By: Karan Shah, Pharm.D. Candidate, 2016

For several years, participating in Rutgers Day health screenings with Ernest Mario School of Pharmacy meant refining my blood pressure measurement skills, educating patients on living healthy lifestyles, and essentially providing a service to the community. The experience of providing health screenings gave me a feeling of satisfaction for doing good for the community and an appreciation for needed services. I learned a lot just by interacting with patients. However, my most recent experience at Rutgers Day completely changed my perspective of what it means to be a health care provider.

I walked over to my booth that early Saturday morning, mentally prepared with a routine that resembled our grading rubrics from our various P3 classes: ask some questions, take a blood pressure reading, counsel about diet and exercise, etc. I was relatively comfortable with this process, as I had joined American Pharmacists Association (APhA) during my P1 year and had ample practice doing community outreach. My first patient encounter began with my usual routine as described. The morning was slow, so I decided to try something new and proceeded to prod the patient by asking more questions than I usually would.

The result was overwhelming. The patient opened up about his and his wife’s medical conditions, and all the questions regarding the medications. I was nowhere near prepared to spit back the information from multiple package inserts, and there was no way I could address everything without having my notes or an online database in front of me. However, I started tackling the easiest questions first, slowly working my way through the harder ones so that I had more time to think. I was nervous about the responses I was giving, until he started thanking me.

He told me that he’s never had someone sit down with him and counsel him the way I had. He explained how doctors always assumed he wouldn’t understand medical jargon, and would dismiss his questions after a brief, unsatisfactory response. He told me that pharmacists need to be more integrated as part of the health care team.

Isn’t this what pharmacists are advocating for? We are constantly trying to prove our utility as health care providers and lobby for increased responsibilities such as our recent right to immunize and to hopefully gain provider status. Sure, I hear about the value of our profession all the time from other pharmacists, but having a
patient verbalize them to me was completely different.

I ended up talking to this patient for almost an hour. In fact, in the end, a healthy patient rapport was established. Three weeks ago, I received an e-mail from him about how he was recently troubled with an unexpected emergency hospitalization and that he had some questions regarding his discharge medications. All I thought about was that if I had never opened up a conversation by simply asking a few more questions and taking some extra time, he may not have reached out to someone that he did not feel comfortable with. This experience taught me that counseling is more than just explaining how to take medications and informing patients of side effects.

It’s also about connecting with the patient, engaging them in their own care, making them feel comfortable during the encounter in order to establish good patient rapport. In pharmacy school, we are taught how to counsel, but are graded with rubrics and checklists. I always had a routine mapped out in my head of how to engage a patient, but I learned that it is not a one-size-fits-all approach. Each patient is unique, and must be approached as such.

My experience at Rutgers Day has given me a different perspective of patient care and further emphasizes what it means for me to be a pharmacist. I hope to apply what I’ve learned as I go on rotations and prefer that all students are able to gain similar experiences through patient interaction.

By: Ushmi Patel, Pharm.D. Candidate 2016

What was once simply a day to share our Rutgers Day tradition and education with the community around us became a day of applying our skills and giving back. Rutgers Day has become an invaluable learning experience for both the students and the members of our community. Our interaction with the Rutgers community reminds us of the importance of patient health education. Some examples of preventative care topics discussed were immunizations, diabetes, cardiovascular health and child safety. The educational session at the health fair is not a rushed visit in which both the pharmacist and the patient are faced with time constraints, but is rather a light-hearted environment conducive to learning and understanding.

As a co-chair for APhA’s Operation Healthy Heart and a member for the past three years, I have become highly aware of the cardiovascular health issues that plague the general population. Obstacles to healthier living faced by our local community are financially related. Many of these patients do not have adequate access to timely health care. Conditions such as hypertension, high cholesterol, diabetes and obesity are so prevalent in our society that the efforts to educate our community should become a priority. Furthermore, these medical conditions are silent killers so patients will not understand the extent to which their health is compromised, unless we educate them. At Rutgers Day, with APhA’s mini health fair, we’re able to shed light and get people to think about their health. We were also able to provide screenings for people who can’t afford a doctor’s visit. On Rutgers day, the patient interaction benefitted the students as well by providing a humbling service for the patients and connecting with them.

As a future healthcare professional, I have made it my mission to increase community awareness of preventable chronic conditions so that patients are made aware and seek medical care. It may appear on the surface that I simply took patients’ blood pressures on Rutgers Day, but what I really accomplished was educating each person on what those numbers meant. I had the opportunity to tell countless members of our community on why these numbers mattered and the importance of maintaining good health.

