Nearly 400 participants and guests representing the state boards of pharmacy, government officials, and other interested stakeholders, attended the NABP 105th Annual Meeting “NABP MIAMI: Quality Care – It’s Hot! Hot! Hot!” Held in vibrant Miami, FL, the meeting took place May 16-19, 2009.

Constitutional Amendment, Resolutions Passed
One of the most important functions of the meeting is the opportunity for members to assist in shaping the future direction of NABP by participating in business sessions. It is during the business sessions that officers and members of the NABP Executive Committee are elected and resolutions are discussed and voted on. This year, members also approved an amendment to the NABP Constitution that streamlines the nomination process for open officer and open member positions on the NABP Executive Committee. Pursuant to the amendment, all individuals interested in becoming candidates for open officer positions must submit written notification no less than 45 days prior to the Annual Meeting instead of 60 days prior to the meeting. Nominations from the floor will no longer be accepted.

Individuals interested in becoming candidates for open member positions must now submit letters of intent and curricula vitae at least 20 days prior to the opening date of the district meeting to be considered for nomination on the district level. Upon nomination of candidates at the district level, districts must still submit written notification of the nominated candidates to the NABP executive director/secretary no less than 60 days prior to the Annual Meeting. In addition, an individual may still seek to become a candidate by submitting written notice after the district meeting, but they may do so no later than 45 days prior to the Annual Meeting.

The relevant text of the Constitution may be viewed in Article IV, Section 3 of the Constitution and Bylaws available on the NABP Web site at www.nabp.net, in the About Us section. Per the newsletter
105th Annual Meeting
(continued from page 1)

Constitution, the proposed amendment was originally read at the 104th Annual meeting, in Baltimore, MD, and then approved by the delegates this May.

Additionally, seven resolutions were adopted. The resolutions address such timely issues as national standards for pharmacy technician educational and training programs; electronic prescribing software standards and data storage; over-prescribing and excessive use of controlled substances and other prescription medications; valid patient-practitioner relationships; and national standards for prescription monitoring programs. Delegates also passed a resolution addressing the definition of the term administrative officer for the purposes of NABP governance. In addition, one recognition resolution was passed and one resolution calling for NABP to research the development of an ethics course for pharmacy licensees was defeated (see page 4).

Educational Sessions

Between business sessions, meeting attendees had the opportunity to earn up to 9.75 hours (0.975 CEUs) of Accreditation Council for Pharmacy Education (ACPE)-approved continuing pharmacy education (CPE) credit. This year’s pre-meeting CPE session “Maxims, Monarchy, and Sir Thomas More,” provided attendees with an interactive and entertaining approach to CPE. The Saturday, May 16 session took a close look at Sir Thomas More’s dilemmas as he explored moral conflicts between private conscience and public loyalty. Approximately 90 attendees participated in this engaging session. See page 6 for a closer look at the session.

In addition to the pre-meeting CPE, the Annual Meeting offered several other sessions with timely and relevant topics including Drug Enforcement Administration (DEA) federal controlled substance laws, patient counseling, compounding, electronic prescribing tools, and standardization of technician education. Likewise, the Educational Poster Session – “CQI on Fire” – once again provided attendees with the opportunity to obtain CPE credit. Adhering to the continuous quality improvement theme, representatives from four different schools and colleges of pharmacy presented their research results related to the practice of pharmacy as well as other noteworthy legislative issues, policy development, and disciplinary actions.

Programs and Events

Other meeting programs and events provided attendees with opportunities to network and share information. The Hospitality Brunch and Educational Table Top Displays, which were held in conjunction with the Educational Poster Session, offered attendees the chance to mingle and gain knowledge while enjoying a brunch buffet. Educational table displays by ACPE; DEA; Food and Drug Administration; LegitScript, LLC; NABP; Pearson VUE; the Pharmacy Technician Certification Board; and the United States Pharmacopeial (USP) Convention highlighted important issues and programs. In addition, members of the Florida Board of Pharmacy provided their insight on the must-see Miami sights.

Recently appointed state board of pharmacy members and those who were attending the Annual Meeting for the first time were encouraged to attend the Annual Meeting Orientation, which offered a look at the events taking place and at the procedures followed during the Annual Meeting as well as networking opportunities.

Other special events at the 105th Annual Meeting included the President’s Welcome Reception; the NABP/USP Breakfast; the Fun Run/Walk; the Magic City Tour; and the Annual Awards Dinner.
Delegates elected individuals to fill the president-elect, treasurer, and open member positions on the NABP 2009-2010 Executive Committee during the Association’s 105th Annual Meeting, held May 16-19, 2009, in Miami, FL.

The newly elected officers of the NABP Executive Committee are:
- President-elect William T. Winsley, MS, RPh, Ohio
- Treasurer Malcolm J. Broussard, RPh, Louisiana

Members elected to serve a three-year term on the NABP Executive Committee are:
- Joseph L. “Joe” Adams, RPh, Louisiana (District 6)
- Cathryn J. Lew, RPh, Oregon (District 7)

At the conclusion of the Annual Meeting, Gary A. Schnabel, RN, RPh, executive director of the Oregon State Board of Pharmacy, assumed the office of NABP president, and Rich Palombo, RPh, member of the New Jersey Board of Pharmacy, assumed the position of chairperson. In addition, the following members are continuing to fulfill their terms on the 2009-2010 NABP Executive Committee:
- Karen M. Ryle, MS, RPh, Massachusetts (District 1)
- Elizabeth Scott “Scotti” Russell, RPh, Virginia (District 2)
- Michael A. Burleson, RPh, Kentucky (District 3)

Abbreviated biographies for the officers and members of the Association’s 2009-2010 Executive Committee follow.

