

NDPhA Board of Directors

NDPhA President

Harvey Hanel
1918 S Grandview Lane
Bismarck ND 58503
Phone: (701) 328-7222
E-Mail: hmhanel@bis.midco.net

NDPhA President Elect

Kim Essler
Chase Pharmacy
PO Box 1206
Garrison, ND 58540-1206
Work Phone: (701) 463-2242
Fax: (701) 463-2311
E-Mail runodak@restel.net

NDPhA Vice President

**Community Practice Academy
President**
Dan Churchill
Churchill Pharmacy
1190 W Turnpike Ave Ste. 2
Bismarck, ND 58501
Phone: (701) 223-1656
E-Mail: danchurchill@bis.midco.net

NDPhA Board Chairman

Wanda Roden
519 22nd Ave N
Fargo, ND 58103
Cell: (701) 388-0821
Home: (701) 232-2347
Email: wrnodak@earthlink.net

District 1 Officer

Ramona Sorenson
Elbowoods Memorial Health
Center Pharmacy
1058 College Drive
New Town, ND 58763
Phone: (701) 627-7624
E-mail: Ramona.Sorenson@ihs.gov

District 2 Officer

Carolyn Bodell
Trinity Hospital Pharmacy
Minot, ND 58701
Phone: (701) 838-2933
E-mail: jbodell@min.midco.net

District 3 Officer

Zach Marty
Quentin Burdick Memorial
Health Care
1300 Hospital Loop
Belcourt ND 58316
Phone: (701) 477-8426
E-Mail: zmarty@gmail.com;
zachary.marty@ihs.gov

District 4 Officer

Tim Carlson
3825 Clearview Cir
Grand Forks, ND 58201
Phone: (701) 795-3498
E-mail: tcarlson@thriftywhite.com

District 5 Officer

Scott Frank, PharmD
ND Pharmacy West
1283 Roughrider Blvd
Dickinson, ND 58601
Phone: (701) 483-0724
E-Mail: scottmfrank@hotmail.com

District 6 Officer

Tom Uhde
3101 Stonewall Dr
Bismarck, ND 58503
Phone: (701) 223-1656
Email: tuhde@hotmail.com

District 7 Officer

John Fugleberg
The Medicine Shoppe Jamestown
701 1st Ave S
Valley City, ND 58072
Phone: (701) 252-3002
E-Mail: 0545@medicineshoppe.com

District 8 Officer

Elizabeth Skoy
NDSU School of Pharmacy
Fargo
Phone: (701) 231-7497
E-Mail: elizabeth.skoy@ndsu.edu

NAPT Academy Chairperson

Diane Halvorson
Employer: Vibra Hospital, Fargo
Work#: 701-451-6632
Email: dhalvorsonphtech@gmail.com

ExOfficios

Executive Vice President

Michael Schwab
NDPhA
1641 Capitol Way
Bismarck, ND 58501
Phone: (701) 258-4968
Fax: (701) 258-9312
E-Mail: mschwab@nodakpharmacy.net

NDSCS Pharmacy Tech Program

Barbara Lacher
NDSCS Pharmacy Tech Department
800 N 6 St
Wahpeton, ND 58076
Phone: (701) 671-2114
E-Mail: Barbara.Lacher@ndscs.edu

NDPSC President

David Olig
Southpointe Pharmacy
2400 S 32 Ave
Fargo, ND 58103
Phone: (701) 234-9912
E-Mail: davidjolog@gmail.com

BOP Executive Director

Mark Hardy
ND State Board of Pharmacy
1906 E Broadway Ave
PO Box 1354
Bismarck, ND 58501
Phone: (701) 328-9535
E-Mail: mhardy@btinet.net

NDSU School of Pharmacy

Charles Peterson
PO Box 6050 Dept 2650
Fargo, ND 58108-6050
Phone: (701) 231-7609
E-Mail: Charles.Peterson@ndsu.edu

NDSHP President

Erik Christenson
Heart of America Medical Center
Rugby, ND
E-Mail: echristenson@hamc.com

NDSU School of Pharmacy/ ASP Representative

Brooke Schotters
E-Mail: brook.schotters@ndus.edu

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COLLEGE OF PHARMACY,
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ALLIED SCIENCES



2017 Calendar

FEBRUARY

Feb 2	Groundhog Day
Feb 14	Happy Valentine's Day
Feb 19	Presidents' Day

MARCH

Mar 11	Daylight Savings Begins
Mar 12	National Nap Day
Mar 16-19	APhA Annual Meeting & Expo, Nashville TN
Mar 17	St. Patrick's Day
Mar 21	NDPhA/NDPSC Joint Board Meeting – Ramada, Bismarck
Mar 25	Palm Sunday
Mar 30	Good Friday

APRIL

Apr 1	Easter Sunday (April Fool's Day)
Apr 19-22	133rd ND Pharmacy Convention, Holiday Inn, Fargo

MAY

May 6	National Nurses Day
May 13	Mother's Day (Happy Mother's Day out there to all Mothers & Grandmothers!!)
May 16	Armed Forces Day
May 28	Memorial Day

NoDAK PHARMACY JOURNAL Submission Policy

The ND Pharmacists Association is pleased to accept submissions for the Journal. Submissions should be reasonable in length due to space considerations. In order to ensure the quality of our publication, editing for grammar, spelling, punctuation and content may occur. Articles, photos, and advertising should be submitted in electronic form.

To submit, please email NDPhA at:
lgiddings@nodakpharmacy.net

The deadline for the Next Issue is:
March 5, 2018

NoDAK PHARMACY JOURNAL

1641 Capitol Way • 701-258-4968
www.nodakpharmacy.net
lgiddings@nodakpharmacy.net

ADVERTISING CONTACT INFORMATION

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NDPhA Membership 1,276

Journal Circulation 1,300

Journal is published five times a year by Quality Printing Service, Inc.

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Colleagues,

In December, I went to the American Society of Health-System Pharmacists Mid-Year Clinical Meeting in Orlando. I like to attend this meeting annually to obtain continuing education on those topics I typically don't see on a daily basis at work. What usually happens is I see a pain or opioid topic and I go to those sessions despite my best intentions to broaden my overall pharmacy knowledge. This year I held firm and enjoyed some great sessions. There's nothing quite like being amongst 25,000 of your closest pharmacy friends. I also came to the realization that I am now older than 24,800 of those in attendance! I believe that is known as the "How Did That Happen" phenomenon. Being in the midst of all those young professionals helped to remind me of the wonderful opportunities that this great profession has given me over the years.