That one day, countless lives changed – including mine.
Trainees Share Latest Research Findings at Pharmacy Research Day

By Lauren Aleksunes, Pharm.D., Ph.D., Associate Professor  
Department of Pharmacology and Toxicology

On April 28th, the Ernest Mario School of Pharmacy hosted the 5th Annual Pharmacy Research Day on Busch Campus. Seventy research posters in the areas of Basic, Clinical, Translation-  

dustry Fellowship participated in the event. Over 200 people attended the event and included incoming Pharm.D. students, colleagues across the Rutgers Biomedical Health Sciences, and partners from the local pharmaceutical industry. Attendees learned about the exciting and innovative research that is being conducted by the next generation of Rutgers pharmacists and pharmaceutical scientists.  

More information about this annual event can be obtained at -  
https://pharm.rutgers.edu/content/pharmacy_research_day

Presenter Ian Berman discussing his research project

Have an idea for a future newsletter item or have a question you would like addressed in a future issue?  
Email Tim Reilly at tjreilly@pharmacy.rutgers.edu. We are always looking for new ideas!
Save the Date!
Preceptor Development Continuing Education Program
April 20th, 2015

Important Dates for the 2015-2016 Academic Year

Cycle 4: 9/7/2015 – 10/9/2015
Cycle 5: 10/12/2015 – 11/13/2015
Cycle 6: 11/16/2015-12/18/2015

ASHP Midyear Clinical Meeting December 6th – 10th
*Cycle 6 rotation will end on Dec. 23rd for students that have attained permission from preceptor for the allocated 3 days off to attend the ASHP Midyear Meeting

Winter Break is OFF Dec. 18th to Jan. 4th
Winter Break is OFF Dec. 24th to Jan. 5th if taking 3 days off for Midyear Meeting


On site EMSOP PREP Week of March 14th-18th
Spring Break for P4 Students: March 21st - 25th


*Holidays: Students are instructed to have personal discussion with preceptor on scheduling & are not to assume they are NOT to report to rotation site on specific holiday date
Henry J. Austin Health Center (HJAHC) is the greater Trenton area’s only Federally Qualified Health Center (FQHC), delivering care through four different locations. The clinic offers a variety of integrated services, including adult, family, and pediatric medicine, gynecological and women’s health services, HIV care, dental care, and mental, behavioral and social services. The clinic houses an onsite pharmacy, and clinical pharmacy services were introduced to the clinic in August 2014 by clinical assistant professor Caitlin McCarthy, PharmD. The services are part of a grant-funded project to assess the impact of adding a pharmacist to the healthcare team in a FQHC. In order to provide insight into the student’s experience, Yasmine Elbaga and Bivin George, two students who completed APPEs at HJAHC were interviewed.

**Q: What was your relationship with the providers and the patients?**

YE: Most recommendations were made verbally and implemented during the visit with the patient. If the provider wanted to initiate new therapy, we discussed options within drug classes, and I would make sure there were no drug interactions with existing medications.

BG: One of the unique things about pharmacists is that we are very visible to the community. Some patients may be uncomfortable talking to a physician, but are very open to talking to their pharmacist for their healthcare needs; I believe this is especially true when working with an underserved population.

**Q: Can you discuss a direct patient care experience from your rotation?**

YE: One woman in particular stands out. She had frequent asthma exacerbations. While obtaining her history, she mentioned that she carried around a nebulizer to take her albuterol. When we asked why she didn’t use her MDI, she told us she didn’t know how to use it and wasn’t comfortable with it. In addition, she didn’t understand that she had another inhaler for maintenance. I counseled the patient about her inhalers and proper inhaler technique. I truly felt like I made a difference in her life: her quality of life and asthma symptoms improved dramatically.

**Q: You will be beginning a PGY-1 acute care residency soon. In what ways will your ambulatory care (AC) experience affect your transition into an inpatient pharmacy residency position?**

YE: Though my interest is acute care, this rotation will help me become a better clinician. No matter how well the patient is treated in the hospital, if the patient doesn’t have regular primary care follow-up after discharge, they are more likely to be hospitalized again. This experience taught me that inpatient and outpatient care are not mutually exclusive, and it is important to keep outpatient care in mind while treating patients in the hospital.

**Q: How did this experience impact your goals for the future?**

BG: This rotation site reminded me why I initially chose pharmacy as a career: to develop relationships with patients. At HJAHC, I was able to do that, and I really felt that I was making a difference in the lives of my patients. I would like to work in a clinic similar to this one in the future.

**Q: Your preceptor was heavily involved with a randomized controlled clinical trial. How did this affect your experience?**

A: Research was the backbone of the HJAHC efforts and played a vital role in how we treated patients and assessed their response to treatment. While I sometimes would have liked to modify the protocol to provide the same care to all patients, I believe this research is vital in order to show the benefits of having a team approach in clinics. I know pharmacists have so much to offer; the research will hopefully validate this and more clinics like HJAHC open.

**Q: After completing your rotation, what insight can you provide to students intending to complete rotations working with an urban, underserved patient population?**

A: It will be a great experience for you to learn so much: not only academically, but also socially. You will learn things like what intensity statin you a patient needs, but also about the difficulties of compliance when you are a single parent taking care of your mom, in addition to your child.