

ACCP Pulmonary PRN

Annual Newsletter 2021

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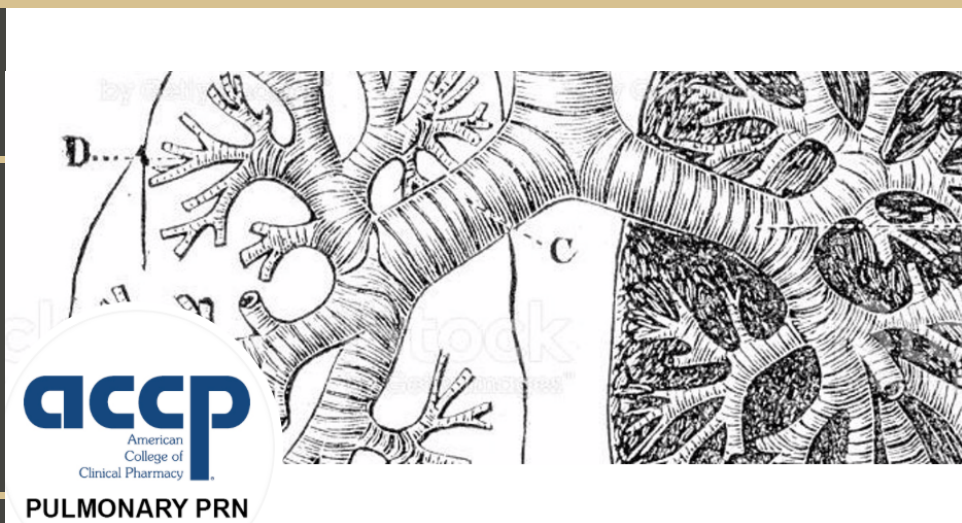
<https://twitter.com/ACCPpulmPRN>

Developed by the Education,
Programming, and Communications
Committee

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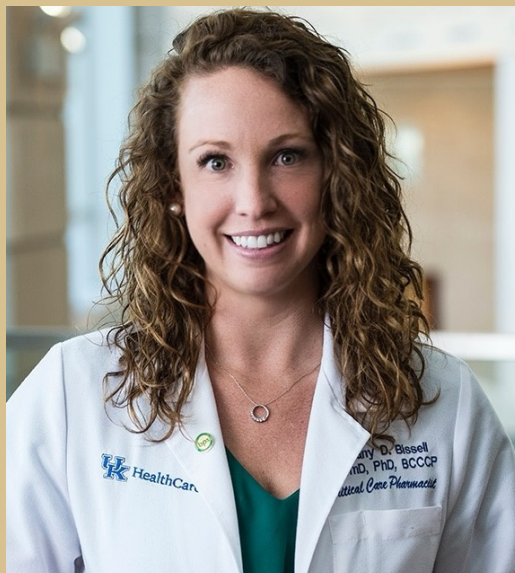


Message from the Chair

Brittany Bissell, Pharm.D., Ph.D., BCCCP
(brittany.bissell@uky.edu)

Serving the Pulmonary PRN over the last year has been my honor. Over the last 12 months, I have had the honor of watching many clinical pharmacists within our PRN continue to lead the medical community in its response to the ongoing pandemic. While continuing to battle COVID-19 on the frontlines, I have watched many of you step up in vaccination efforts and education efforts across the country.

Members of our PRN have published surrounding the pharmacotherapies for management of these patients and managed COVID survivors as well as its long-term effects within their clinics, constantly adapting to new information and new variants of the virus. I am proud of



the role clinical pharmacists have taken within the COVID-19 pandemic and I am privileged to work alongside you (even if lately it is mostly through Zoom 😊).

Further, this pandemic, amongst many other events, has continued to bring to light significant injustices and inequities not only within the patient population that we serve, but amongst our community of professionals, and the larger society. While these inequities are deep-rooted and we are just beginning to make progress toward adequate reparations and corrections, I am optimistic for the future of our profession. The focus of many within our pharmacy community in making steps to correct these issues, the willingness to fight for what is right, and the passion that drives so many of you are what brings me joy.