**Chairperson: Rich Palombo, RPh**

Rich Palombo, a member of the New Jersey Board of Pharmacy, automatically assumed the office of chairperson after completing his one-year term as president. Before serving as president, Palombo served a one-year term as the Association’s president-elect and a three-year member term on the NABP Executive Committee representing District 2. Palombo was reappointed to the New Jersey Board in 2007 and again in 2009; he also served on the Board from 1996 to 2005. He has served on many committees and task forces including the Committee on Law Enforcement/Legislation, and was the Executive Committee liaison for the Task Force on Continuous Quality Improvement, Peer Review, and Inspecting for Patient Safety and the Task Force on Emergency Preparedness, Response, and the US Drug Distribution System. Currently, he is senior director of regulatory affairs for Medco Health Solutions, Inc. Palombo holds a bachelor of science degree in pharmacy from Temple University School of Pharmacy.

**President: Gary A. Schnabel, RN, RPh**

Gary A. Schnabel, Oregon State Board of Pharmacy executive director, automatically assumed the office of president after completing a one-year term as president-elect. Prior to the election as president-elect, he served a one-year term as NABP treasurer and four years as a member of the Executive Committee representing District 7. An active member of NABP, Schnabel has participated in several committees including the Committee on Constitution and Bylaws and on task forces such as the Task Force on Active/Associate Membership. Schnabel was named executive director of the Oregon Board in 1999. Prior to that, he was the Board’s compliance director from 1994 to 1999. Schnabel also owned an independent pharmacy consulting practice from 1990 to 1995. He earned his bachelor of science degree in pharmacy from Oregon State University.

**President-elect: William T. Winsley, MS, RPh**

William T. Winsley, executive director of the Ohio State Board of Pharmacy, was elected to serve as president-elect. Prior to the election, he served one year as treasurer and a three-year member term representing District 4 on the NABP Executive Committee. Winsley also was a member of the NABP Executive Committee from 2001 to 2002. He has participated in many NABP task forces throughout the years, including the Task Force on Importation Enforcement, the Task Force on Limited Distribution and Shortage of Medications, and the Task Force on Privacy. Positions he held prior to joining the Board include assistant director of pharmacy at Akron City Hospital and assistant director of pharmacy and instructor at the West Virginia University.

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Delegates from the member boards of pharmacy adopted seven resolutions during the NABP 105th Annual Meeting, held May 16-19, 2009, in Miami, FL. The resolutions addressed such timely issues as national standards for pharmacy technician educational and training programs; electronic prescribing software standards and data storage; over-prescribing and excessive use of controlled substances and other prescription medications; valid patient-practitioner relationships; and national standards for prescription monitoring programs. In addition, delegates passed a resolution addressing the definition of the term administrative officer for the purposes of NABP governance. One recognition resolution was also passed.

Delegates defeated one resolution calling for NABP to research the development of an ethics course for pharmacists.

**Passed Resolutions**

**Resolution No. 105-1-09**

**Title:** Electronic Prescribing – Software Standards and Data Storage

**Whereas,** the electronic transmission of prescriptions and prescription data can improve the communication between pharmacists and other health care practitioners; and

**Whereas,** the use of electronic prescribing by practitioners is increasing and heralded as the future standard for the transmission of prescriptions and prescription data by some patient safety experts and government agencies; and

**Whereas,** the software and systems involved in the transmission of electronic prescriptions and prescription data vary from site to site and practitioner to practitioner; and

**Whereas,** the lack of uniformity and standardization has resulted in adverse outcomes for patients; and

**Whereas,** the technology defining and supporting the electronic transmission of prescriptions and prescription data allows for the safe storage and immediate retrieval of electronically stored prescriptions and prescription data;

Therefore Be It Resolved that NABP convene a task force of interested stakeholders to:

- evaluate the current regulatory and operational status of the electronic transmission of prescriptions and prescription data;
- develop standards for software and systems used in the electronic transmission of prescriptions and prescription data; and
- review the current requirements for the storage of hard copy prescriptions and electronically transmitted prescription data to determine whether alternative means can be used so as to eliminate the need to create and physically store hard copies of electronically transmitted prescription data.

**Resolution No. 105-2-09**

**Title:** Over-prescribing and Excessive Use of Controlled Substances and Other Prescription Medications

**Whereas,** state boards of pharmacy are aware...
that prescription medications, including controlled substances, are being over-prescribed and used excessively, contributing to access and abuse, particularly by children; and

Whereas, the over-prescribing and excessive use of prescription drugs compromises patient safety;

Therefore Be It Resolved that NABP continue its efforts through task forces and consumer awareness programs to address related issues such as medication disposal and consumer education concerning prescription drugs and abuse; and

Be It Further Resolved that NABP enlist the assistance of interested stakeholders to communicate the seriousness of this public health concern to patients and health care practitioners, urge prescribers to reduce the incidences of over-prescribing, and urge pharmacists to assist in reducing the excessive use of prescription medications.

Resolution No. 105-3-09
Title: Valid Patient-Practitioner Relationships

Whereas, NABP is aware of an increase in concern and actual deaths resulting from orders for prescription drugs being issued and dispensed without a valid patient-practitioner relationship; and

Whereas, data compiled by NABP and other groups indicate that the majority of Internet drug outlets violate state and federal laws and regulations by, including but not limited to, dispensing prescription medications without a valid patient-practitioner relationship based solely on online questionnaires or cyberspace consultations; and

Whereas, pharmacists are responsible for and assume a significant role in ensuring the safe and proper use of medications; and

Whereas, federal and state laws and regulations, as well as the US Drug Enforcement Administration (DEA), indicate that on an online consultation or questionnaire does not constitute a valid patient-practitioner relationship and any resultant prescription drug order is not legitimate; and

Whereas, the Model State Pharmacy Act and Model Rules of the National Association of Boards of Pharmacy (Model Act) currently contains language that reflects this concept, reading as follows:

"Prescription Drug Order" means a lawful order from a Practitioner for a Drug or Device for a specific patient, including orders derived from Collaborative Pharmacy Practice, where a valid Patient-Practitioner relationship exists, that is communicated to a Pharmacist in a licensed Pharmacy. "Valid Patient-Practitioner Relationship" means the following have been established:

(1) a Patient has a medical complaint;
(2) a medical history has been taken;
(3) a face-to-face physical examination adequate to establish the medical complaint has been performed by the prescribing practitioner or in the instances of telemedicine through telemedicine practice approved by the appropriate Practitioner Board; and
(4) some logical connection exists between the medical complaint, the medical history, and the physical examination and the Drug prescribed.

