

**Preceptors Conference**  
By Shelly Fromholtz

On Saturday, June 12th, the Office of Experiential Education (OEE) hosted its sixth annual Preceptors Conference. Tony Manoguerra, PharmD, Associate Dean for Student Affairs at SSPPS kicked off the conference by describing the make-up of the incoming Class of 2014. Fifty-one women and 11 men ranging in age from 21 to 34 will be arriving in the Fall of 2010 to begin their SSPPS education. The majority of these students have undergraduate degrees, mostly from campuses in the UC system. Dr. Manoguerra also discussed the recently graduated Classes of 2009 and 2010. The school is very proud that 100% of its Class of 2009 students passed the board exams on the first attempt. As for the Class of 2010, just over half of them are continuing on to residencies while the rest have secured jobs in community pharmacies. San Diego continues to be the destination of choice for the vast majority of alumni.



Next, James Colbert, PharmD, Assistant Dean for Experiential Education at SSPPS

presented “Outstanding Teacher Awards” to eight of our fantastic preceptors: Lisa James, RPh, UCSD MC Hillcrest; Beatriz Lewis, PharmD, UCSD Moores Cancer Center; Francis Pham, PharmD, CVS Pharmacy; Gale Romanowski, PharmD, Rady Childrens Hospital San Diego; Todd Shinohara, PharmD, Naval Medical Center San Diego; Kelli Stadalman, PharmD, UCSD MC Thornton; Lillian Udomphonkul, PharmD, UCSD MC Hillcrest; and Christopher Woo, PharmD, Walgreens Pharmacy. The awards were given based on student feedback and overall contributions to our program. Thank you!!

Aide Gomez, BA, Instructor of Medical Spanish and Cultural Competency at UCSD School of Medicine delivered a fascinating presentation on Cultural Competency regarding Latino culture and belief systems as they relate to communication and understanding in the health care system. She discussed the unique opportunities that pharmacists have to advise, educate and refer their Latino patients, and also described some cultural expressions that patients use to describe the causes and treatments of their illnesses. Illustrative examples were provided of how religion, the role of each family member (particularly, the mother), English fluency and literacy, and socioeconomic factors play into Latino patients’ understanding, acceptance and implementation of their

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medication therapies. The pharmacist often plays an important and critical role in ensuring proper medical care and treatment of their patients. Being aware of culture-specific beliefs, values, and behaviors enhances and improves competent and complete health care not only for Latino patients, but for patients of all cultures.

Grace Kuo's, PharmD, MPH, Associate Professor of Clinical Pharmacy at SSPPS presentation on Health Literacy provided intriguing insight into the health literacy of average American patients. Only 12% of Americans demonstrate proficient health literacy. Non-adequate health literacy is most prevalent among older adults, minority populations, immigrants, people with low socioeconomic status, medically underserved people and people with limited education. Dr. Kuo provided strategies to help identify patients who might need additional assistance in understanding how to properly adhere to their medication therapies. In addition, several tools, such as the Ask-me-3 campaign and the Rapid Estimate of Adult Literacy in Medicine revised (REALM-R), are available to help improve health literacy. Both Dr. Kuo and Ms. Gomez encouraged the use of customized Pill Cards; stickers with icons that represent time of day, dosage amount and other instructions can be utilized to effectively explain and illustrate medication instructions. A heightened awareness, a concerted effort to improve communication and understanding, and attention to the details can all lead to improved health literacy for all patients.

Jeffery Goad, PharmD, MPH, Associate Professor of Clinical Pharmacy at the USC School of Pharmacy rounded out the conference with his engaging presentation on the new healthcare reform legislation which aims to increase coverage to 95% of all Americans. Currently, the United States leads the world in healthcare spending which, among other things, necessitated this reform. In very plain and easy-to-understand terms, he outlined the changes taking place each year from 2010 to 2015 and beyond; topics covered included coverage expansion, health insurance reform, Medicare/ Medicaid reform, health IT mandates, and prevention services. Changes we can expect to see in 2010 involve prohibition of lifetime benefit limits, establishment of limited small business tax credits, and Part D rebates for beneficiaries in the gap. Also, children will be able to stay on their parents' policies until age 26, and there will be no pre-exclusions for children until age 19. A new federal rate review process will be established and rescissions will be prohibited except for fraud. As everyone well knows, this legislation was not free from controversy; Dr. Goad also discussed the major obstacles to passing it: abortion funding, partisanship & politics, and deficit impact. To help with costs, funding opportunities will come in the form of Community Transformation Grants, the Patient-Centered Outcomes Research Institute, and MTM Grants.