The PRN officers and committees have continued to make progress to advance our PRN and our membership. The PRN now has three research projects ongoing and was able to offer an inaugural travel grant for the upcoming annual meeting. This year, we successfully finished all standard operating procedures and guidance for future PRN leader generations. To my committee chairs and fellow officers, both current and predecessors, working with you has been my pleasure. I respect each and every one of you greatly and cannot wait to see the future of the PRN in the hands of our incoming leadership.

Thank all of the work you continue to do every day for our patients and our profession.

2020 - 2021 PRN Officers

Chair-Elect: Jean Moon, Pharm.D., FCCP, BCACP (jmoon@umn.edu)

As an associate professor and clinical faculty for the University of Minnesota College of Pharmacy and School of Medicine, I split my time between my clinical practice, teaching, and serving as the residency program director. I graduated from the University of Minnesota College of Pharmacy and completed a 2-year residency focused on ambulatory care, leadership, and teaching. In terms of pulmonary medicine, my practice is a family medicine residency program located in an urban underserved area with high rates of smoking and asthma. In addition to providing comprehensive medication management, our pharmacy team provides spirometry services for the clinic. I also teach pulmonary pharmacotherapy to pharmacy and medical students. The best part of being in the Pulmonary PRN has been getting to know these amazing pharmacists across the country with a passion for pulmonary medicine. As a newer PRN, it has also been so rewarding to see how much we have collectively accomplished in such a short amount of time.

Secretary/Treasurer: Megan Fleischman, Pharm.D., BCACP (megan.fleischman@froedtert.com)

I am currently a pulmonary clinic pharmacist in ambulatory care at Froedtert and the Medical College of Wisconsin. I graduated from the University of Wisconsin-Madison with my Pharm.D. in 2010 and subsequently completed a PGY1 residency at Monroe Clinic in Wisconsin and a PGY2 ambulatory care pharmacy residency at the University of Pittsburgh Medical Center. I feel extremely blessed to have worked closely with the leaders and members of the Pulmonary PRN over the past two years. I am constantly impressed by the passion this group has to provide support and education in pulmonary topics and research. Each committee meeting involved conversations ranging from simple things like sharing information over the listserv or Twitter to developing more involved research mentoring or education resources. After a year of helping the group document how we organize and keep the PRN running, I am excited to shift gears and be available to assist in larger projects that will be developed over the next year. We have an excellent candidate slate and chair-elects for our committees. I am excited to see what is next!



Committee Updates

Education, Programming, and Communications Committee

Chair: Melissa Santibañez, Pharm.D., BCCCP (msantibanez56@gmail.com)

Chair-Elect: Damien Fisher, Pharm.D., AE-C (damienfisher13@gmail.com)

Members: Jennifer Austin Szwak, Alexa Carlson, Megan Fleischman, Melissa Lipari, Jean Moon, Theresa Prosser, Zachary Smith

The Education, Programming, and Communications (EPC) Committee's charges over 2020-2021 were to develop a guidance document to organize the Committee's charges and timelines, to submit and finalize our PRN focus session programming for the 2021 annual meeting, to maintain the updated list of our past PRN focus sessions, and to develop and issue our annual PRN newsletter. Our Pulmonary PRN focus session was accepted and will be offered live on Oct 17th from 2:15-3:45pm MDT, titled "Updates in Asthma Management: A Tale of 2 Guidelines." This session will feature asthma treatment and management updates for both adult and pediatric patients, based on the 2020 GINA guidelines and the newly-published 2020 focused updates Expert Panel Working Group. We have divided the session into (1) a didactic portion directly comparing and contrasting both guidelines and their recommendations and (2) a question-and-answer portion with our panelists to gain insight into the inner workings of a guideline writing group and to learn how consensus recommendations are developed. We hope to find interested members to join our committee and build upon our work. Please reach out to the EPC Chair, Chair-Elect, or Committee members if interested in joining.