A valid patient-practitioner relationship includes a relationship with a consulting practitioner (continued on page 8)
The setting is a prison cell in the Tower of London. The year is 1535. It is the day of Sir Thomas More’s execution. This shadowy time and place set the stage for the pre-meeting continuing pharmacy education session held during the NABP 105th Annual Meeting to address potential conflicts of private conscience versus public loyalty as they pertain to the practice of pharmacy.

The program, “Maxims, Monarchy and Sir Thomas More,” takes its audience into the private musings of Sir Thomas More – lawyer, author, philosopher, statesman, and Chancellor of England under King Henry VIII. Regarding the King’s decision to divorce his wife and appoint himself head of the Church of England, More’s allegiance to the Catholic Church places him squarely between the proverbial rock and a hard place. More must choose between conflicting allegiances: his duty to his King (a choice that would sustain his political as well as his physical stature), and his fidelity to his own conscience (which would bring about his beheading). Unable to separate his personal integrity from his professional life, he chooses death.

Presented by Periaktos Productions, LLC, the presentation uses More’s struggle between self and state as a metaphor for similar moral dilemmas that professionals in many settings face today. Practitioners and regulators of pharmacy are bound by the laws of their state and the regulations of their profession. Yet issues of moral conscience arise every day to challenge those rules, which may not prescribe a clear-cut course of action appropriate to every situation, resulting in a gray area between right and wrong.

Participants Voice Controversy
Moderated by Malcolm J. Broussard, RPh, executive director of the Louisiana Board of Pharmacy and 2009-2010 NABP treasurer, discussion following the dramatization focused on the central issue of the play, ie, the conflict between individual conscience and the law of the land. Panelists leading the discussion were Jay Campbell, RPh, JD, executive director of the North Carolina Board of Pharmacy; and Michael A. Moné, BS, JD, FAPhA, vice president of anti-diversion and senior regulatory counsel for Cardinal Health.

One of the most pervasive and timely ethical issues pertaining to the practice of pharmacy concerns pharmacists’ right of conscience, ie, the right to refuse to dispense certain prescription drugs on the basis of their personal moral convictions. This issue has arisen recently in several states regarding patients’ rights to purchase oral contraceptives or emergency contraceptives (eg, Plan B®) versus pharmacists’ rights to refuse to dispense the drugs based on moral grounds.

Case in point, the panel asked participants to consider the Oregon State Board of Pharmacy laws and rules regarding moral and ethical objections, as revised in February 2007:
No provision exists within Oregon pharmacy laws or regulations that require a pharmacist to dispense every lawful prescription presented in a pharmacy. . . . Just as other health care professionals and practitioners in Oregon have a choice, so do pharmacists have a choice whether or not to participate in activities they find morally or ethically objectionable. Oregon pharmacists cannot, however, interfere with a patient’s lawfully and appropriately prescribed drug therapy. . . . The Board expects that pharmacy policies and procedures will ensure patients in Oregon always receive appropriate and lawfully prescribed medications and information . . . in a timely and professional manner and that patients are not burdened by the pharmacist’s individual belief.

Prompting discussion on the differences between objective (clinical) standards versus subjective (moral) standards, Moné posed the question, “What, then, is the basis for not dispensing a drug, if no law exists?”

Laws v Judgment in Professional Practice

Noting the ambiguity and conflict that practice situations can pose, one participant commented that when he started practicing pharmacy in the 1970s, “things were black and white. . . . I don’t see black and white anymore in the law; I see a lot of gray area.”

Much as Sir Thomas More found no clear resolution to his conundrum, Campbell pointed out, “there are no answers in any objective sense in dealing with conscience versus the law.”

Another participant noted that pharmacists are often too busy in their practice to obtain all of the information they need to make appropriate legal and ethical decisions, and that the laws could be more clearly written “so interpretation would be narrower.” He added, “Pharmacists should have the ability to make decisions and not worry so much about the consequences.”

“That is the hallmark of the conundrum: choice,” Moné observed. “Professionals make decisions and judgments based on the information available to them, and those choices have consequences. A black-and-white law takes away choice, and that is the antithesis of a profession.”

Others commented that introducing personal, non-clinical opinion into practice decisions is a slippery slope, as opinions differ on a wide range of pharmacological issues, such as the use of antibiotics and mood-enhancing drugs. Ultimately, one pharmacist noted, “the first rule is to take care of the patient.”

Another participant called into question the definition of a patient, and rhetorically asked at what point does a pharmacy patron become a patron? He noted that in the legal profession, attorneys can select the clients they will represent and that the determination of when someone actually becomes a client is more clear cut, and that perhaps the same discretion and determination should be allowed in the pharmacy profession.

‘Where is the Primacy of Your Duty?’

“The question becomes, as it did for Sir Thomas More, where is (continued on page 8)
the primacy of your duty – to yourself, or to the patient,” Campbell noted. He asked rhetorically whether it is appropriate for him as a pharmacist to expect patients to “bend to [his] will,” while excusing himself from any “inconvenience.”

