

PHARMACY PHILE

University of Waterloo Society of Pharmacy Students
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PRESIDENT & VP'S MESSAGE

With July just around the corner, it's hard to believe that the term is coming to an end. This term has been a change for all of our students, with the recent transition of the library, and the stunning upgrade of the dispensary with neon green chairs that make the space warm and inviting. It has been a great term on campus, and students have been busy with all the great events held by all of our SOPhS clubs.

In May, we welcomed the Rx2020s and the Rx2019s back to classes after a well-deserved break. SOPhS started off the semester with the Beginning of Term Social, planned by the SOPhS social committee. The social was a mix of amazing food, familiar venue, and great company. It was a great way to enjoy a night off from studying, and was the first opportunity for the two classes to mix and mingle whilst starting some new friendships.

In June, students had the opportunity to attend two amazing conferences. The Canadian Pharmacists' Association (CPhA) Conference was held in the stunning Quebec City. The conference celebrated 400 years of pharmacy in Canada, and brought in olympic gold medalist Alexandre Bilodeau as the keynote speaker. Alexandre's speech was incredibly motivational with many laughs. He reminded us to never give up on our dreams (no matter how discouraging IPFC can be). There were a variety of topics covered in the conference ranging from opioids and pain management, to learning about recent guidelines in chronic disease management. It was wonderful to see so many faculty and students representing the University of Waterloo at the conference. Without a doubt, our faculty did an outstanding job of taking over the conference speaker panel! The Ontario Pharmacists' Association (OPA) held a conference towards the end of June with the theme of "Navigating the Future". Once again, it was fantastic to see so many Universi-

ty of Waterloo School of Pharmacy alumni, faculty, and current students participate in the conference.

The Rx2019 class also had their IPE Day, "HIPED," in collaboration with the McMaster Medical School. It was a wonderful experience to teach fellow future healthcare providers everything that encompasses the role of a pharmacist. The pride of being a pharmacy student could be felt with every interaction we had with the medical students.

Looking towards July, we are excited to see all of the events that our clubs and associations have organized. We are looking forward to our annual beach trip at Grand Bend, and our trip to Toronto to watch the Blue Jays Game! In addition to this, CAPSI will be having their annual OTC week featuring a trivia night on OTC products, Mock OSCEs, and a breakfast and learn with guest speaker, Dr. Nardine Nakhla. We'll be finishing off OTC Week with the "BREATHE to Block: Beach Volleyball Tournament", which is an annual summer event students look forward to.

We would like to end this account by thanking Melanie Sanderson and Kristina Kozlovsky's hard work and dedication over their term as President and Vice-President. We have large shoes to fill, but are so excited to embark on the journey as the next President and Vice-President.

*- Naushin Hooda and Pauline Bal
SOPhS President and VP*



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CAPSI CORNER

Where is our summer going!?! How has it been nearly two months since the beginning of term! I feel that most of us have been wondering the same thing lately, but not to worry because CAPSI has some exciting events in store for our members.

What better time to kick off OTC week than after a long weekend? On Monday July 3rd, we will start with the Social Media Challenge! Make sure you answer each day's question on social media for a chance to win an awesome prize.

On Tuesday July 4th, we will be hosing Trivia night at Taste at the Tannery (formerly The Firkin) at 6 PM. Sign-up and come out for free food, OTC themed trivia, and socializing. Plus it's kind of like studying... or at least that's what I'm telling myself J.

Next we are holding OTC Mock OSCE's in collaboration with the OSCE Prep Club on Wednesday July 5th. There are two sessions that start at 6:30 and again at 7:45 on the main floor of the pharmacy building. This event is especially important for the Rx2020's to practice and apply what you've learned in Professional Practice. Remember SCHOLAR/HAMS is always your friend!

While on the topic of SCHOLAR/HAMS, we come to the next day of OTC week for a breakfast and learn with the OTC Guru herself, Dr. Nakhla! She will be presenting on the topic of Cough and Cold on Thursday July 6th at 9:30 AM. So come out, grab some breakfast before class, and take in what I'm sure will be a very informative presentation!

After a week of fun-filled events, OTC week will come to an end on Friday July 7th. Remember to participate in the Social Media Challenge every day to be entered into a draw for a chance to win a prize! Good luck to all those who participate!

