Ten years ago under the direction of Dr. Don Stansloski, the College of Pharmacy at The University of Findlay was founded with a vision to create a program that would continue to evolve with a changing profession. Students at UF build a strong foundation in a competitive field that’s gone from just dispensing medications behind the scenes to more and more one-on-one patient consultation. UF graduates are tackling this changing field from every angle. Abigail Clark, Pharm.D. ’13 is working in one of four pediatric oncology residencies for pharmacists in the country. Kyle Dresbach, Pharm.D. ’14, who joined the Air Force upon graduation, is considered a “credentialed provider,” a designation that civilian pharmacists are still pursuing through legislative efforts. Splitting her time between her ambulatory care practice at Blanchard Valley Medical Associates and offering real-world hands-on experience as an assistant professor at Findlay, Suzanne Lifer, Pharm.D. ’13 sees the pharmacy field changing every day. And recent graduate, Lauren Eichstadt, Pharm.D. ’15 will be a part of adding veterinary pharmacy to the curriculum for future pharmacists.
DEBRA PARKER, PHARM.D.
DEAN, COLLEGE OF PHARMACY
Parker Excited about Expanding Role of Pharmacists

by Barbara Lockard M’02

“I’m excited. This is the closest we’ve come to getting pharmacists recognized by Medicare as providers of important health care services (beyond dispensing medication),” said Debra Parker, Pharm.D., new dean of the College of Pharmacy.

Parker was referring to proposed federal legislation that would allow pharmacists to be reimbursed by Medicare for their services.

“In the past, pharmacists have really been left out and not considered providers, while other health care fields were included,” added Parker. “For this reason pharmacists’ services aren’t covered, even though involving them has shown time and time again to cut health care costs and positively affect patient care.”

Parker asserts that it’s not an effort to add another type of prescriber to the landscape, but to add a health care provider with the most training in medications—one that can critically analyze the most effective and least costly ways to treat patients when it comes to medications. Many times it’s better for a patient to take fewer medications.

“Pharmacists are actually the most highly trained and qualified professionals in health care when it comes to medication management,” she explains.

Colleges of pharmacy must be ready to meet the educational requirements of the expanded role of pharmacists. Beginning with the 2016-2017 academic year, pharmacy curriculum must include interaction with students in the other health professions. This has to be more robust than just scheduling a guest lecturer from another college. Students must actually work together and learn the aspects of other professions.

“Pharmacy is the first health care field to have this mandate,” added Parker. “Our challenge is to find a way to do this as seamlessly as possible when it comes to working with the other health profession programs and their curricula. Everyone involved will see the benefits and be better prepared to enter health care as a team player.”

Parker believes that designing courses incorporating this collaboration is a top priority for her and her staff in the coming year. They will visit Roosevelt University in Chicago along with faculty from the College of Health Professions to observe Roosevelt’s model of collaborative learning.

The new dean can speak from experience when it comes to working on a health care team. In addition to her role at UF, she maintains a clinical practice with St. Rita’s Health Management Group in Lima, Ohio, where she works collaboratively with a multi-disciplinary group of health professionals to provide patients with medication therapy management services.

“Even though we’re still working with legislators, we’ve come a long way as a profession,” Parker muses. “Pharmacists can now give immunizations to those age seven and older. This has really opened up access to immunizations and made it more convenient for adults and children to receive them.”

The University of Findlay selected Parker as its dean of the College of Pharmacy in late March 2015. She had been serving as the College’s interim dean since July 2014. Her selection followed a national search, after the retirement of Dr. Stansloski.

Prior to her appointment as interim dean, Parker had served as an associate professor of pharmacy practice since 2006 and as chair of the Pharmacy Practice Department since 2009. Her experience in practice as well as teaching make her well positioned to lead the College of Pharmacy into a changing and challenging future.

With pharmacy headed in the direction of more patient interaction, will the College be looking for a different type of student? “I think the changes occurring in the field of pharmacy have caused us to look more at interpersonal and communication skills,” says Parker. “The students who apply to the program are changing, too. Traditionally, our Myers Briggs scores were overwhelmingly ‘introvert.’ I think that’s changed. We’re getting more outgoing and social students.”