Research Committee

Chair: Brittany Bissell, Pharm.D., Ph.D., BCCCP (brittany.bissell@uky.edu)

Co-Chair: J. Andrew Woods

Members: Suzanne Bollmeier, Megan Fleischman, Melissa Lipari

The research committee has three ongoing projects: a retrospective study evaluating the impact of corticosteroid dosing for COPD exacerbation, a theophylline review article, and a theophylline practice survey. This year, we will be providing our first travel grant for research within the PRN.

Committee Updates

Workforce and Strategic Planning Committee

Chair: Paul M. Boylan, Pharm.D., BCPS (paul-boylan@ouhsc.edu)

Chair-Elect: Lori Wilken, Pharm.D., BCACP, AE-C (lwilken@uic.edu)

Members: Megan Fleischman, J. Andrew Woods

The Workforce and Strategic Committee's primary charge for the 2020-2021 term was to create a standard operating procedure, so as to ensure continuity between committee leadership and chronicle a timeline for report and award submissions. The Pulmonary PRN maintains a Twitter account ([@ACCPpulmPRN](https://twitter.com/ACCPpulmPRN)), for which the Committee developed and implemented policies and procedures to maintain our PRN's social media presence. Members are encouraged to follow the Pulmonary PRN on Twitter and retweet our posts, as well as recommend content or tweets to be posted. We are an small PRN and proud to highlight our member's accomplishments! The Pulmonary PRN is excited to offer its first travel award for student and resident members! Criteria and application information are available for students: <https://www.accp.com/stunet/award.aspx>, and residents: <https://www.accp.com/membership/resfelAward.aspx>. All aforementioned documents and policies are available on the Pulmonary PRN webpage.

PRN Research Updates

Theophylline Use in the 21st Century: A Scoping Review from the ACCP Pulmonary Practice and Research Network

Principal investigator: Paul M. Boylan, Pharm.D., BCPS (paul-boylan@ouhsc.edu)

Co-investigators: Maha Abdalla, Brittany Bissell, Mark E. Malesker, Melissa Santibañez, Zachary Smith

The earliest reports describing the clinical use of theophylline were chronicled as early as 1937. Since then, theophylline has been replaced by more effective and less toxic inhaled therapies for the treatment of chronic lung diseases; however, since the turn of the century, there has been renewed interest in theophylline such as its potential for anti-inflammatory effects at low-doses as well as considerations for add-on therapy to treat refractory COPD and asthma. The purpose of the PRN's scoping review is to map the associated literature from 2000 to present day and identify opportunities for contemporary theophylline research. The research team has searched and screened over 800 articles and charted the literature meeting inclusion criteria. Investigators are currently writing the discussion and aim to submit the manuscript for publication by late 2021. Pulmonary PRN members who are interested in peer reviewing the manuscript (prior to submission to a peer reviewed journal) are encouraged to reach out to Paul Boylan; reviewer's names will be noted in the acknowledgements.

Assessment of Theophylline Prescribing Practices for Pulmonary Conditions

Principal investigator: Melissa Santibañez, Pharm.D., BCCCP (msantibanez56@gmail.com)

Co-investigators: Suzanne Bollmeier, Paul Boylan, Melissa Lipari, Dennis Williams

The primary aim of this prospective survey-based study is to assess and describe prescriber preferences regarding theophylline for pulmonary conditions. This study represents the 2021-2022 major PRN work research product and is directly building upon the prior PRN-sponsored scoping review of theophylline for pulmonary conditions. It will assess prescriber preferences for theophylline along multiple demographic and clinical areas (e.g., indications, patient selection, prescriber training program/country/year/current region of practice, incorporation of therapeutic drug monitoring/goal therapeutic ranges, adjunct vs primary therapy, monotherapy vs combination therapy). Prescribers selected to survey will include: physicians, mid-level providers (e.g., nurse practitioners, physician assistants), and pharmacists. The study team is currently developing the survey instrument to submit for IRB approval and then pilot test and issue to the selected prescribers by mid/late fall 2021. Please direct any project inquiries to Dr. Melissa Santibañez.