While OTC week may end on the Friday, the fun isn't over yet! Join CAPSI at our annual charity beach volleyball tournament on Sunday July 9th at Bobby O'Briens for some fun in the sun! This year's theme is *Breath* to Block and proceeds will be donated to *Breath*, an initiative by the lung association.



Lastly, take a look at pictures from last year; these are events you really don't want to miss! Hope everyone has a great remainder of their summer whether you are in school, on co-op, or finishing clinical rotations!

-Blake Houle,
UW CAPSI Junior Representative

OSCE Prep Club

Take the Next Step in Planning for the Future

As a second year Pharmacy student, counselling a patient for the first time in Professional Practice 3 was a very daunting experience. Despite having looked over the rubric and patient information handouts multiple times, I was still nervous about missing an important detail in my questioning, and making a mistake in front of my classmates.

In fact, as I later discovered on my first co-op rotation, counseling a patient on a new medication, or finding an appropriate product to resolve a minor ailment is a skill that takes a lot of practice; and this is exactly where OSCE Prep comes in!

Through organizing mock patient counselling events, OSCE Prep helps build students' confidence by giving them that extra practice they need to succeed both in the classroom, and on the PEBC. Furthermore, it helps students achieve this goal in a low-stress environment.

By mixing first-year and upper year students together, OSCE Prep not only lets the participants make new friends, but also encourages students to learn from their peers. First-year students are given the chance to observe and receive feedback from their upper year colleagues.

Meanwhile students in the final years of the program are given the chance to review first year material, in addition to practicing more advanced cases. OSCE Prep is truly a club that caters to all!

Being part of the event organizing team myself, I cannot overemphasize the benefits that this club has had on my confidence and experience. Putting together sample cases and "getting into the examiner's head" has helped me tremendously in terms of predicting what sorts of cases I might be faced with, and how to approach them.

For those of us who have never been in an OSCE situation before, attending a mock event can be very helpful in reducing anxiety and confusion when it comes time to perform for marks. The timing, transition between rooms, and bell ringer system are set up exactly the same way as a real OSCE, so you will know exactly what to expect when exam day comes!

Still nervous about your first OSCE, and not sure whether this club is right for you? Come check it out for yourselves at the next mock OSCE event! We hope to see you all there!

-Talia Priluka, Rx2019

CSHP

A Quick Overview of MedRec by Hospital Pharmacy Students

As pharmacy students, patient interaction is a key component in applying our clinical skills. We learned about SCHOLAR HAMS to probe patients, determine the acuity of their symptoms and educate on relief of minor ailments. However, the SCHOLAR HAMS approach becomes less applicable in the hospital practice. Nearly every patient presents with an acute need that has already been assessed by nurses and the emergency physician. Pharmacy students therefore play a vital role in Medication Reconciliation and help optimize and streamline the patient's drug therapies.

As we've covered in class and through UW CSHP's BPMH Workshop, interviewing the patient for a Best Possible Medication History is the major form of patient interaction in the hospital. Before meeting the patient, you compile the most recent medication list by calling the patient's community pharmacy and accessing the ODB Drug Profile Viewer (if the patient is eligible for coverage). You may also obtain a recent discharge medication list from the EMR.

It is also crucial to navigate through the patient's charts or EMR profile to gather a sense of why the patient is presenting to the hospital. By doing this, you can answer questions that the patient may have on current medication orders, and ask the patient about specific medications that may have contributed to their hospitalization. You should also access the preliminary admission note by the emergency physician who dictates on their vital signs, impression of the patient's presentation, and a tentative care plan. Later, the care plan may change along with the patient's status or when the patient is assessed again by other physicians (such as Consult orders).

Creating a Medication Reconciliation form essentially guides the audience (physicians, nurses) on the patient's medication use prior to admission, as well as your recommendations on changes to the current drug therapy. You should understand why certain home medications are held (for instance, if Ramipril was held due to AKI)

and question why others are not ordered (Is it a non-formulary drug? Can it be auto-subbed? If not, did the patient bring their own supply? Is it essential?) Lastly, you should check for drug interactions on any current drug orders and determine if the dose is effective for patient's weight, appropriate for renal/hepatic function, and if it is indicated for the patient's condition.

