become “content” with our quarterly earnings or “satisfied” with our impact in the community. An unknown source stated, “We require a willingness to stretch ourselves, to take risks...or we tend to get squishy.” President Susan Fugate and her Board did a tremendous job in moving OSHP forward over the past year. We could easily sit back and be content with our progress, yet that could lead us down the road to squishy status quo. To prevent that, I’ve developed “R” Vision for 2008-09 as listed below.

1) Resources. We need to create value in OSHP membership through development of member resources. This includes creation of an OSHP list-serve for OSHP members to share concerns and ideas with colleagues around the state. OSHP has a great web site where members can contribute documents, such as medication reconciliation forms, for use by other OSHP members.

2) Recruitment and Retention. It’s vital for any membership organization to recruit new members, but it’s also important to retain the loyalty of current members. We need to improve outreach to pharmacy departments in order to gain a greater presence and to reaffirm the value of OSHP to pharmacy practice. Integral to this is increasing our current relationships with pharmacy directors since their participation is essential to creating a vision for hospital and health-system pharmacy in Oklahoma.

3) Responsibility. We are accountable to our patients and to our profession for provision of quality, evidence-based, and appropriate care. We must continue our work with OPhA to achieve Collaborative Medication Therapy Management (CMTM) in OK, especially since we are one of the few states without such agreements in our practice act. CMTM not only offers protection to pharmacists with established agreements, it also offers pharmacists the opportunity to advance the services they provide to patients. We also need to increase awareness to patients and consumer groups about the role of hospital and health-system pharmacists in improving health outcomes.

4) Replacements. It’s wonderful to have continuity through members who have served in a variety of OSHP leadership positions, but we must build a new leadership pipeline through identification of new and current members who previously haven’t served in leadership capacities. We should explore new models, such as committee vice-chairs, and with the richness of experience in our organization, we should consider appointing previous OSHP leaders as mentors for those in new leadership positions. OSHP members must use the Society not only as a place to network and obtain continuing education, but also as a place for personal development and a chance to develop and refine leadership and organizational skills.

We have the opportunity to change the practice of hospital and health-system pharmacy across Oklahoma, to develop new leaders, and to become a better OSHP. We have a mascot this year, the squish ball, to remind us that it is not time to be content - it is time for action. We must stretch ourselves and take risks, or we run the risk of becoming squishy. Help “R” vision become a reality in 2008-09...there are no “R’s” in SQUISHY!!!

FROM THE PAST PRESIDENT...

Susan Fugate, Pharm.D., BCPS, CACP



Thank you all for the opportunity to serve as your OSHP President for the past year. It has truly been a very rewarding experience for me. I feel that we have had a productive year within the society. We have made great strides towards accomplishing the goals that we set for the year. Our membership numbers have grown, and we have added multiple new features (including monthly updates) to add value to your membership. Our joint OSHP-OPhA Collaborative Medication Therapy Management (CMTM) committee has worked hard over the past year, and has more to accomplish in the next year, toward achieving CMTM in Oklahoma. I want to thank all of you who actively participated and served OSHP in the past year. Your time and efforts have been essential in helping to sustain and grow our organization. Thank you all for your help, assistance, and support over the past year.

The Annual Meeting marked the initiation of new board members and the completion of terms for old board members. While a few of us will continue our service on the board, I am very excited about the leadership of our 2008-2009 President and Board of Directors and expect many great things for the coming year.

BOARD MEMBER HIGHLIGHTS – MEET YOUR OFFICERS

YVETTE MORRISON, TREASURER

Clinical Pharmacy Specialist, Norman Regional Health System

“Show Me the Money!”

Not only is that a line from the movie “Jerry Maguire”, it has become my motto as OSHP Treasurer. I have just completed my first of two years as Treasurer and so far, so good! As Treasurer, I am charged with the following responsibilities: 1) payment for services/expenses rendered; 2) depositing funds procured (e.g., membership dues, meeting registration fees); and 3) reconciliation of the aforementioned transactions. As I see it, there's money coming in and money going out, and I'm the one that is responsible to the OSHP Board and membership to insure it all adds up!