PRN Member Spotlight

Kathryn Blake, Pharm.D., BCPS, FCCP, CIP



I am currently the Director for the Center for Pharmacogenomics and Translational Medicine and IRB Chair for Nemours Children's Health (Jacksonville, FL). Nemours Children's Health is a pediatric subspecialty health system located in the Delaware Valley (Wilmington, DE- hospital, subspecialty clinic, primary care network) and in Florida (Jacksonville-subspecialty clinic; Orlando-hospital, subspecialty clinic, primary care network, and Pensacola-subspecialty clinic).

When I was at University of Florida and completed my residency, I decided to do a fellowship. Leslie Hendeles, Pharm.D. was/is an internationally recognized pulmonary pharmacologist specialist at UF so I decided I wanted training under the best possible preceptor. He had a well-established fellowship program and the fellows have had successful careers. When I completed the fellowship, Dr. Hendeles put me in touch with a world-renowned allergist, Elliot Ellis, MD, who had just joined Nemours Children's Health in Jacksonville a few years earlier and who was looking to start a clinical research program. So, I joined Nemours and we had a very busy clinical trials program that provided me with excellent experience in trial execution and connections with industry. When Dr. Ellis retired, I was able to assume role as PI for these studies. Then a few years later, we recruited John Lima, Pharm.D. (his wife is Julie Johnson, Pharm.D., Dean of UF COP) to expand the breadth of our program and to include more investigator-initiated trials and include pharmacogenomics. Dr. Lima was hired as Director of the Center for Pharmacogenomics and Translational Research. Shortly after his arrival, the American Lung Association put out a RFA for initiating an asthma clinical trials network. We applied and received the grant and have been a leading site for grants, manuscripts, and recruitment for the last 20 years. Because of our success in the ALA network, we were invited to join the NIH funded AsthmaNet in 2013 and led pediatric enrollment for several of those trials (AsthmaNet sunsetted in 2018). Dr. Lima retired and I have been PI of the ALA network since 2015. The ALA network provided excellent opportunities for pharmacogenomic studies in asthma and Nemours became the biorepository site for DNA collected from those studies. I now direct the biorepository for all the biospecimens, not just DNA, collected through the ALA network. The ALA network is about to launch a 4000-patient lung health cohort study (enrolling 25- to 35-year-olds) funded by NIH (Northwestern University) to longitudinally follow the lung health of millennials, hopefully for decades. This study is considered analogous to the Framingham Heart studies but for lung health. Nemours will hold all the biospecimens for the Lung Health Cohort study providing a rich source of material for future ancillary studies for decades to come.

PRN Member Spotlight

Kathryn Blake, Pharm.D., BCPS, FCCP, CIP

Q: What were some of your biggest takeaways from creating the 2020 Focused Update?

A: There was tremendous commitment from NHLBI and the Working Group to provide recommendations backed by the highest levels of scientific evidence. The entire Working Group met every few months and the individual topic teams meet weekly for about a year reviewing data and carefully drafting the language used in the recommendations and in the supporting text. No guideline is ever finished; new data are being published after the data review is complete but before the guidelines are published and thus guidelines are always a work in progress. Conflicts of interest for each Working Group member were carefully scrutinized and members were not allowed to listen or participate in any discussions where there was a COI. This process made me very confident that the recommendations were free of any external biases and represent the best possible evidence. Colleagues often ask me why are GINA guidelines updated annually and it took 13 years for NHLBI asthma guidelines to be updated. The processes used for GINA are quite different from those used by NHLBI primarily because NHLBI used the GRADE (Grading of Recommendations Assessment, Development and Evaluation) process which is arduous and GINA abandoned that approach in 2009 because of the resource challenges involved. GINA panel members meet twice yearly to review data and provide expert opinion for the evidenced-based recommendations. Each methodology has advantages and disadvantages and knowing the processes can help understand why there are differences in the two guidelines.