When I attended NDSU at the end of the last ice age, I was absolutely convinced that I was going to pursue a career in retail pharmacy. For me there were two options;

retail or hospital practice. But even though I was certain which path I was going to pursue, I always thought that ownership was outside of my reach. I was completely ignorant of what resources would be available that would allow a young pharmacist to become an owner. I recently had a déjà vu experience when visiting with a couple of P4 students who are on the verge of launching their pharmacy careers. Ownership is something that neither of them had considered for many of the same reasons that I recalled during that stage of my professional life.

While pharmacy ownership is not unique to North Dakota, our ownership law certainly makes this a more reasonable prospect. I would encourage those of you who are flirting with the idea of selling or retiring to actively engage with our students. They need to hear about your experiences and, most of all, to recognize that there are resources available to them if they would like to own their own pharmacy in the future. You are that resource!

Harvey Hanel

Harvey Hanel,
PharmD, R.Ph.

President NDPhA



NDPhA 2018 convention schedule

Thursday, April 19

7:00 AM - 8:00 AM Welcome Social
 Note: Residency Accreditation at Sanford Health, Sudro Ground Breaking?

Friday, April 20



BISON PRIDE DAY!

7:00 AM - 8:00 AM Breakfast

7:30 AM - 1:30 PM Registration

8:00 AM - 9:00 AM **Population Health**
 Ken Bottles, MD

9:00 AM - 9:15 AM Break

9:15 AM - 10:15 AM **Preceptor Development and Practitioner Resilience**
 Anna Dopp, PharmD.

10:15 AM - 10:30 AM Break

10:30 AM - 11:30 AM **Preceptor Training**
 Becky Brynjulson, PharmD, BCACP

11:30 AM - 1:30 PM **Vendor Fair/Poster Sessions/ Picnic Lunch**

1:30 PM - 2:30 PM **Adult Immunizations: Recommendations and Updates**
 Kylie Hall, MPH

2:30 PM - 2:45 PM Break

2:45 PM - 3:45 PM **Residency Presentations**
 Maren McGurran, PharmD
 Jeremy Grindeland, PharmD
 Alex Lang, PharmD
 Andrea Clarens, PharmD

3:45 PM - 4:00 PM Break

4:00 PM - 5:30 PM **NDPhA 1st Business Meeting**

5:30 PM - 6:00 PM **Social**

6:00 PM **Memorial Service/Banquet Entertainment to follow**

Saturday, April 21

7:00 AM - 8:00 AM Breakfast/Product Theatre Possibility

7:30 AM - 1:30 AM Registration

8:00 AM - 9:00 AM **The Future of Pharmacy Practice - Starting Today!**
 Rebecca Snead, RPh

9:00 AM - 9:15 AM Break

9:15 AM - 10:15 AM Pearls

10:15 AM - 11:15 AM Pearls

11:15 PM - 12:15 PM **NDPhA 2nd Business Meeting**

12:15 AM - 1:45 PM **NDPhA/NAPT/NDSHP Lunches**

1:45 PM - 2:45 PM **Reducing Readmissions with a Community Pharmacy/ CAH Partnership**
 Jesse Rue, PharmD, BCPS

2:45 PM - 3:00 PM Break - Dakota Drug Ice Cream Social

3:00 PM - 4:00 PM **An Update on the Medications used in the Treatment of Opioid Use Disorder**
 Missy Henke, MD

4:00 PM - 5:30 PM **NDPhA 3rdnd Business Meeting/ ND BOP Hearing (if Needed)**

5:30 PM - 6:00 PM Scavenger Hunt

6:00 PM - 7:30 PM Past President's Social

6:30 PM - 8:30 PM **President's Banquet & Awards Ceremony - Live Auction to Follow**
 Dressy Attire

Sunday, April 22

7:30 AM - 8:30 AM Breakfast

8:30 AM - 9:30 AM **Performing an Assessment of Risk to Meet USP <800>**
 Patti Kienle, RPh, MPA, FASHP

9:30 AM - 9:45 AM Break

9:45 AM - 10:45 AM **Performing an Assessment of Risk to Meet USP <800>**
 Patti Kienle, RPh, MPA, FASHP

10:45 AM - 11:45 AM **Mark Hardy: USP 800 Board of Pharmacy Review**

11:45 AM Adjourn meeting

133rd ND Pharmacy *Convention* Schedule

*** Pharmacy Pearls: (1.5 hours/10 minute presentations):** Sanford Med to Bed Program, Antimicrobial Stewardship: Kristen Leclair, Critical Care – Breanna Jones, Research – Dave Leedahl, Immunization – Jeff Jacobson, Pharmacy Ownership – Steve Boehning, Networking – Taviah Haglund, Oncology – Lisa Narveson, VA – Renae Fjeldheim, Medication Event/ Quality Assurance - FHC, Drug Shortages, Triple Therapy – Jeremy Grindeland, Joni Viets, Networking Pearl - Taviah