Behind the scenes, Quick Books software has been implemented to assist in keeping track of all transactions and generating standard reports for Board review. Fortunately, the software is straightforward and easy to use. Quick Books actually contains a lot of features suitable for a more sophisticated business operation, so it is plenty robust to handle OSHP activities. As a service to our members, OSHP provides the convenience of online payment via Paypal. These transactions create a pool of money in an account that I monitor and periodically transfer monies from the Paypal account to the OSHP checking account. Another responsibility of the Treasurer is to file tax forms with the Internal Revenue Service. OSHP is considered an IRS 501c tax-exempt organization; however, appropriated funds in excess of \$500 necessitate a 1099 be sent from OSHP to the payee for their individual tax filing purposes. Additionally, the OSHP bylaws stipulate a full audit by a certified public accountant be performed every two years coincident with the Treasurer election cycle. Although I have yet to engage in that particular activity, OSHP has retained the services of a local CPA firm to assist with this process as well as the taxation activities.

Most individuals interested in OSHP office want to know about the extent of the time commitment. The busiest times of the year are in the fall and spring around the statewide meetings and in December when we all try to hustle in our membership renewals before the December 31st deadline (even though membership renewal letters are sent out in October!). The Treasurer attends all Board meetings and serves as Chair of the Finance Committee. The Finance Committee should meet in late summer/early fall to develop a budget for the ensuing year, which is presented to the Board for approval.

To be sure, an extensive background in accounting is necessary to serve as OSHP Treasurer.....**NOT!!!** It is beneficial to be precise and pay attention to detail, which pretty well describes most pharmacists I know!! As with any other office, OSHP enjoys a cohesive lineage such that becoming involved is facilitated by those that precede you in office. OSHP is an organization of volunteers, and we all help each other succeed through the past, present, and future. I would encourage all of you to consider the Office of Treasurer, to be next elected in 2009, and I would be happy to entertain individual questions/concerns (ymorrison@nrh-ok.com).

Thank you, OSHP membership, for the opportunity to learn and serve the Society!!!



Check it Out!

This is a new section in our newsletter that profiles our OSHP board members. That way, you can learn more about their offices and various responsibilities. So next time you see one of our board members, thank them for all of their hard work!



Attention Pharmacy Students!

This is a new section in our newsletter addressing issues pertinent to students. If you have a topic idea or would like to submit something, then please contact the Newsletter Committee.



Can you guess who this little cutie is?

Hint: He's a graduate of OU College of Pharmacy and lives in the Tulsa area. He was a Beatles fan when he was little and probably even listened to the Sgt Pepper's album. Remember albums and TVs with no remote control? I'll bet that cutie served as the remote control. See page 4 for the answer.



Pharmacy Student Topics: Everything You Need to Know About the Application Process Prior to Applying for a PGY1 Pharmacy Practice Residency

**Submitted by: Heather M. Kreutz, Pharm.D.
PGY1 Resident, Oklahoma City VA Medical Center**

Residencies were often mentioned during my time at Midwestern University College of Pharmacy in Glendale, AZ. The majority of my professors had completed specialty residencies and/or fellowships in their area of practice. Although I had a general understanding of what residency programs were and what they entailed, I did not have a mentor to walk me through the residency application process. As a result, I had to learn from my own mistakes. This article is designed to provide pharmacy students with information in order to prepare for application to a post-graduate year 1 (PGY1) pharmacy practice residency.

More than 1,500 pharmacists participate in residency programs each year, and there are more than 800 programs across the United States. According to the OSHP website, there are sixteen residency programs in Oklahoma: nine PGY1 and seven PGY2 programs. Post-graduate year 1 (PGY1) programs are general pharmacy practice residencies and are offered in health systems, managed care, and community practice settings. Post-graduate year 2 (PGY2) programs provide specialty training in a particular area of practice such as ambulatory care, infectious disease, critical care, cardiology, oncology, or pediatrics. Completion of a PGY1 residency is required prior to starting a PGY2 residency program.