Q: How would you advise residents and new practitioners that want to incorporate research into their practice but don't know where to start?

A: Start with projects involving existing data from your institution. These projects can then lead to future interventional studies. Talk to your medical colleagues about drug-related issues that they encounter in their practice, as this can give you ideas. The greatest reason for failure is asking too large of a question in a research project that cannot be answered with available resources. This is discouraging for the investigator who may have expended a great deal of time only to reach an unsuccessful outcome.

Q: What advice do you have for students, residents, and new practitioners looking to be involved with professional organizations?

A: Become involved in both pharmacy and medical specialty professional organizations. In the pharmacy organizations, you will learn from others about processes and opportunities you can bring to your institution. In the medical organizations, you will be exposed to the newest evidence in that specialty and the experts with whom you may someday collaborate which will aid in your education, practice, and research endeavors.

PRN Member Spotlight

Kathryn Blake, Pharm.D., BCPS, FCCP, CIP

Q: What career advice do you have for new practitioners?

A: Become involved in multidisciplinary committees or working groups within your organization. It is a chance for a pharmacist to showcase knowledge and skills and to become a 'go-to' resource for other practitioners.

Q: What is the most challenging and most rewarding part of being a faculty member or in your practice setting?

A: The biggest challenge is managing people and managing time. Both require a good bit of discipline to do it well. The most rewarding aspect is seeing those you mentor shine and achieve independence.

Q: What advice do you have for preventing burnout or encouraging work-life balance?

A: Don't be your own worst enemy – it is easy to let work creep into all moments of your life. Getting enough exercise, sleep, and having defined vacation time has worked for me. I let everyone know when I am on vacation that I am unplugging from email, and that is refreshing.

Q: What is 1 thing you have accomplished in your pharmacy career that you are proud of?

A: Aside from receiving funding from NIH which is certainly an honor and the projects help move the field forward, I have enjoyed my role as chair of one of Nemours' IRBs. As chair, I have the opportunity to impact the ethics surrounding design of pediatric research studies and to help mentor those just beginning their career.

Q: What's next?

A: We are launching a clinical pharmacogenomics program at Nemours Children's Health and have hired 3 very talented individuals to implement that service. We are learning about Implementation Science and are collecting and analyzing data that will help other institutions who will implement pharmacogenomics in a pediatric population.

PRN Member Spotlight

Hanna Phan, Pharm.D., FCCP, FPPA



I am a Clinical Associate Professor in the Department of Clinical Pharmacy at the University of Michigan College of Pharmacy and a Clinical Pharmacist Specialist in ambulatory care and pediatric pulmonary. I practice at Michigan Medicine - C.S. Mott Children's Hospital, Pediatric Cystic Fibrosis Center as well as providing consultation for other pediatric pulmonary clinics such as severe asthma and primary ciliary dyskinesia. I developed ambulatory practice in pediatric and adult cystic fibrosis as well as a pediatric severe asthma at Banner University Medical Center, having practiced there for nearly 14 years.

My passion for pulmonary medicine originates from my exposure to pediatric pulmonary disease such as cystic fibrosis and asthma throughout my pharmacy education and postgraduate training. My practice and research interests include patient/family education, chronic disease management, medication adherence, and interprofessional care models.

PRN Member Spotlight

Hanna Phan, Pharm.D., FCCP, FPPA

Q: How would you advise residents and new practitioners that want to incorporate research into their practice but don't know where to start?