So those were just some details that a hospital student may need to consider. For me, interacting with the patient in the initial stage of the Medication Reconciliation process was the most meaningful and important. I think co-op at a hospital pharmacy is a great opportunity to gain clinical experience and it can be fun to work under pressure. But aside from that, it's also an amazing environment for personal growth. You're involved in a patient's care during their time of recovery, which is often a critical and sensitive moment in their life. It's a place to really lend your compassion by interacting with the patient, their family members, and close friends. That's what I appreciated the most about the work, and I am positive that many of you will find that too, significantly.

-Eunice Ku, UW CSHP



"... and, with the proper medication, they lived happily ever after."

PHRESH FROM THE PHARM



Summer Corn Salad

Ingredients:

- 6 corns
- 3 diced tomatoes
- 1 cup Dried tomatoes
- 1 large diced onion
- 1/4 cup chopped fresh basil
- 1/4 cup olive oil
- Salt & pepper to taste

Instructions

- 1) Boil a pot of slightly salted water
- 2) Cook corn in boiling water for 7-10 minutes.
- 3) Drain the water
- 4) Cool the corn
- 5) Cut kernels off of the cob with a knife
- 6) In a large bowl, toss the corn and all the other ingredients together
- 7) Chill the salad until serving

<http://allrecipes.com/recipe/25160/summer-corn-salad/?internalSource=staff%20pick&referringId=630&referr>

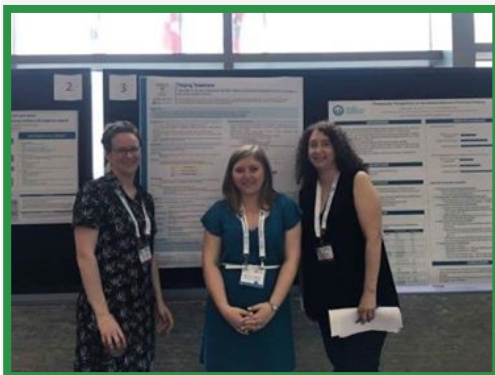
Student Researchers Present at CPhA and OPA

CPhA

I had the opportunity to give an oral podium presentation at the *Canadian Pharmacists Conference* in Quebec City. I worked on this project with Dr. Grindrod, Dr. Houle, and Dr. Edwards during co-op. We used the results from a recent *Ontario College of Pharmacists'* online public consultation about the proposed changes to pharmacists' injection scope to find out what pharmacists think about the changes and to anticipate any barriers to implementation.

I was excited when I heard that the abstract had been accepted - it's rewarding when your hard work is recognized. I was slightly unsettled when I realized that I would be presenting alone, but I didn't let it worry me since it was a few months away. The week before the conference, I ran through the presentation with a few professors and graduate students, which boosted my confidence.

The CPhA conference was fun! My presentation went smoothly, and I enjoyed it more than I expected to. I was glad to meet and learn from other professors and researchers. I was proud to be there as a UW student, as our professors were well represented among the speakers.



OPA + A Lesson:

Try Something New on Co-Op

Khrystine Waked and I presented our research posters at the *Ontario Pharmacists Association* conference in London. Khrystine is part of a nation-wide project with Dr. Grindrod, which studies how electronic health information is shared across patients, family physicians, and pharmacies. I presented a poster on disciplinary action for Canadian pharmacists, describing what pharmacists get in trouble for and the types of penalties applied. Both our projects were well-received; Khrystine particularly received a lot of interest from pharmacists working with Telus Health, as well as those involved in the integration of electronic health records in southwestern Ontario.

We are both completing our second research co-op, which is sometimes surprising to me because I didn't think I would enjoy research. Khrystine wanted to try research because she hadn't had the opportunity in her previous academic experience, and I stumbled into a co-op with Dr. Grindrod by chance. We both enjoyed it so much that we came back for a second placement and are looking forward to Independent Study projects in the upcoming academic semester.

Research is rewarding in a different way than direct patient care. It's exciting to work on projects that could have a wide impact - on systems and processes, rather than one patient. Improved patient care and better implementation of healthcare is still a focus, but it's interesting to tackle problems from the other end of the system.

These experiences are examples of how co-op can provide exciting opportunities if you are willing to try something new. We have both learned so much more than we thought we would. Our success in research and the opportunities we've had are a credit to our supervisors Kelly Grindrod and Sheryllyn Houle, who inspire us and push us to strive for excellence.