Prior to applying for a residency program, one meeting that is very beneficial to attend is the American Society of Health-System Pharmacists (ASHP) annual Midyear Clinical Meeting held in December of each year. Participation in the Midyear Clinical Meeting is not required for application to a residency program, but I would strongly encourage it. The Residency Showcase takes place during the Midyear Clinical Meeting. The showcase provides applicants the opportunity to meet residency program directors, preceptors, and current residents from participating programs. Interviews do not take place during the Residency Showcase. Rather, it is a time for the applicant to ask questions and learn specific information about prospective programs. Although informal interactions take place during this program, formal business attire is encouraged. Another program offered during the Midyear Clinical Meeting is the Personnel Placement Service (PPS). PPS requires an additional fee for participation and allows applicants to schedule interviews with residency programs. PPS is primarily designed for PGY2 residencies, fellowships, and other pharmacy positions, but some PGY1 programs participate. On-site interviews are generally required for PGY1 programs after application, so participation in PPS while seeking a PGY1 program is generally not necessary.

If you are seeking a local residency program, it is important to attend the Residency Showcase at the OSHP Fall Meeting. The OSHP Fall Meeting usually occurs in September or October and allows prospective residency candidates to speak with program directors, preceptors, and current residents of residency programs offered in Oklahoma.

Another program of which to be aware prior to applying for a residency is "The Match." Participation in the Resident Matching Program (otherwise known as "The Match") is required for application to all ASHP-accredited residency programs. The Resident Matching Program allows all applicants and residency programs to concurrently rank their preferences of programs and applicants, respectively. The schedule allows all residency programs and applicants sufficient time to complete interviews and develop their Rank Order List. The Resident Matching Program lines up the best placement for the applicant and residency program based on their Rank Order List. The Resident Matching Program is tailored to provide preference to the applicant and facilitate the placement of applicants into positions. The Rank Order List is generally due during the first week in March and results are available at the end of March.

Applying for a PGY1 Pharmacy Practice Residency (continued)

Attention Potential Authors:

If you or a colleague is interested in submitting an article for publication in the OSHP newsletter, please contact the OSHP Newsletter Committee or a board member.

Baby Picture:

That future pharmacist is Greg Clack, your newly elected President-Elect. He was also a previous Eastern District Chair. Thanks for being so active in OSHP. We know you'll do a great job in your new position.

Do you have a baby picture to submit? Then contact the Newsletter Committee.

Want to Get More Involved with OSHP?

Then volunteer to serve on one of the many great committees. OSHP has 7 standing committees including finance, membership, legislative, nominations, newsletter, program, and scholarship & awards.

Contact one of the board members if you want more information.

If you are interested in pursuing a residency program, I would encourage you to start asking questions and establishing relationships prior to your fourth year in pharmacy school. Talk to faculty members and mentors that have completed residency training or current residents to decide which path is right for you. Become a member of ASHP and OSHP and enroll in one of the many networking forums in order to communicate with your colleagues that are also interested in residency training. Start researching programs of interest, and develop a list of your professional needs and desires from a residency program. Consider attending residency showcases at local and national meetings to expose yourself to the magnitude of the event and to practice networking skills. Ask questions, but make sure to be mindful of each program's time as they are actively recruiting residents for the following year. Formulate your curriculum vitae (CV) early so that it will only have to be updated during your last year of school.

The fourth year of pharmacy school is the crucial time for the residency application process. I encourage you to develop a timeline for the last year of school in order to organize yourself for the application process. Check the ASHP website for a suggested timeline. Create or update your CV and cover letter early in the year. Ask three or four preceptors or faculty members that can attest to your clinical skills and knowledge to write letters of recommendation. Sign up for the Resident Matching Program as soon as possible. Research prospective programs, and write down your questions for each program. Attend the residency showcases at the OSHP Fall meeting and/or the ASHP Midyear Clinical Meeting, if possible, in order to establish relationships with potential residency programs. Make sure you understand how to complete the application process, and document application deadlines for each program of interest. Applications are generally due within the first few weeks of January, so start working on them immediately after Midyear in order to ensure all deadlines are met. Most residency programs require an on-site interview and will extend an invitation to suitable candidates after all applications have been received. On-site interviews generally occur at the end of January and throughout February. Research programs thoroughly, and come prepared with questions for each program where you interview. Make sure to write down the Resident Matching Program rank order deadline, and submit your Rank Order List in advance. The match results will be posted in late March, and residency programs generally start in July.