Compounding the issue is the limited accessibility to pharmacies in some rural communities. “What if that’s the only pharmacy in town?” one participant said. “How much can you burden the patient?”

Opening with the position that “patients’ rights are primary,” another participant stated that, if pharmacists are to be given the option not to dispense certain drugs, the pharmacy must have a procedure in place to ensure that patients are provided with appropriate service. “You have to make those arrangements up front,” he said. “The patient has to have access to legally prescribed medications.”

Presenting another facet of the issue, Campbell countered with, “some would say, if I refer a patient, I am just as culpable as if I had dispensed the drug myself.” Another participant responded that pharmacists should consider these issues when choosing the setting in which they will work. “All settings may not work for every pharmacist,” he said.

Legislating Morality

The discussion then turned to whether the boards of pharmacy have an obligation in this matter. Noting that the states grant authority to medical practitioners to issue prescription drug orders, and that only licensed pharmacies are permitted to dispense those drugs, Moné posed the question, “Does the state have a responsibility for the pharmacy to fill that order?”

Regarding the state’s duty to balance the rights of all constituents, the panelists discussed whether granting pharmacists the option of refusing to dispense oral contraceptives constitutes discrimination against women; or, on the flip side, whether disallowing pharmacists’ right of conscience constitutes discrimination against individuals’ religious beliefs. The question brought the discussion full circle, to Sir Thomas More’s internal debate, “To which truth should I be true?”

The panelists noted that the boards’ responsibility in regard to this issue remains unclear and questions regarding the legislation of morality remain unanswered. Allowing the laws and regulations to remain gray may be the appropriate course of action for the boards, Campbell suggested. “Pharmacy is a profession. . . . We’re all highly educated folks capable of grappling with these issues.” As evidence of this conclusion, he noted that in respect to the frequency with which this issue likely arises in everyday practice, relatively few conflicts ensue “because pharmacists generally work it out. With rational discussion and good faith, it will work out.”

‘No Ready Resolutions’

Luckily for pharmacists today, beheading is no longer a potential consequence of choosing loyalty to one’s conscience over service to the public. Such conflicts, however, will surely continue to arise. “Perhaps there are no answers and certainly no ready resolutions to these moral and ethical questions,” Periaktos Productions muses in the course description, “but these issues cannot be ignored if individuals in any profession wish to maintain personal integrity, emotional health, spiritual balance and peace of mind.”

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Resolutions

(continued from page 5)

A face-to-face physical examination should not be required to establish a valid patient-practitioner relationship and legislative and regulatory language should indicate such;

**Therefore Be It Resolved** that the following language be added to the Model Act:

A face-to-face physical examination is not required to establish a valid patient-practitioner relationship and legislative and regulatory language should indicate such;

Graham Thatcher, MA, PhD, artistic director, Periaktos Productions, LLC, captivated attendees in his portrayal of Sir Thomas More’s moral dilemmas.
Resolutions
(continued from page 8)

The resolution reads as follows:

Resolutions
(continued from page 8)

er relationship if:
(a) the prescribing practitioner is issuing a prescription or dispensing a legend drug in accordance with expedited partner therapy in the management of sexually transmitted diseases guidance document issued by the United States Centers for Disease Control and Prevention; or
(b) the prescription, administration, or dispensing is through a public health clinic or other distribution mechanism approved by the state health authority in order to prevent, mitigate, or treat a pandemic illness, infectious disease outbreak, or intentional or accidental release of a biological, chemical, or radiological agent.

Be It Further Resolved that NABP urge its member jurisdictions to aggressively pursue pharmacists and pharmacies engaged in the distribution of prescription drugs without a valid patient-practitioner relationship in order to further protect the public health.

Resolution No. 105-4-09
Title: Defining “Administrative Officer”

Whereas, the term “administrative officer” is used in the NABP Constitution and Bylaws to broadly define the executive director or chief administrative officer or chief executive officer of a member board; and

Whereas, the need to clarify the definition of “administrative officer” has arisen; and

Whereas, the Model State Pharmacy Act and Model Rules of the National Association of Boards of Pharmacy (Model Act) recommends that every state board of pharmacy employ a permanent administrative official, an executive director who is a currently licensed pharmacist, to perform and supervise the administrative duties and functions for which the board is responsible on a day-to-day basis; and

Whereas, the Model Act recommends that the executive director be responsible for the performance of the administrative functions of the board and such other duties as the board may direct; and

Whereas, the Model Act recommends that the board of pharmacy may, at its discretion, employ persons, in addition to the executive director, in such other positions or capacities as it deems necessary to the proper conduct of board business and to the fulfillment of the board’s responsibilities;

Therefore Be It Resolved that the NABP Executive Committee develop and submit a proposed amendment to the Constitution and Bylaws to define the term “administrative officer” as the individual appointed or elected to serve as the chief administrative officer or executive director of a board of pharmacy and to further clarify that each board may have only one chief administrative officer/executive director within the governance of NABP.

Resolution No. 105-5-09
Title: Board of Pharmacy Approval of Pharmacy Technician Educational and Training Programs

Whereas, new pharmacy technician educational and training programs are being established in community colleges and trade schools across the country; and

Whereas, no standards are currently in place to guide the quality and appropriateness of the course curriculum for such programs; and

Whereas, state boards of pharmacy have a responsibility to oversee the training and practice of pharmacy technicians in the interest of the patient health and safety;

Therefore Be It Resolved that NABP commission a task force of interested stakeholders to review existing PMPs in light of the current language on PMPs found in the Model State Pharmacy Act and Model Rules of the National Association of Boards of Pharmacy (Model Act), identify for member boards where variations among programs exist, and encourage states to adopt language and standards to provide uniformity in the various PMP programs across the nation.

