Dear <<First Name>> <<Last Name>>

The HPS newsletters take us on an annual tour of developments in the WHO regions. This newsletter is dedicated to the Pan American region. We can read about a wonderful showcase of the development of advanced pharmaceutical practices in Costa Rica. Advancement of any organisation requires individual advancement too. The ASHP highlights their Certificate programs for International pharmacist to help this development for pharmacists around the globe. These programs shows how a strong and well led National organisation facilitates circumstances for continuous advancement of practice at all levels. I would like to thank Ms Myrella Roy for her outstanding leadership and achievements as CEO of the Canadian Society of Hospital Pharmacists and welcome Jody Ciufo as her successor. The global hospital pharmacy community is looking forward to collaborating with Jody in advancing practice.

Kind regards,
Rob Moss

Rob Moss, FIP HPS President

Content

- Advanced pharmaceutical practices in a private Hospital in San Jose, Costa Rica
- New CEO for the Canadian Society of Hospital Pharmacists (CSHP)
- ASHP Develops Certificate Programs for International Pharmacists
- FIP HPS Research Grant
Advanced pharmaceutical practices in a private Hospital in San Jose, Costa Rica

More than 10 years have passed since I started my career as a hospital pharmacist and several things have changed related to how pharmacy is practiced within our setting and around my country. Basic tasks were performed in our pharmacy department, such as reviewing the prescription, checking doses, labeling and dispensing. There were also community pharmacy duties, since our pharmacy provides both inpatient and outpatient needs, such as dispensing, patient counseling and education.

During that time, the Hospital Administration encouraged the whole organization to follow a new track on quality and patient safety related issues, therefore we were motivated to implement more advanced practices in all fields. For instance, most IV preparations were prepared at the nurse units, but after our pharmacy was remodeled, we began having a sterile area to perform such tasks. With practice change, we saw the need to train our pharmacists not only in drug preparations, but also in being part of the inpatient nutritional team as well. After a recent pharmacy remodeling, we also included an area to prepare chemotherapy, along with a special training for our staff.

Read more
The Hospital Pharmacy Section of FIP extends best wishes to Myrella Roy, who recently retired from her position as Executive Director of the Canadian Society of Hospital Pharmacists (CSHP) at the end of December 2018. Ms Roy served as Executive Director of CSHP for 15 years as part of a long and distinguished career in pharmacy. During her career, she led the clinical pharmacy program at The Ottawa Hospital and held faculty positions at Université de Montréal, Université Laval, and Université Claude Bernard in Lyon, France. She has been honored for her exemplary service by many organizations, including CSHP’s Distinguished Service Award, and the University of Cincinnati College of Pharmacy Robert J. DeSalvo Distinguished Alumni Award. Ms Roy was named Fellow by the American College of Clinical Pharmacy and holds honorary memberships with the American Society of Health-System Pharmacists (ASHP) and the Mexican Association of Hospital Pharmacists.

Following Myrella Roy’s retirement, Jody Ciufo was appointed Chief Executive Officer beginning in January 2019. According to a statement released by CSHP, Ms Ciufo says she is, “committed to work that serves the public good and drives systemic change across the country. The work of CSHP is integral to the best possible patient care through the advancement of safe, effective medication use in hospitals and beyond. I’m inspired by what the Society has achieved and honoured to be chosen to lead this respected organization.” Ms. Ciufo is an experienced association leader, and will be responsible for the successful leadership and management of CSHP. For more information about CSHP and contact information, please visit: [https://www.cshp.ca/](https://www.cshp.ca/).

John B. Hertig, PharmD, MS, CPPS
Vice-President of the Americas, FIP HPS

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**ASHP Develops Certificate Programs for International Pharmacists**

The American Society of Health-System Pharmacists (ASHP) maintains a collection of professional development programs for pharmacists practicing in the United States and around the world. Included in this collection is [The Clinical Skills Certificate for International Pharmacy](https://www.ashp.org), designed to enhance the skills and knowledge of pharmacists who practice in hospitals outside of the United States. This certificate program features a series of modules that teaches fundamental concepts of patient-centered clinical skills. The curriculum covers core principles of clinical pharmacy practice and patient care roles for pharmacists, encompassing the range from pharmacists’ role as caregivers and in transitions of care to clinical topics like infectious diseases, neurological disorders and pain management, and diabetes pharmacotherapy.

*The Clinical Skills Certificate for International Pharmacy* joins ASHP’s [professional development certificate collection](https://www.ashp.org), which also includes certificate programs in pain management, pharmacogenomics, medication safety, sterile product preparation (both beginning and advanced), informatics, and teaching. Programs use a diverse set of learning and assessment strategies, including lectures and reading material, practice exercises, case studies, and submitted projects and documentation. Each of these
Caroline Myers  
American Society of Health-System Pharmacists

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**FIP HPS Research Grant**

The FIP HPS is proud of the research that our members are involved in and are pleased to open the FIP HPS Research Grant again to support such initiatives. In light of the release of the revised Basel Statements in 2015, the FIP HPS is opening up the FIP HPS Research Grant to FIP HPS members for research that focuses on the implementation of the revised Basel Statements. In particular, research focusing on seamless care, medication safety or interprofessional collaboration will be given priority. The grant will fund a project of up to €3000 (EUR).