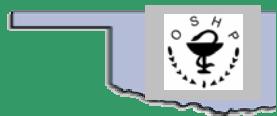
The residency application process can be overwhelming, and it is easy to fall behind in meeting the deadlines. It is important to know as much as possible about the process prior to applying for programs. I have listed some helpful website links below that will provide further guidance while applying for residency programs.

Helpful Website Links:

- ASHP Resident Information:
http://www.ashp.org/s_ashp/cat2cn.asp?CID=4337&DID=7757
- ACCP Directory of Residencies, Fellowships, and Graduate Programs:
<http://www.accp.com/resandfel/>
- ASHP Resident Matching Program:
<http://www.natmatch.com/ashprmp/>
- ASHP Midyear Clinical Meeting:
http://www.ashp.org/s_ashp/cat1c.asp?CID=4221&DID=7374
- OSHP website:
<http://www.oshp.net>

My Last Issue as OSHP Newsletter Editor!

I wanted to let you all know that this will be my last issue as editor of the OSHP newsletter. I have served as chair or co-chair of the Newsletter Committee for the past 3 years and have truly enjoyed this role. I wanted to thank everyone for their submissions because the newsletter wouldn't exist without them. As editor, I've enjoyed meeting and working with so many great people, but now I'm moving on to a different role. I'll be serving as the OSHP secretary for the next 2 years and couldn't be more excited. I'd like to wish our next newsletter editor the best of luck! *Yours truly . . . Nancy T. Williams*



Record Number of Pharmacy Graduates Head for Residencies

Almost 1500 applicants were matched with nearly 1800 available PGY1 pharmacy residency positions. This is an 11% increase in applicants and 10% increase in number of positions over 2007. For PGY2 residencies, nearly 270 individuals matched. Congratulations to all!



OSHP District Update

Western District

Recent Meeting: March 13th, 2008

Topic: Slowing the Progression of Atherosclerosis

Speaker: Richard Mullvain, Pharm.D.

Location: Ranch Steakhouse, OKC, OK

Upcoming Meeting: May 22nd, 2008

Topic: Appropriate DVT/PE Prophylaxis in Medical Pts

Speaker: Thomas Campbell, Pharm.D., BCPS

Location: Crabtown, OKC, OK

Upcoming Meetings:

There is no June meeting.

Stay tuned for July meeting details.

Eastern District

Recent Meeting: March 20th, 2008

Topic: Treatment of Hypertension

Speaker: Susan Willard, M.D.

Location: Gilcrease Museum, Tulsa, OK

Recent Meeting: May 15th, 2008

Topic: Treatment of Schizophrenia

Speaker: John C. Chelf, M.D.

Location: Polo Grill, Tulsa, OK

Upcoming Meeting: June 24th, 2008

Topic: Atrial Fibrillation

Speaker: TBA (Sponsored by Sanofi Aventis)

Location: TBA



Chapter News



❖ AWARDS

The following awards were presented at the OSHP Annual Meeting in April:

- **Health-System Pharmacist of the Year – Tracy Hagemann**
This is OSHP's highest and most prestigious award. The selection criteria for the award include service to the profession, contributions to pharmacy programs, cooperation with the entire health care team, and service to the community.
- **Sylvia J. Martin Outstanding Technician Award – Habib Arsala**
- **Continuing Excellence Award – Burl Beasley, Michele Splinter, Nancy Williams**
This award recognizes health-system pharmacy practitioners for their continuing excellence in advancing the profession of pharmacy in Oklahoma.
- **OSHP Scholarships (\$500)**
Kevin Diler (OU) and Jessica Bowen (SWOSU)
- **President's Leadership Award & Bristol-Myers-Squibb Award**
Susan Fugate
- **Past Presidents Award**
Jenean Young
- **Service Awards**
Scott Schaeffer and Darrell Willyard
- **OSHP Senior Awards** (presented at each school's awards ceremony)
Scott Oder (OU) and Ashley D. Rowe (SWOSU)

Scenes From the 2008 OSHP Annual Meeting (April 18th, 2008)

2008 Annual Meeting

Location:

Integris Baptist Medical Center Conference Center in Oklahoma City

Education Offered:

6 contact hours (0.6 CEUs)
ACPE accredited

Meeting Attendance:

Approximately 100 people attended all or part of the meeting.