- Ai-Leng Foong, Rx2018

Maximizing the OPA Conference Experience

Having attended the last 3 OPA conferences, I have learned the value that such a conference brings to our pharmacy community. A conference is not just a bunch of learning sessions and some free food but rather a variety of opportunities for people of all backgrounds. Board members attend to network, pharmacy owners attend to look for more business opportunities, and pharmacists attend for the CE credits. Students, especially Waterloo students, have the greatest amount to gain from these conferences. After speaking to many recent grads and pharmacy owners, the general consensus is that the difference between Waterloo and U of T is simple; Waterloo students have more experience due to our co-ops, and U of T students have a wider network due to the larger class size and their longer history. U of T students know of these differences and so a lot of them are working the entire summer instead of their mandatory 160 hours. In order to stay competitive, we need to network more and increase our reach within the profession.

If networking is not your thing, the trade show displayed a lot of new products that will become staples in the industry in the near future. Just to name a few, the Contour Next One, Naloxone nasal spray, generic Epi-pens, and generic RestoraLAX all seem very relevant to me in a community setting. The trade show is a great way to see where the direction of our profession is going.

The OPA conference will surely still leave you educated, motivated and eager to do and be more. We all recognize the current state of the profession; do more with fewer resources and for less money. Pharmacies are becoming a commodity, where each pharmacy is interchangeable and not differentiable, hence, the constant pressure to push for online dispensing. Malls are closing down because online shopping is more convenient. We can't let that happen to our profession! This year at the OPA conference, a few of the sessions talked about how to sell value at a pharmacy and how value is more important to a patient than convenience. How you may ask? Attend next year's conference to find out, it may be the only thing that differentiates you, increasing your value! Finally, I want to leave you with a little food for thought. Price is what you pay, value is what you get, and money ALWAYS flows in the direction of value.

- Charles You, Rx2018

CO-OP CHRONICLE

Sonya Dhanjal, Rx2018

Institute of Safe Medication Practices Canada



Tell us about the roles and responsibilities you took on in your co-op placement?

My preceptor at Institute of Safe Medication Practices Canada (ISMP Canada) is Certina Ho. She is a project lead at ISMP Canada and the patient/safety medication course coordinator at UofT. Due to this, my work is split between work for ISMP and Certina's course.

My projects for ISMP vary based on what the landscape of pharmacy is. When I first started, I spent much of my time going through the Ontario College of Pharmacists (OCP) consultation on Continuous Quality Assurance to understand how different stakeholders feel about mandatory error reporting. Another major project that each co-op student at ISMP Canada completes is a Multi Incident Analysis (MIA). This involves gathering all the cases that fit your topic (mine is all harm incidents in Nova Scotia) and then grouping the incidents into themes and subthemes. From there, it's possible to determine contributing factors to the errors and recommendations to reduce the occurrence of these errors. If you're interested in viewing past MIAs, you can check them out on the ISMP Canada website.

For the patient/medication safety course I am working on transforming the course content into online modules so that the information can be available to other healthcare professionals/students.

Furthermore, I've also helped to write a couple of grant proposals. Summer-time is typically grant season, so this is a task that is fairly unique to summer co-ops.

What was the biggest lesson you learned from co-op

The biggest lessons that I've learned are the value of working through a process and getting input from others.

MIAs are intensive projects. Project based work can be difficult because it seems like you could keep working on your project forever to make it perfect. Fortunately, I received training for conducting MIAs through one of the workshops that ISMP provides. In this workshop, I learned the proper techniques and steps in conducting one correctly. Following the guidelines available can help you streamline your processes and make sure that you are on the right track.

At ISMP Canada, everyone works as a team. For example, every Tuesday we have a meeting to review incidents submitted through various databases. In these meetings, we discuss each individual incident to see what we want to do about the incident (i.e. write a bulletin, follow-up with the reporter, leave it for future reference). By working together we're able to get different perspectives and take the best course of action. You'll also notice multiple people review each other's work. This is important because since much of ISMP's work is published online it helps to make sure that what we're publishing for the public is the best that it can be.

What were some barriers or challenges that you encountered?

A challenge for me at ISMP Canada was getting used to sitting at a desk for most of the day. My last two co-op rotations were in a hospital. I did miss interacting with patients and utilizing my clinical knowledge. Now I don't mind it because I realize that I'm building a different set of skills that I likely couldn't build in other jobs. Through this coop experience I've become a better writer and improved my analysis skills.

