

# S O U T H D A K O T A PHARMACIST

## IN THIS ISSUE

2021 Legislative Session in Review  
2021 District Spring Meetings are On(line!)  
CE: Vaccine Storage and Handling



SPRING EDITION 2021



Our mission is to promote, serve and protect the pharmacy profession.

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# Calendar

## MARCH

- 12-15 APhA Annual Meeting and Exposition Virtual
- 17 St. Patrick's Day
- 28 **Mitchell District Spring Meeting**  
Virtual via Zoom, 6:30 pm CDT
- 29 Veto Day – South Dakota Legislature  
Pierre, SD
- 31 **Aberdeen District Spring Meeting**  
Virtual via Zoom, 7 pm CDT

## APRIL

- 4 Easter
- 8 South Dakota Board of Pharmacy Meeting  
Via Zoom, 1-5 pm CDT
- 13 **Watertown District Spring Meeting**  
Virtual via Zoom, 7 pm CDT
- 15 **Black Hills District Spring Meeting**  
Virtual via Zoom, 7 pm MDT
- 18 **Mobridge District Spring Meeting**  
Virtual via Zoom, 7 pm CDT
- 20 **Rosebud District Spring Meeting**  
Virtual via Zoom, 5 pm CDT
- 19-21 NCPA Congressional Pharmacy  
Virtual Fly-In
- 21 **Yankton District Spring Meeting**  
Virtual Via Zoom, 6:30 pm CDT
- 22 **Sioux Falls District Spring Meeting**  
Virtual via Zoom, 6 pm CDT

## MAY

- 3 Award Nominations due to SDPhA Office
- 31 Memorial Day

## SAVE THE DATE

The SDPhA Board will determine in the next few months whether the 2021 Convention take place in-person, virtually, or a combination of both. In the meantime, please save the date for the **SDPhA Annual Meeting September 17-18**.

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# Director's COMMENTS

Amanda Bacon // SDPhA Executive Director



## SPRING DISTRICT MEETINGS

Spring District Meetings are On(line)! We really look forward to when these can again be held in person, but we are also grateful for technology that allows us to safely “gather” now. We urge you to take a look at the calendar on the inside cover of the Journal and save the date of your district meeting. This is where you will get an in-depth update of the

just completed legislative session, as well as a very important look ahead on what we’re already working on for 2022, and why your help will be of utmost importance. In addition, you’ll get to learn about the great work happening in each of our districts across the state. From community service projects to sponsoring scholarships for pharmacy students – these district meetings are where those important decisions and initiatives get their wings. The work that happens at these meetings is truly the basis of advancing the profession – and your input and your voice is vital. We look forward to being physically together in the same room for next year’s spring district meetings, and raising a toast to all the incredible work, and the ways pharmacists have led throughout this historic time.

## LEGISLATURE

The 2021 Legislative Session was one for the history books, and quite different than anything we’ve seen or dealt with before. Lobbying during a pandemic brought about some unique challenges and real-time learnings as we moved to carry on our work while keeping our lobby team safe. We were grateful to once again have retained the skillful services of long-time SDPhA lobbyist and general legal counsel Robert Riter, as well as Lindsey Riter-Rapp, who is in her second year as lobbyist for SDPhA. Things were quite active for the SDPhA Commercial and Legislative Branch even before the 96th Legislative Session began. As of the date of this report, Gov. Kristi Noem has said she intends to call a special session to deal with a few topics, on likely being Initiated Measure 26 (IM26).

A few key bills from the 96th Legislative Session:

- **HB 1046** - SDPhA supported this legislation designed to limit liability for certain exposures to COVID-19. The basic premise of the bill was to protect healthcare workers and others from frivolous lawsuits against those serving

others throughout the pandemic. The cause had strong support from more than 40 organizations representing mostly healthcare and business. Gov. Kristi Noem signed the bill Feb. 18.

- **HB 1097** – This hotly debated bill provided for philosophical exceptions to required vaccinations. It seems we see a similar bill nearly every year of late, and they always elicit long and emotional debate. SDPhA opposed this bill, and testified against this legislation. HB 1097 died in committee. A very close vote of 7-6 sent it to the 41st legislative day.

- **HB 1159** – This bill also died in committee after somewhat contentious testimony and debate. We also opposed HB 1159 which would have prohibited employers (including healthcare) from instituting immunization policies for employees. The House Health and Human Service Committee sent it to the 41st Legislative day on a 9-3 vote.

- **HB 1247** – An act to provide for the protection of the consciences of medical professionals. SDPhA was among the coalition strongly opposed to this legislation. The extremely broad language in bill was of chief concern. It essentially allowed for any employee to refuse any task for nearly any reason. After passing out of the House Affairs committee, HB 1247 died on the House floor. Currently, SDCL 36-11-70 addresses dispensing and matters of conscience for pharmacists.

A few other key bills we monitored extremely closely, but on which we ultimately chose not to take a formal position:

- **HB 1077** - Provides for licensure by endorsement for certain licensed professionals and occupations. This bill makes permanent some of the flexibilities granted during the pandemic. The key difference between this bill and the reciprocity bill we rigorously opposed the last year of the Daugaard Administration – this bill does not replace a licensing board’s current process. Gov. Kristi Noem signed this into law Feb. 23.