Vendor Showcase:

19 vendors participated.



Thanks to the Program Committee Co-Chairs, Winter Smith and Kimi Vesta, for putting on such a great meeting!



The awards ceremony and installation of new officers. Congratulations to all! Good luck with your new offices.

The vendor showcase was a great success! Thanks, Chelsea Church, for all of your hard work.



SWOSU Student OSHP Chapter speaking at an elementary school in Weatherford about poison prevention.





The intention of clinical pearls is to highlight information regarding various therapeutic topics pertinent to health-system pharmacy practice. If you or your institution have information, protocols, etc. and are willing to share, please contact the OSHP Newsletter Committee.

Cultivating Future Hospital Pharmacists

**Submitted by: Tracy S. Hunter, RPh, PhD, Director of Preceptor Development
OU College of Pharmacy, Tulsa, OK**

QUESTION:

Why become a preceptor?

ANSWER:

There are many reasons for becoming a hospital pharmacy preceptor. Some reasons are more obvious than others. Most preceptors find mentoring students personally and professionally rewarding. They understand the integral role they play in the development of nascent professionals and its importance to the future of the profession. While finding fulfillment in "giving something back" to the profession they love, preceptors also can benefit from daily encounters with students enthusiastic about entering the workplace. Eager-to-learn students stimulate discussion, broaden perspective, and boost professional morale. Sometimes, preceptors even become "learners" themselves as students share their understanding of the latest medications, modes of information retrieval, and new research findings.

Precepting also benefits the practice site. Student pharmacists can supplement services such as health screenings, patient counseling, as well as activities such as community wellness classes on topics including diabetes care or smoking cessation. Educational programs or health screenings initiated by pharmacy students often remain ongoing. Once initiated, services can be maintained by future interns or residents.

In today's competitive job market, becoming a preceptor can aid in staff recruitment. Potential staff may perceive a pharmacist who acts as a preceptor as a knowledgeable educator, a person of prominence, and a professional leader. This can be important for small hospitals in rural areas attempting to attract qualified staff. Additionally, knowledgeable preceptors with good interpersonal and practice skills plus an enthusiasm for their profession can create a rich learning environment and open a pathway to hospital pharmacy as a career. Positive experiences with preceptors encourage students to choose a future in the familiar environment of hospital pharmacy.

There are particular benefits to the students as well. Student pharmacists need a range of experiences to aid them in applying classroom knowledge to the practice setting. Skills learned in the classroom must be honed and critical thinking skills developed. Hospital pharmacists play an integral role in the growth and development of these future pharmacists as they help them meet essential professional requirements.

To a certain degree, precepting is a type of "quality control." To acquire skills and competencies, pharmacy interns need to do more than simply observe pharmacy operations. Under the supervision of their precepting mentors, students actively participate in providing "hands on" care through immersion in the daily routine of the hospital. Essentially, preceptors ensure that their students learn "the right way" to do things and earn an appreciation for a job done well.

Cultivating Future Hospital Pharmacists (*continued*)

Pharmacy students need your help. They need guidance in applying their classroom learning and theoretical models to real-life patient care and departmental operations. Only in authentic practice settings can students fully learn to understand patient needs and vulnerabilities while adapting to the cultural and organizational realities of the workplace. Under the supervision of caring preceptors, students take the first steps toward true professionalism.

So as a preceptor, your important tasks include:

- Providing oversight and practical experience in a variety of authentic practice settings.
- Thinking out loud to explicitly explain your thought processes (for students to learn).
- Modeling professional habits, including interactions with patients and other health care professionals.
- Demonstrating the importance of cooperative teamwork in the work environment.
- Stimulating self-directed and life-long learning for students.
- Counseling on career options and choices.
- Strengthening cooperation between practitioners and academia.
- Playing an influential role in advancing the practice of pharmacy and improving the delivery of health care in Oklahoma.

To find out how you can become a preceptor, contact either state college of pharmacy.