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### **Ambulatory Care Preceptors Conference, September 7, 2010** **By Shelly Fromholtz**

On Tuesday, September 7th, the Office of Experiential Education (OEE) hosted its Fall Ambulatory Care Preceptors Conference. Dr. Sarah McBane, one of SSPPS's Family Medicine Preceptors, presented, "Teaching Philosophies" for one hour of CAPE CE credit. She defined a teaching philosophy as a self-reflective statement of beliefs about teaching and learning that describes values and ideas. They are narrative in form and are living documents as they evolve along with the preceptor's teaching experiences. In this way, teaching philosophy can help foster and improve a preceptor's teaching skills. Some questions to consider when developing a teaching philosophy include the following: 1) What is my motivation in teaching, 2) What outcomes do I expect from my teaching, and 3) How do I measure successful teaching?



Next, James Colbert, SSPPS's Assistant Dean for Experiential Education, discussed APPE grading and evaluation guidelines. Students are evaluated in four distinct areas: 1) Data collection and Interpretive Skills Drug Therapy, 2) Critique and Planning, 3) Communication and Professional Behaviour, and 4) Performance in Clinical Setting. Two formal evaluations are required during the rotation, one occurring halfway through the rotation and one at the end. Of course, constructive and informal feedback throughout the rotation is encouraged in order to help the student succeed. At any time during the rotation, the preceptor is more than welcome to contact the OEE for consultation and partnership regarding any student for any reason.

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The final presenter, Aide Gomez, Instructor of Medical Spanish and Cultural Competency at the School of Medicine, delivered, "How to use a Language Interpreter". Sixty percent of California households as of the year 2000 are categorized as "English Only" households. In the remaining 40 percent, a wide variety of other languages are spoken in addition to English, including Spanish, Chinese and Tagalog. Because of this diversity, knowing how to successfully work with a language interpreter in the pharmacy environment is very important. Interpreters adhere to a strict code of ethics, ensuring patient confidentiality, respect for patients and families, and ascribing to a teamwork approach with the healthcare providers involved. Interpreters play a variety of roles depending upon each situation's needs. They can act as conduits, clarifiers, culture brokers, and advocates, taking action on behalf of the patient to ensure not only quality of communication, but quality of care.

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### **A Case of "Practice What You Preach"**

**By Candis M. Morello, PharmD, CDE**

Heart palpitations, dry mouth, sweaty palms and blurred vision. These are just a few symptoms I experienced during my first few lectures to 25 students at UCSD SSPPS in 2002. Haven't we all at one time or another when faced with speaking to a crowd? Who would have thought that after eight years of teaching student pharmacists about different aspects of diabetes care and the importance of public speaking skills and professionalism, I would be given the opportunity to practice what I preach in a big way? In January 2010, I received an invitation to give a presentation at the 70<sup>th</sup> Annual American Diabetes Association Scientific Sessions meeting held in Orlando, Florida scheduled for June. The talk was part of a two hour symposium with leading experts who treat very insulin resistant patients with type 2 diabetes. My talk, entitled "Adding Oral Agents to Insulin," was scheduled for a 30 minute time slot during which I was to evaluate the literature and provide treatment recommendations. I was honored to be asked, and just a little nervous since this would cross disciplines for me (the majority of attendees are MDs and PhDs), but since it was within my specialty area, I agreed. And, besides, what's 30 minutes, right?

When teaching SSPPS student pharmacists throughout our curriculum at UCSD SSPPS, I teach with an underlying theme of the "Six Ps": Preparation, Professionalism, Positive Approach, Practice, Practice, and Practice again. However, by early June 2010 I had only completed the background research and had not composed a single slide. Clearly I was not following my own preparation advice! So I got down to business and was completely prepared by the time I arrived in Orlando.