Founded Dean’s Scholarship

When Dr. Stansloski, who retired in 2014, founded the College of Pharmacy 10 years ago, he looked at programs at other institutions and chose the best parts to incorporate into the high-quality educational opportunity UF students experience today. Consider making a gift to the College of Pharmacy Founding Dean’s Scholarship Endowment Fund in honor of his impact on the program. This new scholarship will support fifth or sixth year pharmacy students who demonstrate leadership on campus, in professional organizations and in the community. Give online at give.findlay.edu or call 419-434-5184.
SUZANNE LIFER,
PHARM.D. ’13

by Caitlin Paynich

“It’s not just pill pushing and dispensing anymore,” says Dr. Suzanne Lifer, who earned her Doctor of Pharmacy degree from UF in 2013. Lifer sees the pharmacy field changing every day: “It’s really moving towards counseling and medication therapy management. Doctors are relying on us more and more to help make decisions. I can see the potential in the future for pharmacists to help physicians even more extensively, especially with the shortage of primary care doctors.”

In her ambulatory care practice at Blanchard Valley Medical Associates, Lifer’s work is very hands on: “I love it. I love the patient interaction and the trust and responsibility I receive from the physicians at the practice. We don’t do any dispensing; it’s mainly monitoring and education.” Lifer works directly with patients as a clinical pharmacist. Doctors refer patients to her, and she works with them to manage their dosage of high-risk medications that require close monitoring. “Not only are we telling them about the medication, but we also have the ability to adjust doses and order laboratory work,” explains Lifer.

Most frequently, she works with cardiologists who place patients in the anticoagulation clinic to monitor medications like Coumadin and Lovenox, both medications that thin the blood, when patients have clots or an irregular heart rhythm that puts them at risk for stroke. She also works with patients with heart failure to manage medications and help with diet and lifestyle changes and patients on medications that keep their heart in rhythm through their pharmacist-run antiarrhythmic clinic. “Patients on these medications need a ton of lab-work, chest X-rays, and other tests,” says Lifer. “Cardiologists rely on us to order and evaluate test results and then make the adjustments needed based on how the body is responding to the medications. The patient is still seeing the doctor every three to six months for heart failure for example, but we can see patients a lot more frequently, work to keep them out of the hospital, and discharge them back to the physician if they are compliant and doing well.”

Her work as a clinical pharmacist began when her professors at Findlay urged her to consider a post-graduate residency. “In my fourth year of pharmacy school, I really started to make connections with faculty members and develop a real understanding for drugs and how they work in the body. We did a lot of hands-on simulations and practiced counseling. Faculty, members of the community, or people with non-medical backgrounds would act as patients and give us that real-life experience that’s really valuable.” She chose a residency program with an emphasis in ambulatory care at Blanchard Valley Medical Associates that morphed into the position she has today.

In addition to her ambulatory care practice, Lifer has returned to The University of Findlay to serve as the College of Pharmacy’s first shared faculty member. She splits her time each week and brings her unique experience into the classroom as an assistant professor of pharmacy practice. She teaches students in their fourth year of the program as part of the cardiology and endocrine modules as well as the capstone course for fifth year students to prepare them for advanced pharmacy practice experience rotations in different aspects of the field during their sixth year. “Both of my parents are teachers, so it was ingrained in me, and I knew I wanted to teach eventually,” says Lifer. “I can definitely bring back real-world experience to the students in my teaching because I’m teaching the same topics and skills I’m using when I interact with patients. This position is really the best of both worlds for me.”
The Expanding Role of Military Pharmacists:

Captain Kyle Dresbach, Pharm.D. ’14

by Barbara Lockard M’02

For Kyle Dresbach, Pharm.D. ’14, the summer of 2014 was a whirlwind of career activity that made him appreciate his mentors and instructors in The University of Findlay’s College of Pharmacy. “I graduated, took my boards, then went right to Commissioned Officers Training for five weeks in Montgomery, Alabama,” recalls Dresbach. “I finished training on Friday and went to work as the pharmacist in charge at McConnell Air Force Base in Wichita, Kansas, on Monday.”