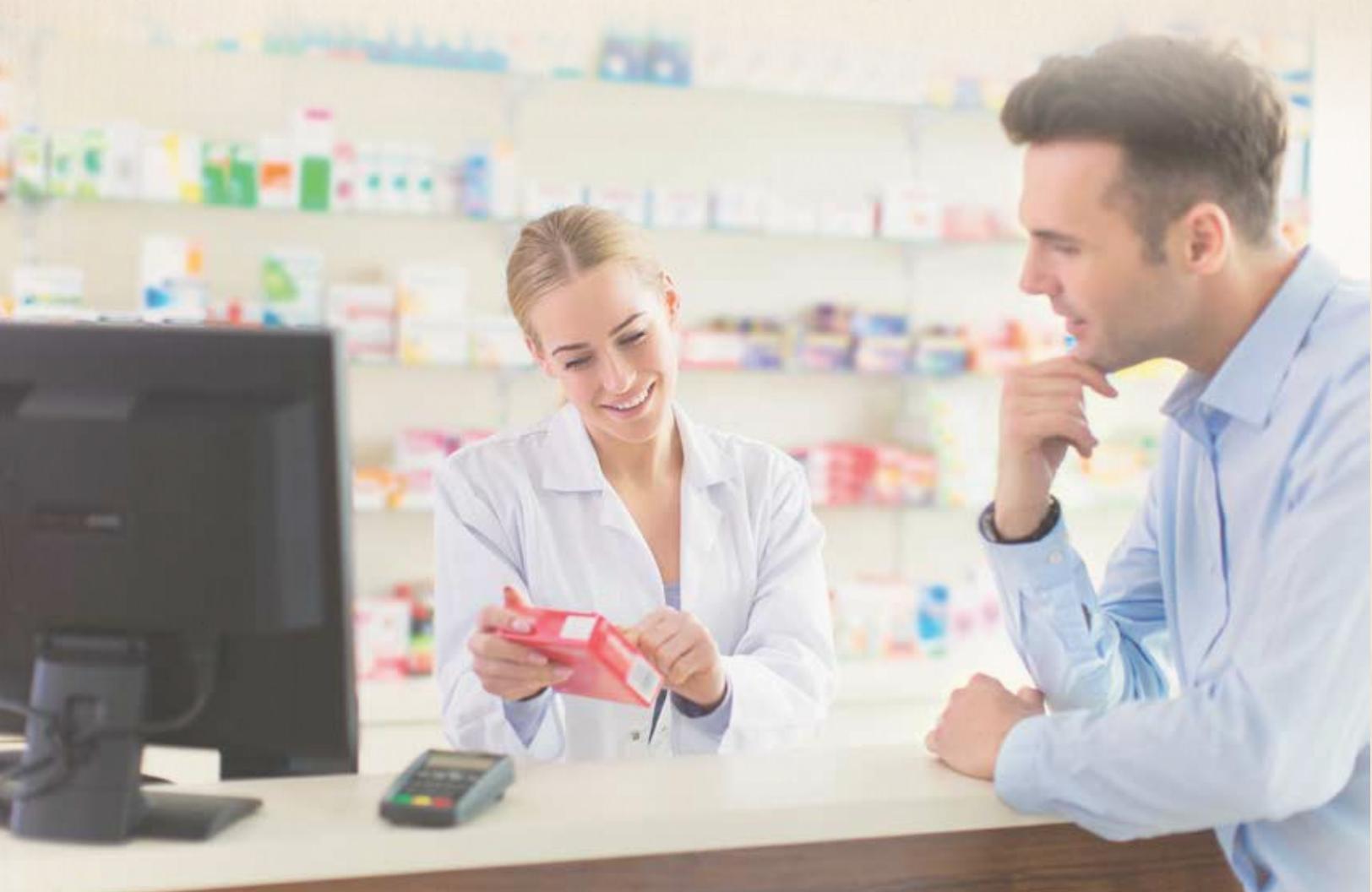
Open ended technician consultation questions – Tyler Rogers

Lisa Narveson – Oncology

VA – Renae Schiele

Medication Event/ Quality Assurance – Sue Nelson,
Jennifer Iverson

CLIA waiver – Liz Skoy



NDPhA Award Nominations *Criteria*

Fax to: (701) 258-9312 or

Email to: ndpha@nodakpharmacy.net by **FEBRUARY 16, 2018**.

A list of past recipients can be found on our website at www.NodakPharmacy.net. Scoring details for nominations received can also be found on our website listed above. Nominations should be submitted **ALONG WITH BIOGRAPHICAL INFORMATION.**

NDPhA AWARDS NOMINATIONS CRITERIA

AL DOERR SERVICE AWARD

The recipient must be a pharmacist licensed to practice in North Dakota. The recipient must be a member of the North Dakota Pharmacists Association; be living (not presented posthumously); not have been a previous recipient of the award; have compiled an outstanding record for community and pharmacy service.

Nominee: _____ Submitted by: _____

UPSHER-SMITH LABORATORIES EXCELLENCE IN INNOVATION AWARD

The recipient should be a practicing pharmacist within North Dakota and a member of NDPhA who has demonstrated Innovative Pharmacy Practice resulting in improved patient care.

Nominee: _____ Submitted by: _____

PHARMACISTS MUTUAL DISTINGUISHED YOUNG PHARMACIST AWARD

The goal of this award is to encourage the newer pharmacists to participate in association and community activities. The award is presented annually to recognize one such person for involvement and dedication to the practice of pharmacy. The recipient must: have received his/her entry degree in pharmacy less than nine years ago; be a pharmacist licensed to practice in North Dakota; a member of NDPhA; have practiced community, institutional, managed care or consulting pharmacy and have actively participated in national pharmacy associations, professional programs, state association activities and/or community service.

Nominee: _____ Submitted by: _____

APhA/NASPA BOWL OF HYGEIA

The recipient must: be a pharmacist licensed to practice in North Dakota; a member of NDPhA; be living (not presented posthumously); not have been a previous recipient of the award; is not currently serving, nor has he/she served within the immediate past two years as an officer of the association in other than an ex-officio capacity or its awards committee; have compiled an outstanding record of community service, which apart from his/her specific identification as a pharmacist, reflects well on the profession.

Nominee: _____ Submitted by: _____

GENERATION RX CHAMPIONS AWARD SPONSORED BY THE CARDINAL HEALTH FOUNDATION

This award was established to recognize a pharmacist for his or her work in prescription drug abuse, which could also include recovery and education.

Nominee: _____ Submitted by: _____

NAPT Award Nominations *Criteria*

Fax to: (701) 258-9312 or Email to: ndpha@nodakpharmacy.net by **FEBRUARY 16, 2018**

NAPT AWARDS NOMINATIONS CRITERIA

Nominations accepted from:

- North Dakota Registered Pharmacy Technician
- North Dakota Licensed Pharmacist
- Practicing professional in the medical field

DISTINGUISHED YOUNG PHARMACY TECHNICIAN

- The nominee shall be a practicing Pharmacy Technician of less than 10 years.
- The nominee shall be registered as a Pharmacy Technician in North Dakota.
- The nominee displays passion to the Pharmacy Technician profession and strives for excellence in the Profession of Pharmacy.
- The nominee exemplifies work ethic in the Profession of Pharmacy.

Nominee: _____ Submitted by: _____

DIAMOND AWARD

- The nominee shall be registered as a Pharmacy Technician in North Dakota.
- The nominee must be living, awards are not made posthumously.
- The nominee has not been a previous recipient of the award.
- The nominee is not currently serving as an officer of NAPT.
- The nominee has compiled an outstanding record of community and pharmacy service.

Nominee: _____ Submitted by: _____

FRIEND OF NAPT

- The nominee has not been a previous recipient of the award.
- The nominee has been an advocate of NAPT and the Profession of Pharmacy Technicians.
- The nominee can be a person(s) working in the Profession of Pharmacy; a person, group, or organization.

Nominee: _____ Submitted by: _____

Note: Nominations are only accepted from ND Registered Pharmacy Technicians.

PHARMACY TECHNICIAN OF THE YEAR AWARD

- The nominee shall be a Registered Pharmacy Technician in North Dakota.
- The nominee exemplifies the work ethic in the Profession of Pharmacy.
- The nominee has not been a past recipient of the award.
- The nominee demonstrates the key elements of the Pharmacy Technician Profession and demonstrates an outstanding record of pharmacy service.