My plan was to attend the first symposium then begin my preparations scoping out the room where I would lecture. The first symposium was located in the Valencia A/B room at the Orlando Convention Center, which was the size of a football field and held 5,000 people. I couldn't even see the speaker from the back of the room. Six large screens distributed throughout the room showed the speaker's slides. After the talk, I searched the syllabus for my symposium location to find I was speaking in the Valencia A/B room! Eight years ago I likely would have panicked. At that moment, I simply shook my head and smiled, and recalled the many times I'd told my students to "step up" and face challenges in a positive and professional manner. Even though this was some serious stepping up for me, it was time to practice what I preach!

Twenty minutes before my symposium, I arrived at the Valencia A/B room feeling excited rather than nervous. The speaker before me was excellent, but went over by almost 10 minutes which shortened my time slot. My goal was to keep us on time without affecting the content or quality of my talk. Because I'd followed the 6 Ps, I knew the exact time I needed for each slide and where I could be brief. Overall the talk was well received and the six questions were easy to answer. I found that lecturing to thousands of people isn't much different than lecturing to 100, except since the room was so large I didn't always know where to look when it was time to answer the questions!

Overall, I feel grateful to UCSD SSPPS, Dean Taylor, my student pharmacists past and present, and to my mentor Steven Edelman for giving me opportunities to hone my skills and practice what I preach.

## Lab News

Leah P. Shriver Ph.D., a postdoctoral fellow in the Manchester lab, was recently awarded a Ruth L. Kirschstein National Research Service Award individual postdoctoral fellowship from the National Institutes of Health. The award will support her studies on “Metabolomic Analysis of CNS Inflammation”.

Emily Plummer, a 4th-year graduate student in the Manchester lab, was among the scholarship winners honored by the San Diego Chapter of the Association for Women in Science (AWIS-SD) at its 2010 Scholarship Gala. The scholarship program, now in its 12th year, encourages aspiring female scientists by awarding scholarships to outstanding students pursuing degrees in science, technology, engineering and mathematics (STEM) fields at institutes of higher learning in San Diego County. According to AWIS-SD, this year the program received a record number of applications, and eight scholarships were awarded to “ambitious and talented students with exceptional achievements in academics and research in addition to community service and outreach activities.”

### Pharmacy and Family Medicine Joining Forces to Protect Babies from Pertussis Epidemic By Sandra Chiang, PharmD, Ambulatory Care Pharmacy Resident and Sarah McBane, PharmD, CDE, BCPS, Assistant Professor

Pertussis (whooping cough) has recently become an epidemic in California. In San Diego County, 2010 pertussis rates have increased over 400% compared to 2008. To date, seven infants in California have died from pertussis or pertussis complications, with the most recent mortality occurring in San Diego. All deaths have occurred in infants under 3 months of age. Infants typically contract pertussis from close contact with adults—often family members—and are more susceptible to hospitalization and serious complications such as pneumonia. Infants receive their first pertussis vaccine at two months, but adequate immunity may not be achieved until after the third dose at age 6 months.

The Skaggs School of Pharmacy and Pharmaceutical Sciences (SSPPS) and UCSD Medical Center are contributing to the relief effort in this public health crisis. Through a multidisciplinary collaboration, notably the Women and Infants Services, Department of Family and Preventative Medicine, Department of Pharmacy,



and SSPPS, a vaccination clinic has been providing Tdap for household contacts of newborn infants. Vaccinations are available to parents, siblings, grandparents, babysitters, and any other persons that will be in constant close contact with newborns. By immunizing these individuals, the risk that the baby will contract pertussis is minimized and a cocoon of protection is established. Vaccines are provided free of charge and are supplied by the California Department of Public Health in order to curb this epidemic. This effort is under the direction of Dr. Elizabeth Rosenblum from Family Medicine and Dr. Sarah McBane from the SSPPS.



The vaccination clinic began on August 2<sup>nd</sup> for the inpatient close contacts at Hillcrest Medical Center on 4<sup>th</sup> floor Family Maternity Care Center, and vaccinations will continue to be provided Monday to Saturday from 5pm to 6:30pm until the vaccine supply is exhausted. SSPPS students

have been essential to the ongoing success of the clinic, and have immunized at least 25 individuals each evening. In addition, student pharmacists will provide immunizations for close community contacts of newborn babies. Additional Tdap vaccination clinics are ongoing at the UCSD Medical Center outpatient pharmacy from 3:30 – 5:00 pm on weekdays.