One week after starting work, Dresbach found himself the only active duty pharmacist on base. The recent graduate was managing a civilian pharmacist, several technicians and about 30 volunteers. “It was really intimidating at first,” says Dresbach. “Now that I’m more than six months in, however, I’m getting a better grasp on my role in the pharmacy.”

Dresbach feels his one-on-one time with UF professors gave him the confidence and skills needed for this steep learning curve. He added a special “shout out” to Professor William Ruse, his instructor for Pharmacy Administration. Ruse encouraged him to think about administration as a career focus and also to expand his knowledge of pharmacy and business practices.

It took Dresbach until his third year at UF to decide to join the U.S. Air Force upon graduation. Campus organizations had brought in different branches of the service to talk with students in the College of Health Professions and the College of Pharmacy. The offer was appealing. Apply for a scholarship and, if selected, the Air Force would pay the remainder of his tuition in exchange for a three-year commitment to serve. “Currently, the scholarship program is the only way to join the Air Force as a pharmacist,” he added. Dresbach credits the Air Force with increasing his “breadth” of knowledge. He feels he’s sharpened his decision-making skills and readiness training has given him the confidence to make decisions quickly when necessary.

The Air Force pharmacist and his wife, Katie (Wilburn ’13), an occupational therapist in a local school system, stay busy in Wichita, but both have strong family ties to Ohio. He is from Chillicothe and she hails from Bellevue. They reflect often on their lives in Ohio and their time at The University of Findlay. There is still a familial tie to the University, as Katie’s brother, Ryan Wilburn, is currently a business major and plays on the golf team.

In his role in the Air Force, Dresbach is considered a “credentialed provider,” a designation that civilian pharmacists are still pursuing through legislative efforts. He oversees a Coumadin clinic and smoking cessation program and provides diabetic education. He feels the military has provided the opportunity to expand his role as a pharmacist when it comes to medication management and improving his patient’s health. He would definitely encourage other students to consider pharmacy as a career with one caveat: “I recommend that anyone interested in majoring in pharmacy do some shadowing during high school. It’s a great profession, but it’s six years of hard work. You really need to be sure it’s what you want to do.”

He also encourages future pharmacy students to work toward a dual Pharm.D./MBA, or combine the pharmacy major with UF’s health informatics graduate program: “Students should pursue anything that will set them apart. Management positions are still readily available in many settings.”

Donning the White Coat: A Commitment to Patient Care

Since the program began 10 years ago, nearly 200 alumni have donned their white coats at a ceremony representing a commitment to excellence in providing compassionate patient care. Third-year pharmacy students have the opportunity to choose a mentor to present them with their white coat.

As part of Homecoming and Family Weekend, Oct. 16 through 17, 2015, the College of Pharmacy celebrates its 10th anniversary. Continuing the tradition, third-year pharmacy students will be welcomed to the profession with a white coat ceremony Friday at 6 p.m. with a reception to follow for students, parents, and alumni at Winebrenner Theological Seminary. “As part of the celebration, we invite alumni to participate as mentors and make a lasting connection with current students,” says Associate Professor Sandra Earle, Pharm.D. If you’re interested in being a mentor contact Earle at earle@findlay.edu.

Homecoming and Family Weekend will also include several events that allow alumni to reconnect with their classmates from The University of Findlay. Events will include open houses with the colleges; a family carnival with food, games, inflatables, and fireworks; the Oilers football game; and the Alumni Association Breakfast honoring distinguished alumni and award winners.
Building Relationships and Balance:

Abigail Clark, Pharm.D. ’13
by Caitlin Paynich

“When patients come back for follow up and see me, their faces light up because I’m that familiar face that they get to see,” says Dr. Abigail Clark who is completing her second year residency at Memorial Sloan Kettering Cancer Center in New York City. Her position is one of only four pediatric oncology residencies for pharmacists in the country, and U.S. News & World Report ranks Memorial Sloan Kettering the number one hospital for cancer care in the nation.

“The University of Findlay really set me up for two phenomenal residency experiences,” says Clark who completed her first year of residency in pediatrics on a more general level at Cincinnati Children’s Hospital Medical Center. “My professors encouraged me to complete publishable research and give poster presentations as a student, and it made a difference. The structure of the classes and the way they were taught really emphasized critical thinking, and my supervisors have told me that I’m ahead of past residents. I’ve achieved all my goals, and I felt really well prepared throughout this experience. I knew I wanted to find a pediatric oncology residency, and I’m honored and grateful for this opportunity.”