A: Research can be understandably daunting; however, if you invest time for self-development of these skills, it can be a truly rewarding experience. In first developing a research project and/or incorporating research in one's practice, it is important to assess feasibility. Many of us have great clinical questions that arise from our practice experiences, but we should reflect on if the proposed project at hand is truly "do-able." For example: is it reasonable given my practice population and resources (time, funding, support, etc.) to successfully complete my study idea? If not, what aspects of this study idea may be achievable first steps as a pilot project to build towards a future larger study? Know that you do not have to navigate the nuances of research on your own – do not be afraid to ask for help from those with experience. Many individuals are happy to provide guidance. Such individuals may be at your current institution, or you may find them within professional organizations. There are also valuable training programs offered by organizations such as ACCP. For example, there is a "Research and Scholarship Certificate" from ACCP to help develop basic clinical research and scholarly skills. For practitioners with some research background looking to further develop skills, the ACCP Foundation's Mentored Research Investigator Training (MeRIT) Program may be a great opportunity. For those who are more seasoned in scholarship and research and interested in seeking extramural funding, the Focused Investigator Training (FIT) Program is available.

Q: What advice do you have for students, residents, and new practitioners looking to be involved with professional organizations?

A: Do not be afraid to put yourself out there – volunteer, speak up, and seek mentorship! Our profession is a small world and many of us are eager and happy to help, especially our next generation. The only way for our profession to continually grow and advance is through involvement of everyone, from student to seasoned practitioner or academician.

Q: What is 1 thing you have accomplished in your pharmacy career that you are proud of?

A: I am most proud of those I have had the privilege to mentor and the amazing things they do and will continue to do for patients, families, and our profession. Although I am proud of the practices I have developed as well as the contributions I have made thus far in various capacities (i.e., practice, education, research), to me, the ongoing impact of those I have been fortunate to work with -- students, residents, new practitioners, and their impact on others as mentors themselves is the true reward. I have wonderful mentors in my life and career and as a result, I always try to "pay it forward," to honor my mentors and contribute to the profession's future.

PRN Member Spotlight

Dennis Williams, Pharm.D., FCCP, FASHP, FAPHA, BCPS, AE-C



I am an associate professor at the University of North Carolina Eshelman School of Pharmacy and a Clinical Specialist in Pulmonary Medicine at the UNC Medical Center. My practice is with the adult pulmonary medicine service and the infectious diseases service.

I graduated from the University of Kentucky College of Pharmacy (B.S. in 1977, and Pharm.D. in 1981). My interest in pulmonary medicine is related to the time I spent in the mountains of Eastern Kentucky after graduating with a B.S. in pharmacy. COPD, coal miners' disease, and asthma were prevalent, and I gained a lot of experience in managing patients with these conditions.

Once I entered practice in an academic medical setting, I was welcomed into the small but strong academy of pulmonary-focused practitioners by Bill Kelly, Leslie Hendeles, Kathryn Blake, Julie Larsen, Judy Kelloway, Gary Milavetz, Mary Teresi, Tim Self, and Alan Kamada. Tim Pauley was another prominent pharmacist in the field of asthma who practiced in a community pharmacy setting. Most of these individuals had a pediatric focus, but they welcomed me into their fold and many have been lifelong friends.

PRN Member Spotlight

Dennis Williams, Pharm.D., FCCP, FASHP, FAPHA, BCPS, AE-C

Q: How would you advise residents and new practitioners that want to incorporate research into their practice but don't know where to start?

A: That is a common hurdle in the practice setting where the primary focus is providing quality patient care. A few basic pointers:

- Keep it simple! Look for a need or a gap in current practice and ask a question.
- Find a mentor or even a team of mentors; people bring different skills sets.
- Identify what information you need to answer the question.
- Figure out where the data is going to come from and how easy it is to get it.
- Define an intervention if there is one.
- Determine how to evaluate your results.
- Decide what to do next! (This is how the program grows)

Q: What is 1 thing you have accomplished in your pharmacy career that you are proud of?

A: My global experiences. I have been fortunate to be able to work with pharmacists in other countries to help advance practice and science. From these experiences, I have friendships that I cherish in places like Japan, China, Egypt, Kenya, and Zambia. More recently, I have participated on medical mission teams to a remote region of Honduras. I actually serve as the director of pharmacy for a brick and mortar clinic that is maintained there. I usually go on two 10-day trips each year. In May 2021, I was part of the first team back since February 2020. Through these experiences, I have made multiple friendships with clinicians across the United States that I would have otherwise never known. Because of indoor open fire cooking and outdoor trash burning, lung conditions are a common problem. I feel very fortunate for the position that I have had for 38 years! I enjoy practice, teaching and scholarship, and I have the freedom to pursue global engagement as well.