## Teaching the Teachers

**By Sarah McBane, PharmD, CDE, BCPS, Assistant Professor & Sarah Lorentz, PharmD,  
Ambulatory Care Resident and Student Coordinator**

Key components of pharmacy residencies include clinical practice, research, and teaching. Pharmacy residents from various San Diego programs teach SSPPS student pharmacists on many experiential rotations and are involved in didactic courses including Pharmacy Practice and Therapeutics. Dr. James Colbert and Dr. Sarah McBane, faculty from the SSPPS, have collaborated with the San Diego Pharmacy Residency Leadership (SD PRL) to develop and implement a teaching program for the PGY1 and PGY2 residents of San Diego County residency programs.

The teaching program will provide the residents with fundamental teaching skills to enable them to be effective in a variety of teaching situations. More specific goals of the program include improvement in didactic sessions provided by residents, improvement in clinical precepting provided by residents, and development of better future faculty. The teaching program will increase the quality of the lectures and therefore provide a better educational experience for SSPPS students. Residents precept (or co-precept) a large proportion of our SSPPS student pharmacists during clinical rotations, and the teaching program will promote the development of better experiential teaching skills and improve the rotation experience of SSPPS students. It is well recognized that most schools of pharmacy have a shortage of qualified faculty. The teaching program will expose pharmacy residents to academia and introduce skills useful for a future in the academic setting.

The program is being held in the evenings after clinical work, and the Pharmaceutical Sciences Building will host the majority of the sessions. Curriculum topics include: adult learning, active learning strategies, small group facilitation, development of goals and objectives, presentations to professionals, teaching tools for different audiences, and handling difficult learners. Residents will develop a teaching philosophy and maintain a portfolio of their teaching activities.

2010 is the inaugural year for the resident teaching program which includes over 50 residents from 10 programs (see table for residency programs and directors). Residents who successfully complete the program will be awarded a teaching program certificate at residency graduation.

### San Diego County Residency Programs

<b>Program</b>	<b>Director</b>
Naval Hospital Camp Pendleton	Nahed Bahlawan, Pharm.D.
Palomar Medical Center	Olga H. DeTorres , Pharm.D., FASHP
VA San Diego Healthcare System	Jonathan P Lacro, Pharm.D., FASHP, BCPS, BCPP
Kaiser Permanente Medical Care Program, San Diego	Jennigrace Bautista, PharmD
University of California, San Diego Medical Center	Marcie Lepkowsky, Pharm.D.
Scripps Mercy Hospital	Harminder K Sikand, Pharm.D., FCSHP
Naval Medical Center - San Diego	Natalie S Hall, Pharm.D., MPH
Rady Children's Hospital	Gale Romanowski, PharmD
Sharp HealthCare System	Grant K Lum, Pharm.D.

## New Pharmacist Volunteer Opportunities in Uganda

**Susan Raber, Pharm.D.**  
**Director, Clinical Pharmacology, Pfizer La Jolla**  
**Volunteer Faculty, UCSD Skaggs School of Pharmacy and Pharmaceutical Sciences**  
**Volunteer Program Director, Health Volunteers Overseas**

Many short-term volunteer opportunities are available for physicians, surgeons, and other healthcare professionals (nurses, dentists, etc.) through non-profit charitable organizations. Volunteers provide medical care, teaching and expertise to those living in underserved areas or developing countries. Talk to anyone who has volunteered, and they will tell you it is a challenging, but rewarding and often life-changing, professional experience. Similar volunteer positions for pharmacists, specifically clinical pharmacists, are harder to find. However, the need exists! Are you up for the challenge?

The World Health Organization (WHO) recommends a ratio of one pharmacist per 2000 population for delivery of optimal health care. In the United States, new schools of pharmacy have opened in an effort to train more pharmacists and push toward this goal. In developing countries, particularly African nations, the ratio is far behind the WHO recommendation of 1:2000. I experienced this firsthand in Uganda, where they have about 300 qualified pharmacists to serve a population of just under 30 million, or a ratio of 1:100,000! The small workforce of pharmacists is further complicated by lack of incentives to work in rural villages, salary disparities between the public and private sector, and lack of clear roles and responsibilities of pharmacists as health care providers. Yet, there are young motivated Ugandan pharmacists and students who are determined to expand the profession and establish clinical pharmacy in their country. The experience convinced me that pharmacy is really not so different, no matter where you are in the world.