At Memorial Sloan Kettering, Clark has been able to explore East Coast medicine, learning to understand different cultures and treatment techniques. Some of their patients are Orthodox Jews who observe Shabbat restrictions like turning electricity on and off or in this case being at home with their families on Shabbat even though they have cancer. “It’s pushed me to be a better practitioner,” says Clark. “Working with them has changed my view of treatment and allowed me to recognize there are different ways to treat different people.” Clark works with patients and their parents to make sure they understand the medications and how to manage side effects. Additionally, she acts as the medication expert when she and the other doctors round on patients in the morning and leads lectures educating medical residents about the different drugs and their effects on the body. “Attendings look to me to answer any questions that come up about medication,” says Clark. Further, she explains that under New York law, while pharmacists can’t initiate therapy, they can modify and discontinue therapy as needed. “More and more practices are collaborating with pharmacists to provide counseling and monitoring of treatment,” says Clark, and she sees a continuing trend of pharmacists becoming a part of inpatient and outpatient settings as the profession continues to evolve.

Clark first became interested in pharmacy through her interest in teaching. “Pharmacists are teaching people all the time,” says Clark. Being a pharmacist incorporates her love for science, teaching, and kids. “Working with children who have cancer can be difficult, but for me it’s about the relationships I’m able to build with patients.” Clark developed her skills in building relationships as a mentor to younger students while working as a resident director at UF. “I helped them to make the transition from high school to college and was highly involved in resident life programming. It taught me to keep a balance between managing my studies as a pharmacy student and acting as a guiding force to residents regardless of major.” These are skills she’s found useful now as she’s managing an 80-hour work week in her role as a pediatric oncology resident. Though she’s enjoyed her experiences in New York, once her residency completes she’s excited to start a new position in pediatric oncology and bone marrow transplant at Cincinnati Children’s Hospital Medical Center where she completed her first residency.
A Horse of a Different Color...
Blazing Trails in Veterinary Pharmacy:

Lauren R. Eichstadt, Pharm.D. ’15

by Caitlin Paynich

“I have definitely taken a different route than most pharmacy students,” says Dr. Lauren Eichstadt who graduated from the College of Pharmacy this spring. While at Findlay, Eichstadt divided her time between the pharmacy labs and the equestrian farms, a combination of experiences that led her to develop a passion for veterinary pharmacy. “With human medications, usually there are a number of clinical trials and other research that guide the treatment. What makes veterinary pharmacy interesting to me,” says Eichstadt, “is there are so many species of animals and disease states that we’re digging into any information that’s available whether it’s how the drug works in humans or animals and synthesizing that information to come up with a recommendation for treatment.”

In her time at UF, Eichstadt made the most of her experience in both areas. She rode on the Western IHSA (Intercollegiate Horse Show Association) team and served as a graduate intern instructor at the English Equestrian farm, working with Jill Paxton, director of equestrian studies and equine management, to build curriculum. Her experience created a path that led the equestrian program to develop a dual degree program that allows doctor of pharmacy candidates to earn an associate’s degree in equine studies. “It’s a different mindset, and I really enjoyed being able to work with equine students and instructors.” She’s been showing quarter horses for many years, and in 2011 she won the Farnam All-Around Amateur title at the American Quarter Horse Association world championships, a prestigious title that along with her other accomplishments earned her a place in Sports Illustrated’s Faces in the Crowd, a regular feature highlighting standout amateur athletes.

Growing up working with horses and with both her parents working as veterinarians, Eichstadt was highly exposed to the nature of working with animals. In studying veterinary pharmacy, “I can be part of that world and still find something unique to my own interests,” she explains. “Unlike human doctors, veterinarians are able to dispense many medications on their own, but it’s not cost effective for them to keep some medications in stock so they send their patients’ owners to community pharmacists. Some medications are only used for animals, but the majority of veterinary medications are human medications that are being used in animals.”