COVID Corner

Luan Truong, Pharm.D.



COVID-19 MYTHS & FACTS

MYTH



Antibiotic works against COVID-19.



Johnson & Johnson vaccine was recalled, therefore the vaccine is not safe for the public.



You are immune to COVID-19 after recovering from the disease.



More COVID-19 variants are not likely to emerge.



I don't need to wear a mask if I got the vaccine.



COVID-19 vaccine gives me immunity against all variants, including the contagious Delta variant.

FACT



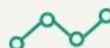
Antibiotics are used to treat bacterial infections, not for viral infections such as COVID-19.



There were individual case reports showing risk for rare adverse events, such as thrombosis with thrombocytopenia syndrome (TTS). Women younger than 50 years old were at a higher risk for the rare side effect. However, after further evaluations, the FDA concluded that the vaccine is still justifiable for a one-time dose.



Studies are still being conducted to determine whether adults are definitively immune to SARS-CoV-2 reinfection. At this time, it is still unknown because biological markers that indicate immunity have not shown a correlation to protection from the virus.



Currently, 83% of hospitalized COVID-19 patients in the nation are caused by the Delta variant. However, the Lambda variant is also emerging, with the first cases originating from South America.



Many health experts are advising vaccinated people to still wear masks indoors and outdoors due to the rising cases of COVID-19 and the delta variant being the most prevalent and contagious strain as of July, 2021.



A recent study published in the NEJM examined the effectiveness of vaccines against the Delta variant. The estimated effectiveness of the two doses vaccine against the variant is approximately 88% with the Pfizer vaccine, and 67% with AstraZeneca vaccine. Further studies are needed to examine the rest of the vaccines.

PRN Member Accomplishments

Promotions and Job Updates

- **Fisher D.** New position as Assistant Professor of Pharmacy Practice at South University College of Pharmacy (Savannah, GA).
- **Murphy JA.** Promoted to Director of the Office of Undergraduate Research and the Office of Competitive Fellowships at The University of Toledo (Toledo, OH).

Publications

- **Boylan PM, Santibañez M, Lounsbury N, Eltaki SM.** A nonthrombotic pulmonary embolus caused by polyalkylimide dermal filler: a case report and literature review of medication management. *J Am Pharm Assoc.* 2021;61(4):e324-e331.
- **Fisher D, Diaz L, Serrato I, Hudson C.** Gamification: an interactive activity to assess the effect of game-based learning in the area of drug card. *ACCP EDTR PRN Newsletter.* Fall 2020.
- **Murphy JA, Curran BM, Gibbons WA 3rd, Harnica HM.** Adjunctive phenobarbital for alcohol withdrawal syndrome: a focused literature review. *Ann Pharmacother.* 2021; [Epub ahead of print].
- **Santibañez M, Duque A, Harris T.** A look at piperacillin/tazobactam versus carbapenems for ESBL infections. *IDStewardship.com.* June 2021.
- **Santibañez M, Sedlacek J, Parmar J.** Perceptions regarding pharmacy training across four domains: a survey of new pharmacist practitioners. *J Am Coll Clin Pharm.* 2021;4(5):622-630.
- **Santibañez M, Reeves AA.** Upper Respiratory Tract Infections. In: Sutton SS, ed. *NAPLEX Review Guide.* 4th ed. New York, NY: McGraw-Hill; 2021.
- **Santibañez M.** A closer look at the Pulmonary PRN; clinical update – COVID-19 vaccines. Jan 2021. *ACCP Experts in Training: News for Resident, Fellow, and Graduate Student Members of ACCP newsletter.*
- **Crowley KL, Santibañez M, Schmidt L.** Clinical considerations for alternative nimodipine dosing strategies in aneurysmal subarachnoid hemorrhage. *SCCM Clinical Pharmacy and Pharmacology section newsletter.* 2021;21(1):11-14.
- **Parker CR, Riggi G, Santibañez M, Shah J, Wang S.** Neuromuscular blocking agent safety. *SCCM Clinical Pharmacy and Pharmacology section newsletter.* 2021;21(1):9-11.
- **Fernandez D, Maldonado A, Williams L, Rogers B, Santibañez M.** Abstract 617: Correlation between thromboelastography and standard coagulation tests at a community hospital. *Crit Care Med.* 2021;49(1):302.
- **Condeni MS, Basting A, Costello PG, DePriest A, Eriksson EA, Evans H, Hertel K, Holder AL, Kester AN, Kowalski KR, Magee CA, McLean B, Reichert M, Santibañez M, Wieruszewski PM, Newsome AS.** Major publications in the critical care pharmacotherapy literature: 2019. *J Crit Care.* 2021;62:197-205.