Nominee: _____ Submitted by: _____

NDSHP Award Nominations *Criteria*

Fax to: (701) 234-7137 or Email to: amber.olek@gmail.com by **FEBRUARY 16, 2018.**

NDSHP AWARDS NOMINATIONS CRITERIA

NORTH DAKOTA HEALTH-SYSTEM PHARMACIST OF THE YEAR

Established in 1998, this award is given annually to an individual of high moral character, good citizenship, and elevated professional ideals. The recipient has made significant contributions to health-system pharmacy, including sustained exemplary service, an outstanding single achievement, or a combination of accomplishments benefiting the profession and public health. These may include achievements or outstanding performance that relate to health-system pharmacy: Practice, education, or administration; Research or development; Organizational activities; Scientific or professional writing; Journalism; Public and/or inter-professional relations activities; or Law, legislation, regulation, or standards of professional conduct.

Nominee: _____ Submitted by: _____

NDSHP BEST PRACTICES AWARD

This award has recognized outstanding practitioners in health-system pharmacy who have successfully implemented innovative systems that demonstrate best practices in health-system pharmacy. Eligibility: Applicants must be practicing in a health-system setting, such as an ambulatory care clinic, chronic care, home health care, inpatient care, or outpatient pharmacy. More than one successful program from a health system may be submitted for consideration. Applicants will be judged based on the following criteria: Originality and innovative nature of the program, Significance of the program to the health system, Demonstration of improvements, Significance of the program to pharmacy practice advancement, and Quality of the descriptive report.

Nominee: _____ Submitted by: _____

AWARD OF EXCELLENCE IN MEDICATION USE SAFETY

May be conferred annually to an individual or group of individuals in recognition of a specific recent contribution or achievement that has advanced the ability of hospital and health-system pharmacists in North Dakota to serve the needs of patients through improved medication safety processes. Pharmacists and nonpharmacists are eligible. The award is intended to recognize an individual or group of individuals for a recent singular, significant achievement or contribution rather than for career-long contributions. Include the following information when submitting your nomination: Professional position of the nominee (or individuals in a group) at the time of the contribution or achievement; Current professional position of the nominee or individuals in a group; Summary of the contribution or achievement; Brief statement about how the contribution or achievement advanced the ability of hospital and health-system pharmacists to serve the needs of patients, and Brief statement about why the contribution or achievement is of significance.

Nominee: _____ Submitted by: _____

PHARMACY PRACTICE LITERATURE AWARD

The Pharmacy Practice Literature Award recognizes an outstanding original contribution to the peer-reviewed biomedical literature related to pharmacy practice in hospitals and health-systems. The award is given annually to the author(s) of an important contribution of original research relevant to health-system pharmacy practice published during the calendar year preceding the state convention. Eligibility: The article submitted for the Pharmacy Practice Literature Award must have been published in a PubMed-indexed, peer-reviewed biomedical journal in the last calendar year. This article will be included in the nomination. For this award, the applicant must be a pharmacist. The applicant must be either the first or second author listed on the nominated article. To be eligible for this award, the applicant must have participated in each of the following: Substantial contributions to conception and design, or acquisition of data, or analysis and interpretation of data; Drafting the article or revising it critically for important intellectual content; and Final approval of the version to be published.

Nominee: _____ Submitted by: _____



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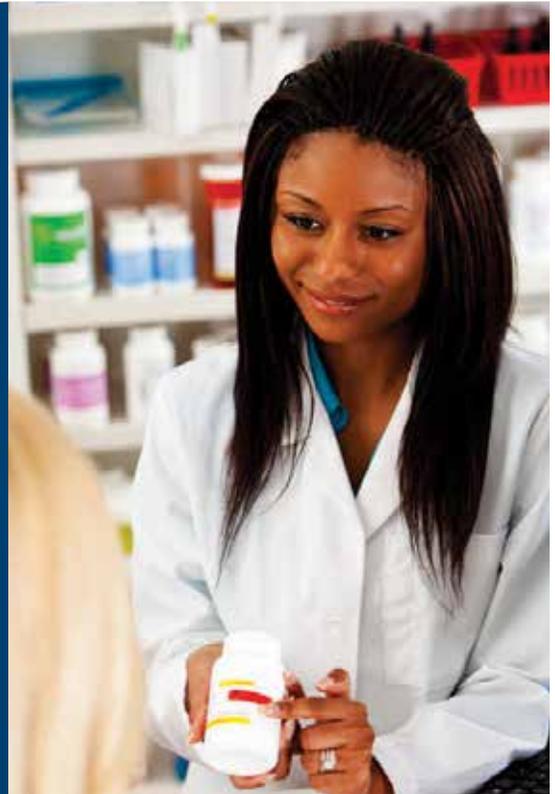
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BUT WHO'S
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ITEM QUANTITY

DOLLAR VALUE



DELIVERY IS THE RESPONSIBILITY OF THE DONOR.

Items are appreciated by 10:00 AM-Saturday, April 21
The Silent Auction will be held on **Saturday, April 21, 2018.**

The Pharmacy Advancement Corporation Scholarship Annual Auction will be held Saturday April 21, 2018. The auction committee would like to invite everyone to participate by donating items. The North Dakota Pharmacists Association is celebrating 133 years so come on you woodcrafters, quilters, and other artisans help us celebrate this momentous occasion. This year we will be starting the silent auction at 2:30 pm, allowing more opportunities for convention attendees to participate. The highlight of the evening will be the "live" auction following the President's Banquet. Please forward any questions to Lorri at ndpha@nodakpharmacy.net or call 701-258-4968. Thank you for your participation in the past and we look forward to another outstanding auction.



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312.480.1064

dave.kelly@mckesson.com



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NAPT Executive Board

Chairperson

Diane Halvorson
701-793-5773
Email: dhalvorsonrphtech@gmail.com

President

Tracy Lindsey
701-232-3241 Ext 92852
Email: tlindsey101@yahoo.com

Vice-President

Twana Dick
701-240-3363
Email: dakdrug@gmail.com

Secretary

Lindsay Cizek-Cribb
701-403-9516
Email: lindsaycizek@hotmail.com

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320-250-3171
Email: alexandrajune6832@gmail.com

Parliamentarian

Autumn Guilbert
701-208-1432
Email: autumn-guilbert@hotmail.com

Member-at-Large

Arlene Monson
701-852-4068
Email: monsonized@gmail.com

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Kathy Zahn
701-328-9537
Email: healthyzahns@gmail.com

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2018 NAPT Fall Conference!

The planning has started for the 2018 NAPT Fall Conference! It will be held on October 5 & 6, 2018 at the Holiday Inn in Fargo, ND. Attending this event is another wonderful way of earning continuing education credits and networking with fellow technicians from across the state! As always, plans are underway to have great speakers and topics that are current and relevant to our profession. Let's make this another record year for attendance! Please plan on attending!