With pharmacists being asked to fill scripts for animals, Eichstadt sees an opportunity to expose pharmacy students to veterinary medicine as part of their training. “Right now veterinary pharmacy isn’t part of the pharmacy board exam, but community and retail pharmacists are being asked to fill prescriptions for dogs, cats and other animals. As this continues it will have to become a part of the boards and the curriculum, and I’m hoping to be a part of that.” This summer she will be the first clinical veterinary pharmacy resident at Purdue University through their College of Pharmacy and College of Veterinary Medicine.

“There are only a couple spots like this in the country, so I’m really grateful to be a part of their program,” she says. “I’ll be able to observe and offer recommendations in different sections of the veterinary program including dermatology and oncology. Part of my role will be to start developing a veterinary pharmacy elective for their pharmacy students.”
Human genome sequencing, the emergence of AIDS, direct-to-consumer pharmaceutical advertising proliferation—changes such as these have profoundly altered healthcare, as evidenced by the thickness and thoroughness of a recent textbook that two professors at The University of Findlay helped write.

The 5th edition of “Drug Information: A Guide for Pharmacists” was published by McGraw-Hill in April, and is one of the most widely-used textbooks in pharmacy curricula. It is co-authored by Patrick Malone, Pharm.D., FASHP, the University’s associate dean of internal affairs and professor of pharmacy practice; John Stanovich, R.Ph., assistant dean, external programs at the University; Malone’s daughter, Meghan Malone, Pharm.D. ’11, BCPS, CACP, BCACP, a UF alumna and clinical pharmacist for Geisinger Health System in State College, Pennsylvania; and Karen Kier, Ph.D., MSc, BCPS, BCACP, director of assessment and professor of clinical pharmacy at Ohio Northern University.

Malone said when the first edition came out in 1996, there was only one other like it on the market, and it had last been printed in 1976. “Drug information was relatively new back in the 1980s and 1990s,” said Malone.

But what does the phrase “drug information” mean, exactly? Malone said it addresses a pharmacist’s multifaceted skills that range from effective communication to proper information research to evaluation of information quality. Along with dispensing drugs, pharmacists, as their roles extend outside of the clinical realm, are now considered “information specialists” who must take into account variables such as how drugs could interact with other drugs, whether they should be administered in the first place, and whether they are cost effective. The decisions that some pharmacists, particularly those who aren’t even stationed in pharmacies, now make have the potential to affect millions, said Malone.

“It’s about finding, evaluating and managing the information you need regarding drugs and pharmacy,” Malone explained. “It’s about knowing the function of drugs, the dosages, the side effects. It’s about how you set up certain services in a pharmacy, and how you compound or prepare a drug.” Overall, it’s about making sound determinations for individuals, hospitals, insurance companies and the like, and clearly conveying those decisions verbally and in writing for various audiences.

“There’s an art to this, and that’s the extraction of information,” said Malone. You might think you can name the proper dose of ibuprofen to give to a 5-year-old, but who is the patient? Does he have any allergies? Is he on other medications that might adversely react?”

“There’s a lot of literature out there that’s garbage,” said Stanovich. “You’re relying on someone else’s word, so you have to find out if they’ve conducted proper studies, followed scientific methods, done statistical analyses.” Pharmacists, like doctors, must contend with patients who are misinformed. He cited the erroneous connection between autism and immunizations as an example.

With each edition, the book’s content has mirrored the pharmacy field itself. The first edition contained only one page about Internet searches. The latest edition is infused throughout with how best to use technology and has grown to 1,344 pages total. “Certain things don’t change. The latest chapter on statistics is very similar,” said Malone. “Other things have changed tremendously,” which is to be expected, he said. After all, health professionals years ago had touted the health benefits of cigarettes.

“I don’t know that the pharmacy practice has changed so much recently, but what we have are better tools in the way of technology and therapy. Drugs are more targeted for specific diseases,” said Stanovich. The care scope is wider now, but quality and outcomes have improved, he thinks.
Not Just “Counting Pills,” Pharmacists are Involved and Interested

by Barbara Lockard M’02

“I tell my students that once they graduate, they can’t afford to just practice pharmacy. They need to be involved and to stand up for their profession,” said Tonya Dauterman, Pharm.D.