PRN Member Accomplishments

Presentations

- **Fisher D.** COVID 19 and Treatment Strategies. Podium presentation at Annual Houston Heath Education; August 2020; virtual.
- **Fisher D.** Differences between NHLBI Asthma Guidelines 2007 and 2019, Continuing education presentation at National Pharmaceutical Association; November 2020; virtual.
- **Fisher D.** Inhaler technique & demonstrations. Podium presentation at the American Lung Association COPD Education Institute; April 2021; virtual.
- **Fisher D.** Update on Smoking Cessation. Continuing education presentation at Georgia Pharmacists Association; June 2021; virtual.
- **Santibañez M.** Burnout in Pharmacy Practice: COVID and Beyond! Continuing education presentation at Nova Southeastern University 32nd Annual Contemporary Pharmacy Issues Conference; May 2021; virtual.
- **Santibañez M, Fernandez D.** Strategies to Achieve Active Learning in the Classroom. Virtual roundtable presentation for the annual NSU COP faculty development series, May 2021.
- **Duque A, Arrighi S, Sanchez D, Santibañez M.** Pharmacotherapy management for heart failure with recovered ejection fraction. Encore presentation at ACCP Virtual Poster Symposium; May 2021; virtual.

New ACCP Fellow

- **Kristen Pogue**

Other Notable Achievements

- **Pogue K.** Voted incoming chair of the Board of Pharmacy Specialties Cardiology Specialty Council.
- **Santibañez M.** Video interview with Pharmacy Times; Identifying causes of pharmacist burnout. May 2021.
- **Santibañez M.** Video interview with Pharmacy Times; Value of a pharmacist on a care team. May 2021.
- **Santibañez M.** Video interview with Pharmacy Times; Health system staff wellness programs could help address pharmacist burnout. June 2021.

"See" you at the Annual Meeting!

- *Considering the announcement on August 24th from ACCP that the Annual Meeting is being moved to a virtual format, Pulmonary PRN leadership will communicate the final time and delivery platform once all programming has been rescheduled*
 - *Please anticipate the following PRN events at the Annual Meeting*
- **Pulmonary PRN Focus Session**
 - **Updates in Asthma Management: A Tale of 2 Guidelines**
 - **Objectives**
 1. Describe the major evidence-based medication recommendations in the 2020 focused updates Expert Panel Working Group asthma treatment guidelines.
 2. Compare medication recommendations in the 2020 focused updates Expert Panel Working Group asthma treatment guidelines against the GINA 2021 asthma treatment guidelines.
 3. Formulate evidence-based treatment plans using the medication recommendations in the 2020 focused updates Expert Panel Working Group asthma treatment guidelines.
 - **Faculty**
 - Lori Wilken, Pharm.D., BCACP, AE-C
 - Diana Sobieraj, Pharm.D., BCPS, FCCP
- **Pulmonary PRN Business Meeting and Networking Forum**