Interested in being part of the NAPT Executive Board? Expand your horizons! Consider becoming a voice with the NAPT Executive Board! If you are interested in becoming involved, please contact one of the Executive Board Members for further information.

The NAPT Video Project!

Wow! 2 years, 2 completed videos about the Pharmacy Technician profession! We are very pleased with the videos and thank everyone that played a role from the initial planning stages all the way to the final production! Links to the videos are available on the NDPhA, ND Board of Pharmacy and PTCB websites!

Are your Community Pharmacies complying with counseling on every prescription, every time? Pharmacists are required to counsel on every new prescription dispensed and if your patient is picking up a refill, the pharmacy technician can screen the patient with open ended questions about the refill to determine if there should be further discussion and counseling done by the pharmacist. This is a requirement by the Board of Pharmacy and will be part of their review when visiting your pharmacy.

Facebook!

The NAPT Facebook Committee is putting the final touches on our Facebook page. With social media being mainstream, we are ready to make this step!

Tracy Lindsey

Tracy Lindsey
RPhTech, CPhT
President of NAPT

Community Pharmacists Partner with Rural Hospital to Reduce Readmissions

By Dr. Jesse Rue, PharmD, BCPS

The man was well into his 80s, and just discharged from the hospital. He still lived in his own home and was determined to keep it that way. He opened a white grocery bag and twelve green bottles skittered across the pharmacy counter. Inside three of them were the same drug, but each bottle had a different dose and direction. He didn't want to throw the old pills, since he may need them again someday; drugs could be expensive, and while that one wasn't, he hadn't been raised to waste what he had.

It was difficult enough to remember to take one pill each morning, much less a dozen, all of which had names that he couldn't pronounce. He needed to learn what each one was, and what each one was for, because making a mistake with his pills would put him back in the hospital.

He needed help, and so he chose his pharmacist.

THE PROBLEM

Medication information is fractured from the moment a patient is admitted to or discharged from the hospital. Discharge instructions can be overwhelming for a patient, particularly when a medication list may have over a dozen items. The patient's pharmacy may not know about a new discharge prescription, patients may not realize that a dosage has doubled while in the hospital, and the primary provider may not know about new prescriptions from a specialist in another city.

"Readmissions are very costly," says Carrington pharmacist Shane Wendel, "and poor reconciliation between discharge and getting to the drugstore is a big problem."

It's not simply a rural problem, it's a national problem. For the month of May of 2016, CMS reported over 130,000 readmissions nationwide (CMS), at a cost exceeding \$11,000 per readmit (Becker's).

Readmissions are in fact so costly that CMS began in 2012 to penalize many hospitals for failing to meet readmission avoidance goals (Becker's).

A group of community pharmacies in Carrington and New Rockford, ND partnered with their local hospital to improve the discharge and transitions of care program in the area. In an 18 month period following its launch, it recorded a 52% reduction in readmit rate for those enrolled in the program.

DISCHARGE PLANNING

At hospitals all across America, teams meet daily to discuss the plan for each patient, from admit through discharge. They discuss patient needs for therapy, home health, insurance, social services, transportation, meals, or even for visits from a priest or pastor. As the discharge plan develops, the future medication needs of the patient come into focus.

A year after installing its electronic medical record (EMR), members of the Carrington team met to find ways to improve the care its patients received after discharge. One area targeted was to improve the home medication list given to patients when leaving the hospital. Some patients felt that the list generated by the new computer system could be difficult to understand; for example, many patients didn't know the purpose of their medications, or that their cholesterol medication needed to be taken in the evening to work best.

A new form was created that listed not only the medication name and directions, but also the indication and the particular time of day to take it.

Still, the team was convinced that patients needed better coordination of their care once they left the building, so a partnership was built with three local community pharmacies.

THE PROCESS

With permission, patient medication lists are forwarded to their local pharmacy upon discharge. Upon receiving the information, the pharmacy compares the new list with their files and contacts the patient to discuss their plan, encouraging them to visit in person. The list is also forwarded to the clinic (which uses a different EMR vendor) so that its system reflects the most recent information prior to any post-discharge appointments.

Should the provider miss writing or transmitting a prescription electronically, the Medical Staff granted the pharmacies authority to generate a 30-day supply of non-controlled medication for any order on the discharge list. It also allows the pharmacy to generate a new prescription to re-label any medications the patient may have had on hand that underwent a dose or direction change.

When the program works, the patient, primary provider, hospital, clinic, and pharmacy have the exact same medication list. It's a simple concept, but one that rarely occurs in American healthcare.

"This collaborative program has closed the gap between community pharmacy and the hospital for accurate medication reconciliation," says Wendel.

STUDENT INVOLVEMENT

Several pharmacy students from North Dakota State University have been involved with the program.

Based out of the community pharmacies, they administered immunizations, filled and counseled prescriptions, and learned about the community involvement that is so critical in a small town.

They spent time at the hospital reviewing inpatient charts, educating patients on their course of therapy, and assisted in developing plans for discharge. They also had the opportunity to perform medication reconciliation, round with hospital providers, and follow-up with patients at the pharmacy.

In some cases, the students have taught the discharge medication list to the patient and then driven across town to fill and counsel them on their new prescriptions within the same hour.

As healthcare becomes more interconnected, learning to help patients navigate through the points that they access care is paramount; it's critical that educational opportunities are created for students to develop these skills.

THE OUTCOMES

From January 1, 2016 through June 30, 2017, a total of 724 individual patient hospital admissions and 151 follow-ups at the pharmacies were documented. When compared to the group without documented pharmacy follow-up, the group managed by the community pharmacies experienced a re-admit rate reduction of 52% when controlling for patients who were ultimately transferred from the facility, died, or discharged to a nursing or group home.

In the hospital, a total of 198 medication reconciliation discrepancies were found and fixed by pharmacy after initial reconciliation was completed, an average of 1.9 per patient reviewed. Having a proper list at the beginning of the stay makes an outsized difference on the quality of the discharge. Further collaboration among the clinics and pharmacies in this area would provide an interesting opportunity for further quality gains.

VALUE OF THE PHARMACIST

Medications are the most common healthcare intervention in the US, and yet there is relatively little national focus on managing them to their full effect. Pharmacists—particularly community pharmacists—are a natural fit for improving care transitions. The community pharmacist knows their patients and the medications they take, talking with them on the phone and seeing them face to face more often than any other healthcare provider in the community. This project has demonstrated what a small team of dedicated professionals can do to help patients live better lives, and bring true, meaningful, and measureable value to healthcare.