At The University of Findlay, this involvement starts early. Dauterman, assistant professor of pharmacy practice and director of experiential education, travels with fifth-year pharmacy students annually to Student Legislative Day in Columbus. Sponsored by the Ohio Pharmacy Association (OPA), it’s a day when future pharmacists can meet with government officials to advocate for issues that will impact their careers.

On March 24, 2015, Dauterman, Greg Reardon, associate professor of pharmacy practice and 45 students left Findlay at 7 a.m. headed for Columbus. Arriving at the state capitol at 9 a.m., they joined pharmacy students from other Ohio universities in a two-hour briefing session. The group had a visit from the Ohio Speaker of the House during lunch, and then started their advocacy journey.

Since Findlay is located within the districts of Sen. Cliff Hite, R-Findlay, and Rep. Robert Sprague, R-Findlay, the two elected officials conducted a large group meeting with the UF students. Students from other parts of Ohio met with representatives of their home districts. It was a full day.

“I don’t believe that anyone cancelled, which is unusual for such a large number of meetings,” added Dauterman. “One student was so impressed by the opportunity to meet with her representative and be an actual advocate that she told me she might consider getting a law degree. Another fifth-year pharmacy student from the Dayton area met with Representative Niraj Antani, R-Miami Township, who is just 23-years-old. Seeing someone close to his own age as an elected official really made an impact.”

“Politicians seem to be very pharmacy-friendly now,” said Dauterman. “They realize that pharmacists are involved in issues concerning drug abuse, medication management, safety and even economics. Many of our students, for example, will be working in areas that don’t fit our stereotyped image of a pharmacist.”

Dauterman recalled some recent graduates who are now working in areas that would not have existed ten years ago when the UF Pharmacy program began.

“We have a graduate who has accepted a residency position working in veterinary pharmacy, and two who are employed by Renaissance Rx, a company that is involved in personalized medicine and pharmacogenomics (the study of genetics in drug response.)”

The trip to Legislative Day is one way that UF pharmacy faculty is expanding the knowledge and skills of their students. With the role of pharmacists changing, UF is looking for students who not only have science and math skills, but the “soft” skills needed for patient care and consultation.

“I think we’ve always sought out those types of students,” added Dauterman. “From the beginning, we’ve known the future of pharmacy, and have looked for the skills and personalities that fit what the future will demand.”

Hot Issues Affecting the Pharmacy Profession

Each year, at Student Legislative Day, the Ohio Pharmacy Association encourages future pharmacists to advocate for certain issues that will positively affect the profession.

**HB 4: Naloxone Dispensing** – This bill authorizes a pharmacist or pharmacy intern to dispense naloxone, a drug used to counter opioid effects, without a prescription to a person at risk of an opioid-related overdose. OPA believes that in addition to being the most accessible health care professionals in the community, pharmacists are well qualified for the task of combatting overdose deaths in the State of Ohio.

**HB 116: Medication Synchronization** – This would better enable patients who take multiple medications to manage their drug regimen, allowing them to get their medications filled at the pharmacy on the same day. OPA believes that it is in the best interest of patients to have their medications synchronized. Synchronization increases adherence, which results in decreased hospitalizations.

**HB 127: Pharmacy Benefit Managers (PBM) Regulation & Pricing** – OPA is working with Reps. Tim Brown, R-Bowling Green, and Jack Cera, D-Bellaire, on House Bill 127, which will create drug pricing transparency and help reduce gross underpayments to pharmacies. This legislation would finally create a regulatory structure for PBMs, and put them under the Ohio Department of Insurance.

**Consult Agreement Changes** – As some pharmacists practice managing patient’s medication doses in a physician’s office under consulting agreements, new legislation is being re-introduced to eliminate many of the hurdles and red tape associated with many current consult agreements. This legislation would allow physicians and patients to utilize a pharmacist’s pharmacological expertise (with legal ease) to manage the drug therapy of a patient or patients with a chronic illness.

**Limited Pharmacy Networks** – Pharmacies have been raising concerns about being left out of medically managed organizations’ pharmacy networks without being given the opportunity to participate. OPA believes that patients should be able to use the pharmacy that they know and trust most and that any public program should be prohibited from excluding pharmacies from participation.