To help address the immense need in Uganda, I continued to work with Health Volunteers Overseas (HVO), a private, non-profit organization, after my return from a 5-month Pfizer Global Health Fellowship assignment to establish a new HVO program in clinical pharmacy. It was officially launched in summer of 2009. The volunteer program is

linked with the Departments of Pharmacy at both Makerere University and Mulago Hospital in Kampala, Uganda. Mulago Hospital, a 1500+ bed facility, serves as Uganda's national referral, teaching and research hospital and is affiliated with Makerere University. Volunteers take on assignments of three to four weeks duration and are involved in the clinical training activities of pharmacy students, interns, and teaching staff in both the classroom and patient-care settings.

Makerere University has had a Department of Pharmacy since 1988. Recently, it became part of the newly formed School of Health Sciences, formerly included in the Faculty of Medicine. It graduates about 25 pharmacists per year. To qualify for licensure as a pharmacist, the students must complete the four-year Bachelor of Pharmacy (BPharm) program followed by a one-year internship in the hospital setting. There are approximately 20-25 pharmacy interns each year and only four practicing pharmacists at Mulago Hospital. The Pharmaceutical Society of Uganda published an internship manual in 2007 to provide guidance on the goals and objectives to be accomplished during internship. Pharmacy interns rotate through various ward satellite pharmacies and other dispensing areas of the hospital and are increasingly expected to participate in clinical rounds. This has not traditionally been a role of pharmacists nor do they have many role models. Thus, a major goal of this HVO pharmacy program is for volunteers to participate in clinical training activities of interns, staff, and students to help them become more comfortable in a clinical pharmacy and patient care role within the hospital.

If this sounds like something you would be interested in exploring, please contact me! I am planning a return trip in November and would love to have additional volunteers join me. Of course, volunteers are needed throughout the year and trips can be planned to coincide with travel and vacation schedules. Unfortunately at this time the site is not able to accommodate students and volunteers should hold a pharmacy license. There are too many details to provide here, so I refer you to the HVO website [www.hvovusa.org](http://www.hvovusa.org) for more information. I also have plenty of photos, stories, and personal experiences that I'm happy to share. My email is [susanraber@gmail.com](mailto:susanraber@gmail.com) or [susan.raber@pfizer.com](mailto:susan.raber@pfizer.com).

**ASCP News**  
**By Elizabeth Jackson, P-2**

ASCP, or the American Society of Consultant Pharmacists, is a professional organization that focuses on geriatric pharmacy and health issues affecting the senior community. We at UCSD-ASCP are a fairly young chapter, but we are large in numbers and in spirit. Summer 2010 has been a very eventful time for the organization and we look forward to even more outreach events in the upcoming school year.

The first event of the summer was our very first immunization outreach for seniors discussing awareness and prevention of shingles and pneumococcal disease. These two diseases widely affect the senior community, but are often overlooked. Fortunately they are preventable. Many seniors are not aware of the prevalence of these diseases and even fewer are aware that vaccines exist. ASCP's student pharmacists Jack Yeung, Bill Madden, and Chris Mapes educated over 30 seniors at the Del Mar City Hall Annex. A big "Thanks" to Shirley King from Del Mar Community Connections for helping us promote the event, and also to our wonderful preceptor, Dr. Joseph Ma.

The second event of the summer was a diabetes outreach in Brookeview Village organized by our VP of Community Affairs, Inna Sosinsky. The presentation focused on diabetes as a disease, lifestyle modifications that need to be made, and treatment options for seniors who are afflicted or at risk. A small group of seniors asked many questions about diabetes and were given personalized answers from the student pharmacists.

The third event of summer 2010 was a hypertension awareness presentation at the Vi retirement home in La Jolla. The presentation addressed many aspects about hypertension as a disease. Traci Bricker, Jennifer Johnson, Bill Madden, and Elizabeth Jackson educated the inquisitive seniors about the risk of hypertension, lifestyle modifications, therapeutic options, and even drug and food interactions of which they should be aware. An outstanding audience of over 40 seniors attended the presentation, actively engaged in questions and answers, and even participated in "pop quiz" questions about hypertension. We would like to thank Shiela Caldito for helping us set up this outreach and also our preceptor, Dr. Sarah McBane.