(continued on page 13)
Executive Committee (continued from page 3)

Medical Center College of Pharmacy. Winsley holds a bachelor of science degree in pharmacy and a master of science degree in hospital pharmacy administration from Ohio State University.

Treasurer: Malcolm J. Broussard, RPh

Malcolm J. Broussard, executive director of the Louisiana Board of Pharmacy, was elected to serve as treasurer. Prior to the election, he served a three-year member term representing District 6 on the Executive Committee. An active member of NABP as well as state and local professional associations, Broussard has served on the NABP Nominating Committee, Committee on Resolutions, and the Committee on Law Enforcement/Legislation. He is the secretary/treasurer of MALTA-GON, an organization of boards of pharmacy in Mississippi, Alabama, Louisiana, Tennessee, Arkansas, Georgia, Oklahoma, North Carolina, Florida, Kentucky, and South Carolina; a member of the Accreditation Council for Pharmacy Education’s Pharmacy Education Commission; as well as past president of the Louisiana Pharmacists Association and the Louisiana Society of Health-System Pharmacists. Broussard earned his bachelor of science degree in pharmacy from Xavier University of Louisiana.

Executive Committee Member: Karen M. Ryle, MS, RPh

Karen M. Ryle, of Massachusetts, is serving the third year of a three-year member term representing District 1. Ryle was re-elected to serve on the Executive Committee after serving a one-year member term from 2006 to 2007. An active member of NABP since she was appointed to the Board, Ryle has served as chairperson for both the Task Force to Develop Recommendations to Best Reduce Medication Errors in Community Pharmacy Practice and the Task Force on Telepharmacy and the Implementation of the Medicare Drug Benefit Medication Therapy Management Provisions. Currently, Ryle is the director of Outpatient Pharmacy Services at Massachusetts General Hospital. She earned both her bachelor of science degree in pharmacy and her master of science degree in drug regulatory affairs from Massachusetts College of Pharmacy and Health Sciences.

Executive Committee Member: Elizabeth Scott “Scotti” Russell, RPh

Elizabeth Scott “Scotti” Russell, executive director of the Virginia Board of Pharmacy, is serving the third year of a three-year member term, representing District 2, on the Executive Committee. An active member of NABP, Russell has served on many Association committees and task forces including the Task Force on Standardizing Student Pharmacist Experiential Requirements, the Task Force on E-Pedigree Requirements, and the Committee on Constitution and Bylaws. She was named executive director of the Virginia Board in 1991, after serving as pharmacy investigator/inspector since 1982. Prior to joining the Board, Russell served as a pharmacist in institutional and community practice settings. She graduated from the Medical College of Virginia/Virginia Commonwealth University with a bachelor of science degree in pharmacy.

Executive Committee Member: Michael A. Burleson, RPh

Michael A. Burleson, executive director of the Kentucky Board of Pharmacy, is serving the second year of a three-year member term, representing District 3 on the Executive Committee. Burleson has been an active member of NABP, serving on the Teller Committee at the NABP 103rd Annual Meeting and as the chairperson of the Committee on Resolutions during the NABP 102nd Annual Meeting. He was named executive director of the Kentucky Board in 2004. Prior to joining the Board, Burleson held positions such as pharmacy manager with Walgreen Co, director of pharmacy at Muhlenberg Community Hospital, staff pharmacist, and he was co-owner of three pharmacies. Burleson has received numerous awards including the Bowl of Hygeia in 1991. A graduate of the University of Kentucky College of Pharmacy, Burleson earned his bachelor of science degree in pharmacy.

Executive Committee Member: Gregory Braylock, Sr, RPh

Gregory Braylock, Sr, of Ohio, is serving the second year of a three-year member term, representing District 4 on the Executive Committee. An active member of NABP, Braylock served
on the NABP Committee on Law Enforcement/Legislation. He also served as a member of the Ohio State Board of Pharmacy from 2001 to 2009 and was the committee chairperson of the Ohio State Board of Pharmacy Rules Review in 2006. In addition, he is a member of the Ohio Pharmacists Association, and was the president of the Cleveland Chapter of the National Pharmaceutical Association from 2001 to 2004 and vice president from 1998 to 2001. Braylock is currently a pharmacy manager for Walgreen Co. Prior to this, Braylock held positions including pharmacy manager for Rite Aid and staff pharmacist for Walgreen Co. Braylock earned his bachelor of science degree in pharmacy from the University of Oregon.

Executive Committee Member: Lloyd K. Jessen, RPh, JD

Lloyd K. Jessen, executive director of the Iowa Board of Pharmacy, is serving the third year of a three-year member term representing District 5. He was re-elected to serve on the Executive Committee after serving a one-year term from 2006 to 2007. Jessen has been an active member of NABP, serving on the NABP Committee on Constitution and Bylaws from 2002 to 2004. He was also a member of NABP task forces including the Task Force on the Development of an Equitable Degree Upgrade Mechanism and the Task Force on Electronic Transmission of Data Between Prescriber and Pharmacist. Jessen received his bachelor of science degree in pharmacy from the South Dakota State University College of Pharmacy, and his doctor of jurisprudence degree from Drake University Law School.

Executive Committee Member: Joseph L. “Joe” Adams, RPh

Joseph L. “Joe” Adams was elected to serve a three-year member term, representing District 6. He has been a member of the Louisiana Board of Pharmacy since 2000. An active member of NABP and the Louisiana Board, Adams has served on the NABP Committee on Law Enforcement/Legislation and the NABP Task Force on Continuous Quality Improvement, Peer Review, and Inspecting for Patient Safety. As a member of the Louisiana Board, Adams is chairman of the Reinstatement Committee and a member of the Regulations Revision Committee and the Violations Committee. In addition, he is a pharmacy manager for Walgreen Co, where he is responsible for the entire operation of the pharmacy. Adams earned his bachelor of science degree in pharmacy from Xavier University of Louisiana.