Table

- Number of admits--724
- Patient contacts recorded by retail--151
- Re-admit percentage difference—38% overall, 52% when compared to group not contacted
- Average number Rx per patient at discharge—10.1
- Average number discharge Rx written—1.8
- Number intake med rec problems fixed per patient seen by pharmacist—1.9

Works Cited

Center for Medicare and Medicaid Services (2016). Medicare 30-Day Readmission Rate. Retrieved from <https://data.cms.gov/Medicare-Claims/FFS-Medicare-30-Day-Readmission-Rate-PUF/b6st-bzjs/data>

"6 Stats On the Cost of Readmission for CMS-Tracked Conditions." Becker's Clinical Leadership & Infection Control. 13 Dec. 2013, <https://www.beckershospitalreview.com/quality/6-stats-on-the-cost-of-readmission-for-cms-tracked-conditions.html>



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North Dakota's Drug Disposal Program: *Another Feather in the Cap of ND Pharmacy*

By Mark J Hardy, PharmD, Executive Director
ND State Board of Pharmacy

The North Dakota State Board of Pharmacy has sponsored a drug disposal program since 2016. We currently have well over 100 pharmacies participating in the program and that number continues to increase. In working with the ND Pharmacists Association, the Board identified a need for the public to have access to a safe and easy avenue to dispose of their controlled substances. When the Drug Enforcement Administration [DEA] allowed for pharmacies to become drug disposal sites, the Board was called upon to develop the opportunity for North Dakota Pharmacies to provide this service to their patients.

The Board recently moved its Drug Disposal Program to the MedSafe System through Sharps. We hope those participating pharmacies find this to be a great service to the public. It is the Board's intention to continue to provide this service, free of charge, to our Pharmacies across the state of North Dakota that are willing to participate in this opportunity.

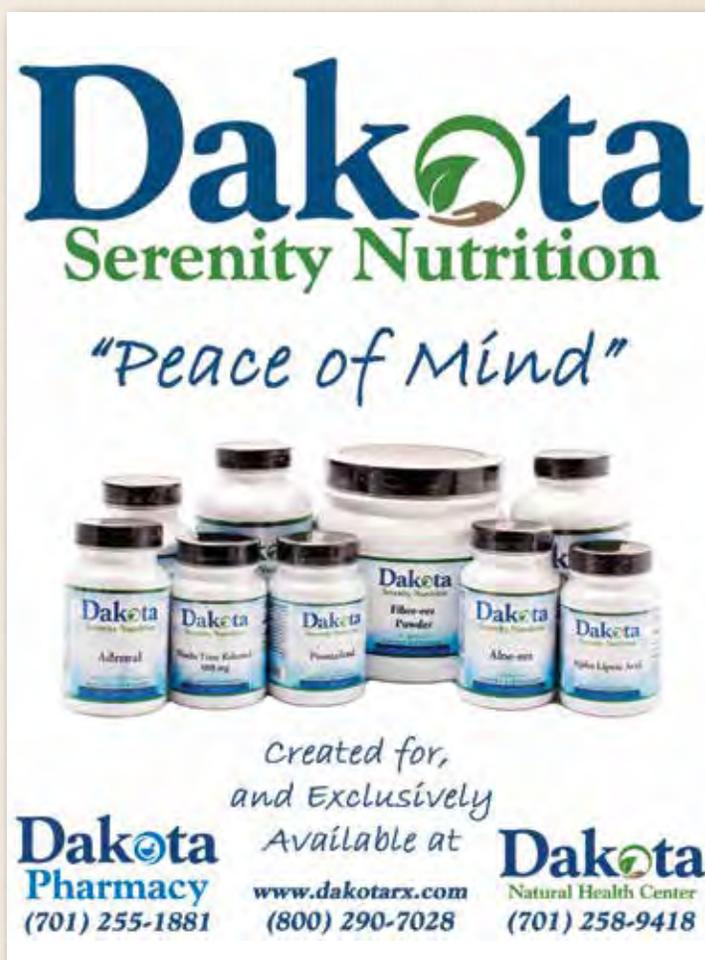
While our humble North Dakota roots do not lean towards boasting, every once in a while we must make an exception to that and "toot our own horns" just a little. Recently, the Federal Government Accountability Office released a report "*Preventing Drug Abuse: Low Participation by Pharmacies and other Entities as Voluntary Collectors of Unused Prescription Drugs.*" In this otherwise dismal report about how pharmacies are not stepping up to provide this drug disposal service to their patients, there is one state that stands out well above the rest of the United States and that is – can you guess? Yup, the great state of North Dakota! Through your participation in the Drug Disposal Program the Board is offering, the report shows that North Dakota has 32% of our pharmacies participating in a drug disposal program, which beats the national average of just 2.49%. Just to be clear, with over 100 pharmacies currently participating, there are well over 32% of eligible locations participating and we know we

can do better yet. North Dakota is also the only state that has over 75% of our population within 5 miles of a DEA authorized takeback location. That is a pretty impressive number given the rural nature of most of our state.

This is indeed a great feather in the cap of our profession of pharmacy. The profession of Pharmacy in North Dakota is showing how proactive and innovative we are. But mostly this highlights the willingness and the impact that the profession of pharmacy in North Dakota can and is making in our communities, that our profession is willing to step up to meet the demands and provide a service that is so desperately needed, given the issues that we have in drug abuse and opioid addictions. I hope you will agree with me that it is nice to have some positive news to begin 2018.

Bravo North Dakota pharmacists and pharmacies – Bravo!

Source: <https://www.gao.gov/assets/690/687719.pdf>



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Your commitment helps forge future pharmacy careers

By Carol Renner, Office of the Dean, Communication Coordinator, NDSU College of Health Professions

Submitted article: NoDak Pharmacy, January 2018

One pharmacy student has set a goal to work in the U.S. Public Health Service. Another hopes to go back to her hometown and help patients as a community pharmacist. Other students go on to care for patients in the Veteran's Administration or Indian Health Services or hospital-based pharmacies. Their options are nearly endless. Alumni and supporters of the NDSU School of Pharmacy help students to achieve these goals through their support of events such as NDSU Giving Day that is held annually in November.

Sydney Mosher, who plans to graduate in 2021, shadowed a pharmacist in her northwestern Minnesota hometown of 2,000 people when she was in high school.



First-year NDSU pharmacy student Sydney Mosher participated in NDSU Giving Day that helps support scholarships and programs in the School of Pharmacy. Mosher hopes to become a retail pharmacist in a rural community when she graduates.

"I just loved it," said Mosher. "I loved caring for the patients and helping them and talking with people and everything pharmacy has to offer. It was also nice being the most accessible health professional in our community. Having people come into the pharmacy and ask any question they want to see. I'm really excited to do that in the future."