The application guide and form for this grant can be downloaded at: [https://goo.gl/uvnDh9](https://goo.gl/uvnDh9)

Applications forms must be submitted to rebekah.moles@sydney.edu.au by 30th April 2019.

For additional information, please contact rebekah.moles@sydney.edu.au

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**WHoPReC news: Utilizing intravenous pump infusion data to optimize continuous infusion concentrations and to reduce drug and fluid waste**

**Objective:** To outline a data-driven analysis utilizing intravenous (IV) pump data to identify optimal IV drug and fluid amounts for various continuous infusions. With the primary goal of minimizing medication waste, this methodology incorporates recommendations arising from analyzing vial sizes, fluid rate, number of bag exchanges, and bag volumes. This data is used to determine optimal concentrations that improve operational efficiencies and decrease drug and fluid waste.

**Design:** Retrospective evaluation of IV infusion pump utilization data for continuous infusions.

**Setting:** Data was provided by nine hospitals in North Carolina during January, April, and June of 2015.

**Patients:** Data from a total of 13,688 IV infusions of norepinephrine, phenylephrine, vasopressin, and cisatracurium.
Interventions: None.

Measurements and Main Results: This study evaluated Recommendations were determined using a novel, evidence-based four-step analysis, the VERB analysis (Vial, Exchange, Rate, and Bag), which applied optimal practices for cost reduction, operational efficiency, and patient safety. Each element of the VERB analysis was comprehensively assessed to determine the final recommendation for the bag size and concentration in order to maintain patient safety while decreasing drug and fluid waste. The application of the VERB analysis to the IV infusion pump utilization data resulted in the following recommended medication concentrations: norepinephrine 4 mg/100 mL (40 mcg/mL) and 16 mg/250 mL (64 mcg/mL), phenylephrine 10 mg/100 mL (100 mcg/mL), vasopressin 20 units/100 mL (0.2 units/mL), and cisatracurium 200 mg/100 mL (2 mg/mL). The potential implementation of the recommended concentrations is associated with significant medication cost savings and fluid volume savings in these 9 hospitals.

Conclusion: Analyzing IV infusion pump data from multiple hospitals using the VERB analysis results in standardized, evidence-based medication concentrations and bag sizes for continuous infusions that reduce drug waste, fluid waste, and improve operational efficiencies.

Authors: Charlotte M. Forshay, Kevin N. Hansen, Stephen F. Eckel

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From the HPS Webinar Library …

From Nov 2018:
**Clostridium difficile infection management and outcomes: considerations in a resource-limited setting**

From Jun 2018:
**Challenges of nanomedicine follow-on products: from regulatory to formulary selection**

From Jun 2018:
**Do it right for your patient: advantages and considerations associated with nanomedicines**

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**Begin with small steps to transform outcomes**

Transforming outcomes: where to begin? With small steps, participants were told during the plenary session at the World Congress of Pharmacy and Pharmaceutical Sciences in Glasgow, UK. Small steps by individuals lead to changes in local, then regional, then national policy. “And there you have it: transformation,” said Catherine Duggan, chief
executive officer of the International Pharmaceutical Federation. Dr Duggan was one of four speakers who addressed the challenges of "changing science, practice and education outcomes for the better". She was joined by: Jim Campbell, director of the Health Workforce Department at the World Health Organization (WHO), UK; Nicola Gray, of NCD Child, Illinois, US; and Sofia Crisostomo, of the Portuguese Treatment Activist Group. Read more in the latest edition of International Pharmacy Journal

Pharmacy “AMAZONIFIED”: What could it mean?

Forget what you know about pharmacy. This is a slogan on the website of PillPack, the online pharmacy in the USA that Amazon reportedly bought for USD 1bn in June, just five years after it was co-founded by pharmacist T.J. Parker. Marianne Ivey, immediate past president of FIP’s Hospital Pharmacy Section, believes. “Because these companies have a combined one million employees and because they are well known to already have changed how we acquire goods, invest and handle our money, their intended mission to decrease healthcare costs by providing their million employees with health care in a different way is seen as a credible possibility. . . . Questions include what current processes will be eliminated or dramatically changed along with which jobs will be changed.” Read more in the latest edition of International Pharmacy Journal

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The HPS is very grateful to these sponsors for their support of section activities. In addition to corporate sponsors, many national and regional pharmacy organizations have provided financial and in-kind support of the activities of the FIP Hospital Pharmacy Section. We gratefully recognize these contributors:

The Japanese Society of Hospital Pharmacists
About the Hospital Pharmacy Section

Founded in 1957, the FIP Hospital Pharmacy Section focuses on education, communication, and improving the practice of pharmacy in hospitals around the world.