Tracy S. Hunter, RPh, PhD
 Director of Preceptor Development
 OU College of Pharmacy
 (918) 660-3010 or tracy-hunter@ouhsc.edu

Christy Ferguson Cox, M.Ed., Pharm.D.
 Experiential Program Coordinator
 SWOSU College of Pharmacy
 (405) 601-8335 or christy.cox@swosu.edu

References available upon request.



Welcome New Members:

Andrea Barton
 Makinzie Carey
 Wendy Galbraith
 Melissa Gloden
 Natasha Goli
 Justin Griffith
 Valerie Grober
 Hillary Harwell
 Les Henkel
 Matthew Hinton

Steven Howell
 John Hurst
 Lugene Jones
 Swathi Krishnaprasad
 Lily Kwan
 Samantha Mitchell
 Tamara Mlekoday
 Asmini Mohanial
 Anita Patel
 Sarah Peters

Charles Raff
 Marsha Sauer
 Kavita Trivedi
 Rebekah Vermillion
 Scott Ward
 Kristie Williams
 Kenny Williamson
 Douglas Woods
 Kristy Yates

Poison Information Specialist

Submitted by: Scott Schaeffer, DPh, DABAT

Assistant Managing Director, Oklahoma Poison Control Center

The University of Oklahoma Health Sciences Center, Oklahoma City, OK



Snakebites . . . suicide attempts . . . two year-old children who have eaten Grandma's blood pressure medication . . . even the dreaded (non-toxic) silica gel. It's all in a day's work in my position as a Specialist in Poison Information with the Oklahoma Poison Control Center.

I came to work at the center nearly 14 years ago and have enjoyed nearly every minute since. In my prior position as a hospital pharmacist, whenever I had an obscure drug information question or a severe overdose came through the emergency department, I could always rely on the people at the poison center to provide the information I needed in a timely fashion. That's the kind of work I wanted to do. I heard about the job opening, pestered my boss until she hired me, and immediately knew I had found my niche.

When a new pharmacist, nurse, or physician assistant comes to work at the center, we always make the disclaimer that it will be nearly a year before he or she feels truly comfortable answering the phones. New employees go through a crash course in clinical toxicology, as this is a field in which most of us have little experience. For the first several months, there is a great deal of one-on-one discussion, role playing, and time spent on the phone with another specialist listening in before the new employee is turned loose to answer calls on his own. A broad knowledge base is required to perform the job effectively because the specialist must know not only about drugs but also about natural poisons, environmental and occupational exposures, and just about anything someone might come in contact with that might cause harm. Additionally, it's helpful to have the ability to communicate effectively in situations that are often tense and filled with uncertainty.

Even after all of my years at the center, every time the phone rings, I still get a little surge of excitement. What's this one going to be about? Many times it's the parent of a two year-old who has eaten something fairly innocuous. In these cases, it's often the mother or father who need more care at the moment because a parent who is frantic is unable to provide optimal care for the child. Other times, it's an emergency department physician who needs assistance in caring for a multiple drug overdose patient. When this happens, it's necessary to be able to provide accurate, concise information because minutes count. Callers who are considering or have attempted suicide are a particular challenge. Even though this scenario can be emotionally draining, it is satisfying to be able to assist someone who is in such great pain. Our care for the patient does not always stop with the first call. If, in our judgment, there is a risk for delayed onset of toxicity, we will make follow-up calls for the next hour, day, or even longer, if the situation calls for it.

After taking calls for a year, the specialist is eligible to sit for an exam to be certified by the American Association of Poison Control Centers. The Association has fairly stringent regulations as to how many certified specialists must be employed in a poison center, and I'm proud to say that nearly all of our staff have achieved this certification. After the next examination, I expect we will have 100% of our staff certified.

If the staff member is truly motivated, there is another level of recognition that may be attained – certification as a Diplomate of the American Board of Applied Toxicology (DABAT). To be eligible to sit for this exam, one must have wide-ranging toxicology experience including teaching, face to face consultation with medical staff and patients, publishing, interaction with government agencies, and demonstration of leadership qualities. Once the candidate has demonstrated these qualities to the satisfaction of the Board, a grueling two-day exam is the reward.