She plans to become a retail pharmacist in a rural community. "I would like to make connections with the people in that community and care for the people in that community," said Mosher, whether it's in her hometown or another rural community.

Second-year pharmacy program student Tyler Maanum also shadowed a local pharmacist in high school. After coming to NDSU, he was involved in tutoring pre-pharmacy students. "There's also a lot of other professional organizations that I'm involved in that I can feel that I'm being a bigger part of the pharmacy profession as a whole," he said.

Maanum's goal is to become a member of the U.S. Public Health

Service. "I also know that they help out in natural disasters like ones we've had recently (hurricanes) to go down there and aid people."

NDSU's pharmacy program and connections with alumni and preceptors provide students with robust opportunities. "Being in the pharmacy program, all of our professors are usually pharmacists and they have their own practice. It's really cool having that connection and being able to ask them questions about being on the job. During lectures, they will always come up with examples from real life practice that they have experienced," said Mosher.

Students such as Mosher and Maanum benefit from support during NDSU Giving Day held November 29. Supporters of the 2017 NDSU Giving Day contributed \$66,515 for the College of Health Professions during the 24-hour online giving event.

"I want to personally thank you for your generosity on Giving Day that supports our students, faculty and staff in the School of Pharmacy," said Charles Peterson, dean of the College of Health Professions at NDSU.

24 hours can impact a lifetime. Generous donors on the NDSU School of Pharmacy Advisory Board, pharmacy alumna Mary Zweber and the Rexall Club matched donations to specific levels during NDSU Giving Day, thus maximizing the fundraising efforts. Such support helps NDSU to meet the region's continuing need for pharmacists and health care professionals.

The funds raised on NDSU Giving Day support scholarships and programs in pharmacy, while contributions make it possible for students to participate in professional meetings, community service and global opportunities.



Second-year NDSU pharmacy student Tyler Maanum hopes to be part of the U.S. Public Health Service. Funds raised during the annual NDSU Giving Day in November provide students with opportunities to participate in professional meetings and other educational opportunities.

NDSU faculty to develop workshops for pharmacists

By Carol Renner, Office of the Dean, Communication Coordinator, NDSU College of Health Professions

[Submitted article: NoDak Pharmacy, January 2018]

Marketa Marvanova, chair and associate professor of pharmacy practice, has received a \$3,785 grant from North Dakota Board of Pharmacy to develop dementia-related training for state pharmacists.

The project is titled "Targeted Education in Dementia-related Care for North Dakota Pharmacists," and will include two free, five-hour workshops and a free three-credit home study course.

The training is a continuation of a research project on dementia-related care in the U.S. Researchers identified potential gaps in this field and the need for high quality continuing education in the area.

"The goal is to ensure availability of high quality pharmacist-specific continuing education in dementia care in order to better serve our aging populations in North Dakota," said Marvanova, who hopes the training program serves as a model for other states.

"It is our sincere hope that this initiative can improve patient care in North Dakota and also eliminate or reduce healthcare disparities," she said.

Researchers also will assess the impact of the knowledge improvement for Alzheimer's Disease-related care gained from the two live workshops and three-credit home study.



Marketa Marvanova, chair and associate professor of pharmacy practice in the NDSU School of Pharmacy, received a grant from the North Dakota Board of Pharmacy to develop dementia-related continuing education materials for pharmacists to help care for aging populations in the state.

Marvanova said preliminary plans call for one workshop to be held in Sudro Hall on the NDSU campus for up to 30 pharmacists, set for Saturday, March 31, followed by a similar workshop in either Bismarck or in Fargo in April or May.

The three-credit home study continuing education program for state pharmacists is expected to be available in May or June. Interested North Dakota pharmacists should contact Marvanova at marketa.marvanova@ndsu.edu.

ASHP Presents 2017 Distinguished Service Awards to Six Members

Section of Pharmacy Informatics and Technology

Nancy R. Smestad, M.S., B.S.

Nancy Smestad practiced for more than 30 years in the Veterans Health Administration in Fargo, N.D., retiring as an Informatics Pharmacist in the Office of Informatics and Analytics, Information Patient Safety. She has served as a North Dakota delegate to the ASHP House of Delegates, was a member of the Section of Inpatient Care

Practitioners Advisory Group (SAG) on Pharmacy Practice, and also served on the Section of Pharmacy Informatics and Technology SAGs on Clinical Applications and Clinical Decision Support. She also served on the Section of Pharmacy Informatics and Technology Educational Steering Committee.

Early Returns are Promising for Pharmacists Screening Patients Receiving Opioid Prescriptions

Heidi Eukel, PharmD
Associate Professor of Practice
North Dakota State University

Siri Burck
PharmD Candidate
North Dakota State University

Mark Strand, PhD, CPH
Professor
North Dakota State University

Acknowledgement: This project was funded by the FM Area Foundation and the ND Board of Pharmacy.

The opioid misuse crisis has swept across our country, and our communities, in the recent decade. The harm resulting from increased cases of opioid misuse, and even death, has been substantial. The current crisis is made more complex for pharmacists because of concerns that many of those misusing prescription opioids or even heroin had a prescription medication as their entry point. As many as one in four patients receiving long-term opioid therapy in a primary care setting struggles with opioid addiction.^{1, 2, 3} Therefore, it is important that opioid misuse prevention be moved upstream, to the initial patient encounter. The reasons some patients slip into substance misuse disorders are complex, among them a predisposition to addiction. Therefore, reducing the number of patients who are exposed to opioid medications, and reducing the overall volume of opioid medications dispensed, are methods to reduce the number of individuals who go on to misuse opioids. This is the rationale for the Prescription Drug Monitoring Program, as well as the March 2016 CDC guidelines restricting the use of opioid medications for chronic pain management.

With these initiatives, the number of opioids dispensed in North Dakota dropped from 180,410 in early 2015 to 139,836 in the fall of 2017, a 22.5 percent drop, according to figures from the North Dakota Board of Pharmacy's prescription drug monitoring program.⁴ An analysis of claims data shows opioid prescriptions per Medicaid recipient decreased 72 percent from 2012 to 2017, measured as morphine equivalent doses. North Dakota is making strides in dispensing fewer opioid medications. Despite these achievements, there are still a large number of patients receiving opioid prescriptions who are at risk of developing an opioid misuse disorder. This is where the pharmacist's role in patient education can make an irreplaceable contribution to opioid misuse prevention.