Executive Committee Member: Cathryn J. Lew, RPh

Cathryn J. Lew, of Oregon, was re-elected to serve a three-year member term, representing District 7, on the Executive Committee. Lew has been an active member of NABP, serving on the Committee on Law Enforcement/Legislation and as Executive Committee liaison to the Task Force on TOEFL iBT Score Requirements. Lew also served as a member of the Oregon State Board of Pharmacy from 2001 to 2009. Currently, she is a clinical staff pharmacist at Sacred Home Infusion and Hospice, a position she has held since 1995. In addition, she serves as a pharmacy consultant at the Oregon Endoscopy Center and Northwest Center for Plastic Surgery. Previous positions she has held include serving as a pharmacist at the University of Oregon Student Health Center as well as staff pharmacist at Sacred Heart Medical Center, Salem Hospital – SHAPES. A graduate of Oregon State University, Lew earned a bachelor of science degree in pharmacy.

Executive Committee Member: Hal Wand, MBA, RPh

Hal Wand, executive director of the Arizona State Board of Pharmacy, is serving the second year of a three-year member term, representing District 8, on the Executive Committee. An active member of NABP, Wand participated in both meetings of the Task Force on Telepharmacy and the Implementation of the Medicare Drug Benefit Medication Therapy Management Provisions. In addition, he developed and reviewed questions for the NABP Multistate Pharmacy Jurisprudence Examination®. Wand began his career with the Arizona Board as a compliance officer in 1989 and then as a deputy director in 1994 before being named executive director in 2003. Prior to joining the Board, he worked as a hospital pharmacist, long-term care pharmacist, and community pharmacist. He earned his bachelor of science degree in pharmacy from the University of Arizona and his master in business administration degree from the University of Phoenix.
Award Recipients Honored for Demonstrating Unwavering Dedication to Protection of Public Health

During the 105th Annual Meeting Awards Dinner six individuals and one state board of pharmacy were recognized for their determination and dedication, supporting NABP’s continued efforts to assist the state boards of pharmacy in protecting the public health.

2009 Honorary President Award
Presented with the 2009 Honorary President Award, Lydia D. Main, RPh, member of the West Virginia Board of Pharmacy, was recognized for her strong commitment to the NABP mission and for providing exemplary service for, and on behalf of, NABP.

2008-2009 NABP President’s Award
Rich Palombo, RPh, 2009-2010 chairperson, NABP Executive Committee, was presented with the NABP President’s Award for his dedication, leadership and support of NABP as it developed new services to enable the Association to persist in its mission to protect public health.

2009 Fred T. Mahaffey Award
The Oregon State Board of Pharmacy was honored with the Fred T. Mahaffey Award in recognition of its exemplary service and dedication to NABP’s mission of protecting the public health. In July 2006, Oregon became the first state to adopt a rule requiring prescriptions for all pseudoephedrine products in an attempt to reduce the manufacture and abuse of methamphetamine across the state. Oregon Board member Bernie V. Foster accepted the award on behalf of the Board.

2009 John F. Atkinson Service Award
Tram Vu, PharmD, a drug agent for the Florida Department of Health, received the first ever John F. Atkinson Service Award. Since May 1997, Vu has assisted the Florida Board of Pharmacy in protecting the public health throughout her inspections of pharmacies in 22 counties.
Annual Meeting Highlights

2009 Lester E. Hosto Distinguished Service Award
For her exemplary service in protecting the public health and her significant involvement with NABP, Edith G. Goodmaster was presented with the Lester E. Hosto Distinguished Service Award. This award is the highest honor bestowed by NABP.

2009 Henry Cade Memorial Award
David Searle, RPh, director of pharmacy development for the Pfizer US Trade Group, and Walt Slijepcevich, RPh, director/team leader of pharmacy development for the Pfizer US Trade Group (not pictured), received the Henry Cade Memorial Award in recognition of their support of the goals and objectives of NABP and the state boards of pharmacy, as well as for advancing the safety and integrity of the distribution and dispensing of medications through numerous patient safety initiatives including the Internet Drug Outlet Identification program in 2008 and 2009, and support for board members to participate in the Annual Meeting.

Resolutions
(continued from page 9)

Resolution No. 105-7-09
Title: Recognition Resolution
Whereas, the individuals listed here have made significant contributions to NABP, the protection of the public health, and the profession of pharmacy:
- Eugene L. “Gene” Argo (GA)
- Jack B. Carson (VA)
- Thomas B. Landry (LA)
- Richard P. LeBlanc (LA)
- George Medich (MN)
- William H. “Bill” Randall (NC)
- H. Joseph Schutte (KY)
- Joseph J. Schwemin (OK)
Whereas, NABP and its member boards of pharmacy are saddened by the death of these individuals;
Therefore Be It Resolved that NABP and its members formally acknowledge the leadership and contributions made by these individuals; and
Be It Further Resolved that NABP and the boards of pharmacy extend their sincere sympathies to the family and friends of these members.

Defeated Resolution
Title: Researching the Development of an Ethics Course for Licensees
Whereas, often, through patient complaints and subsequent board investigations, incidents of unethical behavior are discovered; and
Whereas, such incidents may not technically be violations of state pharmacy statutes or rules; and
Whereas, in such situations, the board of pharmacy may not be able to take formal disciplinary action; and
Whereas, such incidents may nevertheless be a threat to patient safety; and
Whereas, an ethics “refresher” course could provide necessary information to pharmacists to avoid such incidents, and improve patient care and patient safety;
Therefore Be It Resolved that NABP review medical and legal ethics courses and evaluate the feasibility of developing such a course for pharmacy; and
Be It Further Resolved that NABP review and revise, if necessary, the Model State Pharmacy Act and Model Rules of the National Association of Boards of Pharmacy (Model Act) to require pharmacists to complete an ethics course as part of mandatory continuing education requirements. 