What were some personal highlights?

Every time I complete a project is a personal highlight for me. As I said previously, much the work is project based. That means that I spend at least a week working on a project. Thus, it gives me a sense of accomplishment when I finish something.

I hope that at least one of my proposals gets accepted for funding. That would be a true highlight.

Does one day in particular stand out to you?

On Monday June 12, 2017 there was a quarterly OCP council meeting that I got to attend as a guest. This was an interesting experience. It was cool to hear about the future directions of the OCP.

A big chunk of time was spent discussing the position that OCP would like to take towards medicinal marijuana dispensing with the upcoming legalization of cannabis. Since the mission of the OCP is to "protect the public" it's thought-provoking to hear the difference in actions that truly protect the public and actions that advance/benefit pharmacies and pharmacists.

Any words of wisdom to fellow students?

I would advise fellow students to seek out a variety of co-op jobs. Co-op is the time to test out different fields of pharmacy so that you can have more direction about what you want to do by the time you graduate. I'm glad that I decided to join ISMP Canada. I've got to try my hand at a variety of projects that I never pictured myself doing.



Faculty Spotlight: Dr. Sherilyn Houle

Dr. Houle has been at the School of Pharmacy since 2014 and we thought it would be great for us students to get to know a little more about her.



Why did you decide to pursue research? Were there any life changing moments that pushed you towards this direction, or did it kind of just gradually happen?

I remember mentioning an interest in research when applying to pharmacy school, so I guess it has been on my mind for a while! What solidified it for me was becoming a prescriber (one of the first 50 pharmacists in Alberta, in 2009). I used it a lot, and saw the benefits it offered to patients. It concerned me that more pharmacists weren't embracing this opportunity and I wanted to know why not. I hoped that this research could help us provide necessary support to pharmacists, and collect evidence showing the value of pharmacist prescribing.

What has been your favourite research project thus far?

SH: The RxACTION study (published in *Circulation* in 2015) was the basis of my PhD, and was the first randomized controlled trial on pharmacist prescribing for patients with hypertension. I learned so much about research but, more importantly, I got to work with pharmacists from across Alberta as they adopted this new role. Some of them overcame inter-professional conflicts, and personal struggles with lack of confidence in their prescribing ability during the study. In the end, we had results to prove that pharmacists can achieve great blood pressure reductions when they prescribe for hypertensive patients, which I hope can translate to pharmacist prescribing being more widely adopted worldwide.

How do you feel about the difference in pharmacy practice between Alberta and Ontario?

It was great to have experience working with all of these opportunities available. But, being in the province pioneering a number of expanded scope activities also had its challenges. Other health professionals could be resistant because they were unsure of how it would affect patients and their own practices, the public wasn't always aware of our knowledge and skills, and when I was at my community pharmacy job I was the only pharmacist in the entire company with prescribing authorization. We didn't have any policies in place for how this would look, but I did it anyway when I saw the need to. When this expanded scope spreads across Canada, I think we'll be in a

stronger position to put it to use right away, since we can use Alberta's experience to minimize some of these barriers.

What is your teaching philosophy?

I try to make my teaching practical, and link lessons/concepts to real-life use. For example, knowing how to search the literature or critically appraise a study may seem like something only a researcher would need to know. But, when I was in practice, being able to find and read trials was a skill that paid off in spades. Patients and other health professionals really appreciate having someone help them make sense of the science (and pseudo-science!) out there.

What was your favourite class as a student? What (if any) was the most challenging and why?

My favorite class was our professional practice lab because it made me feel like all the challenging science I was learning had a purpose! My most challenging class was research and critical appraisal, and now it's a big part of my job! It frustrated me at the time because I wasn't confident I could get things right. Once I began to appreciate that research is also an art and doesn't always have a definite right/wrong answer, I actually started to enjoy the creative thought that goes into it.

If you weren't a pharmacist and professor, you would be...

A journalist, covering breaking news all around the world. I'm sure my family would hate it, though!

Any words of wisdom for students?