In response to this challenge, faculty members at the North Dakota State University School of Pharmacy designed a three-hour continuing education seminar to engage pharmacists in the community-wide fight against opioid misuse. Recognizing the commitment and desire of pharmacists to better support patients receiving opioid prescriptions, topics of the training focused on knowledge and skills to identify patient needs and provide counseling and support to assist them in safely using opioids. The objectives focused on science of addiction, introduction to a tool to screen patients for risk of opioid misuse⁵ and naloxone prescribing, dispensing, and consultation. Consultation on the risk of opioid misuse was exemplified through lecture and role-play. A list of support services in the community for individuals concerned about a misuse disorder were provided to pharmacists to disseminate to patients. Upon completion, all attendees were certified to prescribe naloxone through the North Dakota Board of Pharmacy.

Upon completion of the training, 11 pharmacists carried out a 6-week pilot project to implement the procedures introduced in the training. With every opioid prescription, pharmacists administered an opioid misuse risk screening tool, evaluated the patient's current disease states and medications which may lead to a risk of accidental overdose, prescribed and dispensed naloxone when appropriate, provided consultation on medication take-back and partial filling of opioids, and provided resources for community support services when appropriate.

Throughout the 6-week period, the pharmacists provided screening for 107 patients. A significant number of individuals receiving prescriptions were identified as at some risk of misuse (26%) or of an accidental overdose (30%) (Table 1). It must be pointed out that this is only a pilot project, with only 11 pharmacist participants, and 107 patient encounters, so these numbers cannot be

hastily generalized to the wider population. However, as the first attempt to implement an opioid misuse disorder screening program in community pharmacy, these findings are promising.

Screening Criteria	Proportion of patients
At risk for opioid misuse disorder (ORT>4)	26%
At risk of accidental overdose (medication interactions, disease states present, or patient profile)	30%

Based on patient need, patients were provided support services, some of which are reported in Table 2. Several of these services might not have otherwise been delivered in the absence of this pilot project, in part because the conversation with the patient might not have moved forward to the same level without the objective information provided by the screening tools to serve as a natural entry point to talk with patients further.

Service provided	Number of patients
Introduced to the medication take-back program	71
Prescription partial fill	3
Provided community support services information	17
Explained the benefits of naloxone	43
Prescribed naloxone	5
Dispensed naloxone (nasal spray, based on insurance coverage)	3

Overall results demonstrated the ability of pharmacist to identify patients at risk of opioid misuse through the use of screening tools, which then enhanced the conversation with the patients, leading to advanced patient care and comprehensive patient education. Pharmacists who

participated in the pilot reported value in the tools used throughout the pilot project. For example, several noted the value of having an objective measurement of potential of opioid misuse. This was preferred to relying only on professional judgement. The objective tools provided a natural avenue for counseling and resource referral.

This pilot project demonstrated the utility and the feasibility of screening for opioid misuse risk at the community pharmacy level. Screening was shown to be a possible intervention among at-risk patents at the upstream level of care, at the point of dispensing. While these results are only preliminary and need to be evaluated further, they hold hope of successfully decreasing the number of patients who otherwise might have gone on to misuse or accidentally overdose on an opioid prescription. The role of the pharmacist in public health continues to increase. The current response of pharmacy to the nationwide opioid epidemic is critical, and stands to make a significant contribution to reigning it in.

¹ Banta-Green CJ, Merrill JO, Doyle SR, Boudreau DM, Calsyn DA. Opioid use behaviors, mental health and pain—development of a typology of chronic pain patients. *Drug Alcohol Depend* 2009;104:34–42.

² Boscarino JA, Rukstalis M, Hoffman SN, et al. Risk factors for drug dependence among out-patients on opioid therapy in a large US health-care system. *Addiction* 2010;105:1776–82.

³ Fleming MF, Balousek SL, Klessig CL, Mundt MP, Brown DD. Substance use disorders in a primary care sample receiving daily opioid therapy. *J Pain* 2007;8:573–82.

⁴ Springer P. North Dakota sees steep drop in opioid painkiller prescriptions, InForum on-line, December 29, 2017. Available from: <http://www.inforum.com/lifestyle/health/4380376-north-dakota-sees-steep-drop-opioid-painkiller-prescriptions> Accessed January 12, 2018.

⁵ Webster LR, Webster R. Predicting aberrant behaviors in Opioid-treated patients: preliminary validation of the Opioid risk tool. *Pain Med*. 2005;6(6):432.

FINANCIAL FORUM

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Little everyday things may be costing you dollars you could keep. Simply paying cash instead of using a credit card could save you four figures annually. An average U.S. household carries \$9,000 in revolving debt; as credit cards currently have a 13% average annual interest rate, that average household pays more than \$1,000 in finance charges a year.¹ The typical bank customer makes four \$60 withdrawals from ATMs a month – given that two or three are probably away from the host bank, that means \$5-12 a month lost to ATM fees, or about \$60-100 a year. A common household gets about 15 hard-copy bills a month and spends roughly \$80 a year on stamps to mail them – why not pay bills online? Automating payments also rescues you from late fees.¹ A household that runs full loads in washing machines and dishwashers, washes cars primarily with water from a bucket, and turns off the tap while shaving or brushing teeth may save \$100 (or more) in annual water costs.¹

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regular, taxable brokerage account, that account has a drawback: you must pay taxes on your investment income in the year it is received. So, you are really losing X% of your return to the tax man (the percentage will reflect your income tax rate).² In traditional IRAs and many workplace retirement plans, you save for retirement using pre-tax dollars. None of the dollars you invest in those plans count in your taxable income, and the invested assets can grow and compound in the account without being taxed. This year and in years to follow, this means significant tax savings for you. The earnings of these accounts are only taxed when withdrawn.^{2,3}

How would you like to save hundreds of dollars per month in retirement? By saving and investing for retirement using a Roth IRA, that is essentially the potential you give yourself. Roth IRAs are the inverse of traditional IRAs: the dollars you direct into them are not tax deductible, but the withdrawals are tax free in retirement (assuming you abide by I.R.S. rules). Imagine being able to receive retirement income for 20 or 30 years without paying a penny of federal income taxes on it in the years you receive it. Now imagine how sizable that income stream might be after decades of compounding and equity investment for that IRA.⁴



Many of us can find more money to save, today & tomorrow. Sometimes the saving possibilities are right in front of us. Other times, they may come to us in the future because of present-day financial decisions. We can potentially realize some savings by changes in our financial behavior or our choice of investing vehicles, without resorting to austerity.

Citations.

- 1 - realsimple.com/work-life/money/saving/money-saving-secrets [7/13/17]
- 2 - investopedia.com/articles/stocks/11/intro-tax-efficient-investing.asp [8/5/16]
- 3 - blog.turbotax.intuit.com/tax-deductions-and-credits-2/can-you-deduct-401k-savings-from-your-taxes-7169/ [2/7/17]
- 4 - cnbc.com/2017/05/15/personal-finance-expert-do-these-6-things-to-save-an-extra-700-per-month.html [5/15/17]

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