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Educational Table Displays Highlight Important Issues and Programs of Federal Regulatory Agencies and Other Organizations

DEA Highlights Mission to Prevent Drug Diversion
(Left) Drug Enforcement Administration (DEA) representatives Phyllis Garrett, diversion investigator, and Gayle Lane, diversion group supervisor, explain how DEA ensures that legitimately manufactured pharmaceutical drugs are maintained in proper channels and not diverted for illegal sale on the street.

USP Explains Standards
(Right) United States Pharmacopeial (USP) Convention representative Arline Bilbo, director, member and professional relations, offered her insight to Purdue Pharma LP representatives Ann Rule, director, medical liaisons, and Ann Harris, associate director, medical liaisons, on the USP standards set for all prescription and over-the-counter medications.

PTCB Describes Exam Process for Pharmacy Techs
(Left) Pharmacy Technician Certification Board representatives Ann Perry and Melissa Murer-Corrigan, RPh, executive director and CEO, share with an Ronald Guse, registrar, Manitoba Pharmaceutical Association, the process for pharmacy technician examination and recertification.
Educational Table Displays

Participants included:

- Accreditation Council for Pharmacy Education
- Drug Enforcement Administration
- Florida Board of Pharmacy
- Food and Drug Administration
- LegitScript, LLC
- NABP
- Pearson VUE
- Pharmacy Technician Certification Board
- United States Pharmacopeial Convention

NABP would like to thank the following pharmaceutical companies and organizations for their generous educational and unrestricted grants and event sponsorships that contributed to the success of the 105th Annual Meeting.

105th Annual Meeting sponsors providing educational/unrestricted grants are:

- Astellas Pharma US, Inc
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- Medco Health Solutions, Inc
- Omnicare, Inc
- Pearson VUE
- Pfizer Inc
- Purdue Pharma LP
- Rite Aid Corporation
- Teva Pharmaceuticals USA
- United States Pharmacopeial Convention
- Walgreen Co
- Wal-Mart Stores, Inc

Florida Board of Pharmacy members Carl Hayes, BPharm, and Michele Weizer, PharmD, provide Donald H. Williams, RPh, FASHP, 1999-2000 Honorary President, and his wife, Arda, with recommendations on their favorite Miami attractions during the Educational Table Top portion of the Annual Meeting.
Educational Sessions Tackle Regulatory Issues in Pharmacy Practice

Attendees had the opportunity to earn up to 9.75 contact hours (0.975 CEUs) of Accreditation Council for Pharmacy Education-approved continuing pharmacy education (CPE) credit during the NABP 105th Annual Meeting. The CPE sessions addressed timely and important issues regarding the regulation of pharmacy practice and were presented by leading experts in the pharmacy profession.

Exploring Ethical Dilemmas
(Left) The Saturday, May 16, 2009 pre-meeting CPE session “Maxims, Monarchy, and Sir Thomas More,” provided attendees with an adaptation of Sir Thomas More’s last hours before his execution as he explored his issues with private conscience versus public loyalty. A panel discussion on these ethical dilemmas followed the performance. Pictured left to right are session moderator Malcolm J. Broussard, RPh, 2009-2010 NABP treasurer; Graham Thatcher, MA, PhD, artistic director and primary performer, Periaktos Productions, LLC; session facilitator Jay Campbell, RPh, JD, executive director, North Carolina Board of Pharmacy; Anna Marie Thatcher, MA, JD, managing producer, Periaktos Productions, LLC; and session facilitator Michael A. Moné, BS, JD, FAPhA, vice president anti-diversion and senior regulatory counsel, Cardinal Health.

DEA Provides Update on Administration’s Priorities
(Right) During the Sunday, May 17, 2009 CPE session “DEA Update,” Drug Enforcement Administration (DEA) shared the current priorities of DEA including DEA’s plans for the disposal of controlled substances and the Ryan Haight Online Pharmacy Consumer Protection Act. Pictured left to right are session moderator Michael A. Burleson, RPh, member, NABP Executive Committee, and Joseph T. Rannazzisi, deputy assistant administrator, Office of Diversion Control, DEA.

Innovative Strategies in Patient Counseling
(Left) A professional facilitator led the discussion on innovative techniques to counsel patients during the Monday, May 18, 2009 session “Patient Counseling – Catch the Wave.” Attendees also heard from representatives from three different sectors of pharmacy, regulatory, academia, and corporate. Pictured left to right are Jay Campbell, RPh, JD, executive director, North Carolina Board of Pharmacy; session moderator Karen M. Ryle, MS, RPh, member, NABP Executive Committee; Neil J. MacKinnon, MS (Pharm), PhD, FCSHP, associate professor, pharmacy administration and associate director of research, Dalhousie University College of Pharmacy; session facilitator Jody Shields, BS, consultant, Align Organizational Development and Training; and Bruce Scott, MS, RPh, FASHP, chief pharmacist and senior vice president, Medco Health Solutions, Inc.
CPE PowerPoint Presentations Now Available Online

The PowerPoint presentations of most of the 105th Annual Meeting continuing pharmacy education sessions are available online at www.nabp.net under “Meetings.”