Just a few weeks later, UCSD-ASCP student pharmacists Bill Madden, Lindsey Hohmann, Natalie Hohmann, and Jennifer Johnson, returned to Vi retirement home, this time to give an interactive presentation on overactive bladder. The presentation was very well received, attracting over 50 senior audience members. Again seniors participated in "pop quiz" questions about overactive bladder, and were given the opportunity to ask questions. Not only was it an exciting experience for the seniors, it was also a valuable experience to the student pharmacists, both intellectually and mentally. Again we would like to thank our amazing preceptor, Dr. Sarah McBane, for all of her help and support.

In August, student pharmacists Bill Madden, Natalie Hohmann, and Lindsey Hohmann presented our second Immunization outreach, again on the awareness and prevention of shingles and pneumococcal disease. This time we held the event at the Frederika Manor Care Center in Chula Vista and were able to interact with over 30 interested seniors. In the future, we plan to hold many more immunization outreaches, as this is such an important issue for the geriatric community.

The fall of 2010 will bring even more opportunities for ASCP to reach out to the geriatric community and educate seniors about health and medication. As the baby boomers age, more and more geriatric patients will be coming to us for help, and the best way to get experience educating them is to volunteer to help them right now. We will be having our annual membership drive on September 30 in EC 2 & 3 (in the basement) during lunch (12pm - 1pm), and we urge everyone to come check out our organization! We will be holding a raffle with prizes and also will be having a guest speaker, Dr. Greg Medley! Food will be provided. If you would like to learn more about consultant pharmacy and reaching out to the geriatric community, please come out and check out our organization! We look forward to an eventful and rewarding new school year!

## BioMedical Library

UCSD

Biomedical Library (BML)

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Sue McGuinness, Ph.D *Pharmacy Librarian*

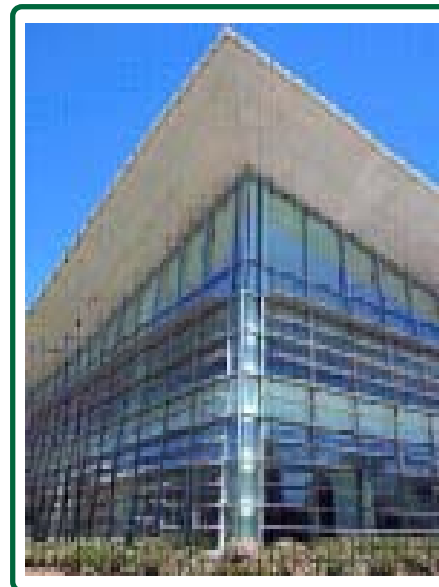
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### Pharmacy Education for the Deaf Community

#### UCSD Moores Cancer Center

By Rabia Atayee, Pharm.D., BCPS

Many people are unaware that an estimated 28 million Americans are deaf and rely on American Sign Language (ASL) and lip-reading as a means of communication. Healthcare education is scarce for these patients. Of importance, the Deaf community faces many barriers when accessing cancer control resources. A community-campus partnership

is working towards increasing the access for the Deaf community in the United States. Cancer Control is a comprehensive cancer control program that provides education and resources on oncology topics to the Deaf community. The UCSD Moores Cancer Center is one of the partners in this national program, led by Dr. Georgia Sadler. Specialists in various areas of oncology have been invited by the Cancer Control program here at UCSD to provide educational webinar presentations alongside a sign language interpreter. I participated in this forum by presenting “Frequently Asked Questions about Chemotherapy”. In previous webinar sessions I presented “Pain Management in Cancer Patients”, and “Nausea and Vomiting Management in Cancer Patients”.



In order to facilitate comprehension of the health care material, I utilized vocabulary that could be efficiently and accurately interpreted into American Sign Language. I stood side by side with a sign language interpreter during the webinar presentation, presenting a topic and then allowing time for the sign language interpreter to sign the message. This allowed those fluent in ASL and proficient lip reading to understand the presentation.