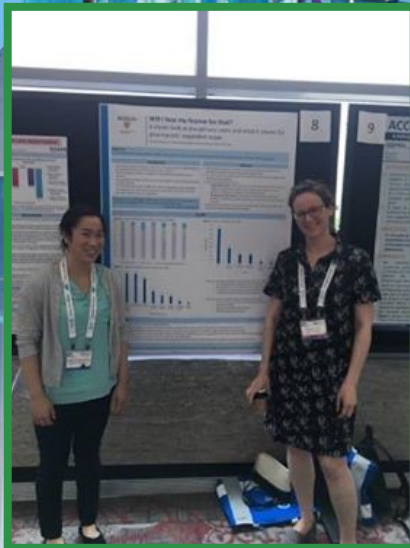
I remembered, as a young new grad, feeling so frustrated when people - even other pharmacists - assumed I couldn't be knowledgeable or capable simply because I was a new grad, and that it was wishful thinking to expect practice expansion to become a reality. It would have been easy to give in and accept things as they've always been done, but I'm very happy I chose to use that as a motivator instead. You are highly educated, capable, and ambitious. Use that to make yourself and your profession better, and improve care for your patients. Don't settle for anything less than your full potential, even if it means you need to switch jobs to find a supportive environment that allows you to truly make a difference.

Tell us a little bit about your pharmacy background - where did you earn your pharmacy degree? Aside from imparting knowledge to students at the School, where else do you currently practice pharmacy?

I received my pharmacy degree from the University of Saskatchewan in 2006, and practiced in hospital and home care settings before returning to school in 2009. Throughout grad school I practiced part-time in community pharmacy, and I defended my PhD in December 2013. Since coming to Ontario I have focused on my role as a professor (and mom to my young daughter), but I look forward to joining a travel and immunization clinic practice in the near future!

Where do you feel pharmacy has the biggest potential to make a clinical impact on the lives of patients?

SH: As a home care pharmacist, I provided care for many patients at the end of life, and when they had physical or medical conditions that made it hard to see their pharmacist or family physician. These patients may never interact with their pharmacist if someone else picks up their meds from the pharmacy for them. As a result, they are often not offered medication reviews and other valuable pharmacist interventions. People want to live at home as long as possible, and we can play a huge role in supporting that, if we reach out to see them.



SOPhS Communications

Have an opinion about our expanded scope of practice? Experience something on co-op that you'd like to share?

SOPhS encourages you to submit an article for the **Pharm Phile** newsletter! Submissions can be sent to pharmsoc@uwaterloo.ca by the end of every other month for inclusion in the next edition!

If you have any interest in becoming involved with the SOPhS Communications Committee please send an email our way! We are especially looking for individuals interested in helping out with the SOPhS website.

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Please check out the calendar on the next page, or the weekly SOPhS Updates, for information about all of our events. If you have an event coming up that you would like to inform students about, please submit an article for a SOPhS Update to pharmsoc@uwaterloo.ca.



Society of Pharmacy Students (SOPhS)

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SOPhS 6 WEEK CALENDAR

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Week 1	July 2	3	4	5	6	7	8
		CAPSI OTC WEEK					
Week 2	9	10	11	12	13	14	15
	CAPSI Volleyball Tournament		Pharmafacts	Mock OSCE	Brkfst & Learn BPMH Workshop	Blue Jays Game	SOPhS Beach Day UW CAPhO Light the Night
Week 3	16	17	18	19	20	21	22
		CSHP Dinner & Learn					RxPRN SafeTALK
Week 4	23	24	25	26	27	28	29
			Last Day of Class	Study Day	Study Day	PHARM111 Practical Exam PHARM223 Exam	
Week 5	30	31	August 1	2	3	4	5
		PHARM111 Theory Exam PHARM252 Exam	PHARM 229 OSCE	PHARM115 Exam	PHARM130 Exam PHARM229 Theory Exam	PHARM151 Exam	
Week 6	6	7	8	9	10	11	12
		CIVIC DAY	PHARM125 Exam	PHARM141 Exam			

SOPhS Calendar Notes

Please note that event dates may be subject to change. Contact SOPhS if you are unsure of an event date.

You may also find this information on the SOPhS Google Calendar (<http://tinyurl.com/jo3awk7>). It is our hope that this calendar will provide you with all of the event and deadline information you need during each term. If you would like to add an event to the SOPhS calendar please email the SOPhS Secretary at secretary@sophs.ca.