Sharing Perspectives on Compounding
(Right) Speakers shared current state regulations pertaining to compounding for physicians’ office use, including developments regarding the compounding of controlled substances, during the Tuesday, May 19, 2009 session “Compounding Inferno – For Office Use.” Pictured left to right are session moderator Cathryn J. Lew, RPh, member, NABP Executive Committee, Lisa D. Ashworth, RPh, clinical pharmacist, Children’s Medical Center Dallas, Center for Cancer and Blood Disorders; and Richard Sands, RPh, CPh, statewide pharmaceutical program manager, Florida Department of Health.

e-Tool Utilization, A Challenging Triumph?
(Left) On Tuesday, May 19, 2009, speakers presented both the problems related to e-prescribing software and possible benefits of using electronic inspection software during the session “e-Tools ‘Out of Hand!’” Pictured left to right are Steve Hart, RPh, inspections and investigations coordinator, Kentucky Board of Pharmacy; Joann Predina, MBA, RPh, compliance specialist, Ohio State Board of Pharmacy; and session moderator William T. Winsley, MS, RPh, 2009-2010 NABP president-elect.

Standardizing Technician Education
(Right) Speakers shared their views during the Tuesday, May 19 session “Standardization of Technician Education – Want it? Need it?” Pictured left to right are Kevin N. Nicholson, RPh, JD, vice president, pharmacy regulatory affairs, National Association of Chain Drug Stores; session moderator Hal Wand, MBA, RPh, member, NABP Executive Committee; Janet L. Teeters, RPh, MS, director, accreditation services division, American Society of Health-System Pharmacists; and Michael J. Rouse, BPharm (Hons), MPS, assistant executive director, international and professional affairs, Accreditation Council for Pharmacy Education.
105th Annual Meeting Educational Poster Session Offers Attendees Chance to Earn CPE Credit, Network with Fellow Members

Overcoming Medication Access Barriers
(Left) Faith Wentzel and Maari Loy, North Dakota State University College of Pharmacy, Nursing, and Allied Sciences PharmD candidates, discuss with an NABP member the pharmacist’s role in increasing medication access for HIV positive patients.

Improving Diabetic Care
(Right) David Anderson and Michael Peterson, both North Dakota State University College of Pharmacy, Nursing, and Allied Sciences PharmD candidates, discuss the importance of an insulin pump in diabetic care with Howard C. Anderson, Jr, RPh, executive director, North Dakota State Board of Pharmacy.

Educational Poster Session Presenters & Poster Titles

- Dalhousie University College of Pharmacy
  SafetyNET: Improving Medication Safety through Quality Management and Integrative IT
  Neil J. MacKinnon, MS (Pharm), PhD, FCSHP, Associate Professor, Pharmacy Administration and Associate Director of Research

- Idaho State University College of Pharmacy: Nicole Chopski, PharmD, Vice Chair, Idaho State Board of Pharmacy, was the credentialed advisor for the following poster presentation:
  Putting Out Fires at Idaho State University College of Pharmacy with CQI
  Carmen Medina, PharmD Candidate

- North Dakota State University (NDSU) College of Pharmacy, Nursing, and Allied Sciences: Rebecca Focken, PharmD, Assistant Professor, Department of Pharmacy Practice, NDSU, was the credentialed advisor for the following two poster presentations:
  Overcoming Medication Access Barriers to HIV Patients
  Maari Loy, PharmD Candidate

  The Insulin Pump to Improve Diabetic Care
  David Anderson, PharmD Candidate
  Michael Peterson, PharmD Candidate

- Nova Southeastern University College of Pharmacy
  Prescription Monitoring Programs and Their Effect on Drug Abuse and Diversion
  Jennifer Fass, PharmD, Clinical Assistant Professor, Department of Pharmacy Practice
Putting Out Fires
(Left) Carmen Medina, PharmD candidate, Idaho State University College of Pharmacy, shares with NABP Past President Franklin Z. Wickham results from a continuous quality improvement survey conducted in Idaho.

Medication SafetyNET
(Right) Neil J. MacKinnon, MS (Pharm), PhD, FCSHP, associate professor, pharmacy administration and associate director of research, Dalhousie University College of Pharmacy, explains to NABP members Bonnie J. Thom and Laurel A. Haroldson ways to improve medication safety through quality management and integrative information technology.

Curbing Drug Abuse and Diversion
(Left) Jennifer Fass, PharmD, clinical assistant professor, department of pharmacy practice, Nova Southeastern University College of Pharmacy describes prescription monitoring programs effect on drug abuse and diversion to NABP member Jawara Kasimu-Graham.
Annual Meeting Highlights

Future Vision of USP Discussed Over Breakfast

(Above) Roger Williams, MD, executive vice president and chief executive officer, United States Pharmacopeial (USP) Convention, explained USP’s strategic vision for the future, its role in the present and future pharmacy environment, and international drug standards during the NABP/USP Breakfast on Monday, May 18. The breakfast was moderated by Oren M. Peacock, Jr, RPh, 2008-2009 chairperson, NABP Executive Committee.

Awards Dinner Celebrates Members

(Above) 2009 Lester E. Hosto Distinguished Service Award recipient Edith G. Goodmaster, member, Connecticut Commission of Pharmacy, and Bryan H. Potter, NABP past president, had the chance to catch up during the Annual Awards Dinner, on Tuesday, May 19.

Keynote Speaker Provides Witty View on Current Politics

(Above) Former MSNBC Senior Campaign Correspondent Tucker Carlson, provided attendees with a candid and up-to-the moment look at current political headlines and events during the Annual Meeting Keynote Address on Sunday, May 17. Carlson announced that he had moved to Fox News just one day before speaking at the Annual Meeting.

Annual Meeting Orientation Unites Districts

(Left) Michael A. Burleson, RPh, member, NABP Executive Committee and other District 3 representatives network during the Annual Meeting Orientation, held Saturday, May 16. Recently appointed state board of pharmacy members and those attending the NABP Annual Meeting for the first time are encouraged to attend the Orientation, which provides a look at the events taking place and the procedures followed during the Annual Meeting.