In addition to my time on the phones, I have several other responsibilities. Every spring, I lecture in the Clinical Toxicology course at the University of Oklahoma College of Pharmacy. Our center has increased its efforts to produce scholarly output such as journal articles, and I am responsible for coordinating research and publications. Additionally, I was recently promoted to Assistant Director of the center and am in the process of learning all the intricacies required for managing a poison center.

I've never regretted my decision to come to work at the center. Every day I learn something new and am happy to say that I'm one of the few people I know who look forward to going to work every day.

For questions regarding poison information pharmacy practice, please contact Scott Schaeffer at (405) 271-5454 or scott-schaeffer@ouhsc.edu.



OUCOP Student Chapter Report

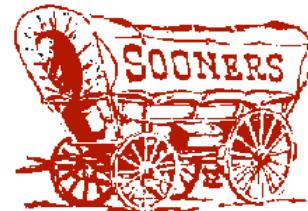
Advisors: Michele Splinter and Ann Lloyd

This semester, the University of Oklahoma student OSHP chapter had monthly speakers and participated in several service projects. In February, Anthony Davis described his role as an emergency department pharmacist at Integris Southwest Medical Center. Our last speaker of the year was Andy Laegeler, ASHP Student Forum member and Chair of the ASHP Student Forum Communications Advisory Group. He spoke on how students can get involved in ASHP.

Bake sales were held to support the college-wide Make-A-Wish Foundation project, which raised a total of \$20,000. Each organization was challenged to raise a minimum of \$400. In Oklahoma City, members Sarah Peters, Natasha Goil, Pinky Patel, Hillary Harwell, Maria Bates, Dan Gonzalez, and Renee Tobey assisted at the Food Bank by packing boxes of food. In Tulsa, sOSHP teamed up with SNPhA and provided information to students at Glenpool High School.

Officer elections were held in March and immediate past and current officers are as stated below. It was decided there also needed to be service chairs on both campuses as the OU Medical Center and College of Pharmacy are encouraging volunteerism. Maria Bates (OKC) and Mina Ku (Tulsa) have agreed to serve in that capacity.

OFFICERS	SPRING 2007 - SPRING 2008	SPRING 2008 - SPRING 2009
President	Mark Bateman	Renee Tobey
President-Elect	Renee Tobey	Kate Denney
Vice Presidents	Misty Broyles (OKC) Traselynn Anderson (Tulsa)	Allie Hooper (OKC) Sarah Peters (Tulsa)
Secretary	Shannon Beekman	Molina Mhatre
Treasurer	Maria Bates	Sarah Peters
Historian	Cory Binova (OKC) Kevin Diller (Tulsa)	Natasha Goli (OKC) Leah King (Tulsa)



SWOSU Student Chapter Report

Advisors: Mark Gales, Virgil Van Dusen, and Nancy Williams

The SWOSU student OSHP chapter has just finished another year of exciting speakers and projects. We were joined this semester by Clinton Indian Health Services, Dr. Becca Baugher from nuclear pharmacy, and Dr. Nancy Williams from internal medicine/nutrition support pharmacy. Their presentations helped the members of our chapter realize the array of possibilities that wait for us after graduation. We would like to thank these speakers for taking the time to visit with us.

Besides our meetings, the chapter was involved in a few service projects this semester. In February, we went to Trinity Hospice and made Valentine's Day cards for their patients. In March, the group went to a local elementary school and spoke to the 4th and 5th graders for Poison Prevention Week. The kids had a blast interacting with us and playing a game that we had made for them. It was a great deal of fun for our members and the kids!

As the semester came to an end, we elected new officers for the fall 2008 semester. We look forward to what the new officers will bring to the chapter, and we say thanks to this past semester's officers.

OFFICERS	SPRING 2008	FALL 2008
President	Samantha Mitchell	Asmini Mohanlal
President-Elect	Asmini Mohanlal	Becca Stodieck
Secretary	Swathi Krishnaprasad	Tara Newton
Treasurer	Anita Patel	Swathi Krishnaprasad
Fundraising Co-Chairs	Melissa Gloden Becca Stodieck Rebekah Vermillion	Melinda Le Anita Patel



WATCH FOR UPCOMING ISSUES OF THE OSHP NEWSLETTER

May-July 2008, August-October 2008