- **HB 1014** - This bill creates uniform complaint and declaratory ruling procedures for agencies regulating certain professions and occupations, including pharmacy. While we and other had some concern about this legislation – it was clearly on the fast-track. It moved through both chambers swiftly, and was signed by Gov. Noem Feb. 22.

- **SB 4** – Revises certain provisions of the health professionals assistance program. Current law requires the health professions to operate a joint program.

This legislation allows each board to select their own. Governor Noem signed this bill March 9.

- **HB 1263** – Is the Governor’s effort to provide price transparency for healthcare costs. SDPhA did not take a position on this bill, and while there’s still not a lot of clarity around how this will work in practical application, the legislation sped through both chambers with essentially no opposition and signed March 25th.

Several other several other key pieces of legislation on which SDPhA kept a close watch: controlled substance scheduling, telemedicine and telehealth, open meeting requirements, and various bills which addressed government authority during a pandemic. In addition, the issue of exactly how to implement IM 26 (medical marijuana) dominated the legislature, and ultimately ended with the state in the same position it was when Session began – with IM 26 set to become law as currently written July 1, 2021.

You can see the full scope of the bills we followed this session online with the SDPhA’s new bill tracker.

## COVID-19

As immunization opens in South Dakota to all age 16 and older, pharmacists continue to play a key part in vaccine rollout across the state. Hospital pharmacists have been vital in meeting the initial challenges of vaccine distribution, handling, storage, standing up vaccination clinics, and finally, getting shots in arms. Community retail pharmacists across the state also answered the call to prepare to vaccinate the state’s general population. While the Federal Pharmacy Program now has vaccine in the stores of some of the state’s larger chains, distribution to independent and smaller community pharmacies has yet to roll out. Challenges in storage, transportation and minimum orders have complicated this process, and we continue to participate in conversations weekly with the South Dakota Department of Health (SD DOH) on opportunities to further engage our pharmacists who are ready, willing, and able to provide vaccinations to those in their communities. Presumably these challenges will lessen with greater availability of the Janssen / Johnson and Johnson vaccine which has much less stringent storage, handling, and ordering requirements.

## WEBSITE

We are thrilled to share that within the next several weeks, SDPhA will launch a completely new website! While we did redesign the site roughly three years ago to make it more

user-friendly, the website platform or back end remained the same. Fast-forward three years, and that functionality is simply out-of-date. It led to some issues in the convention registration process for some, and makes for a cumbersome process for paying district dues and contributions for the C&L Fund.

The new website will feature a completely mobile-responsive and modern design, and a fully upgraded and intuitive user experience – from convention registration to contacting us and everything in between. The new website will feature a forms library which will play a key role in streamlining conventions and eliminating the use of so much paper moving forward. Another key feature is an area we call the Action Center. That’s where you’ll find all the issues we’re working on at the federal and state level. It’ll also house the new bill tracker we launched this legislative session, and it will even allow for you to opt in to text alerts about key issues, and let you know when to contact your legislators on an issue of importance to the profession. The Action Center will be a vital piece of our communications on legislative issues, and we are excited for you to see it, and put it into action yourself.

## CONVENTION

Typically, we would report in the Spring Journal that early bird registration has begun for the annual meeting, but this Spring, we are evaluating the best path forward for the annual event. The board’s preference is to gather as planned Sept. 17-18 in Spearfish, SD, if at all possible. But in addition to the obvious considerations of health and safety, we also have to consider whether holding an in-person event this year is financially feasible. We are in the process of surveying exhibitors regarding their ability to travel and participate with us. We know several companies have no-travel orders through the end of 2021, and simply put, without enough exhibitors, we cannot feasibly hold the event in person. The board will issue a decision on an in-person, virtual, or hybrid convention option by early May, so stay tuned! We have included all the awards nomination forms in this edition for your convenience. The deadline for submission is quickly approaching, so please don’t wait to send in your nominations!

Stay Safe,

**AMANDA BACON**



# President's PERSPECTIVE

Dana Darger, RPh // SDPhA Board President

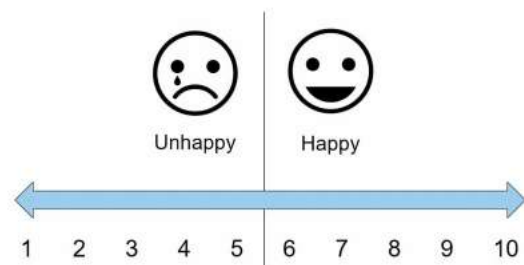


Good Day Friends in Pharmacy,

I thought long and hard for the SDPhA newsletter and what I wanted to convey to you this time. No one would argue that the last year has been a "crisis" and created a lot of unprecedented change. Many of us have a longing or yearning for things to get back to normal, but many of the changes thrust upon us have made us better. Consider

the positive aspects that COVID has had on our resiliency, our ability to adapt, or change quickly. But good or bad it causes stress. I have a belief or possibly a hypothesis that stress can be relieved or mitigated by happiness.

So, if the antidote for stress is happiness, what's your "happiness rating" today?



Have you ever wondered what it means when you greet someone during the day and say, "Good morning! How are you today?" And the response you get is, "Not bad." Have you ever wondered what it that really means? You have to guess whether that's sarcasm for, "I'm really bad, so don't ask." Or does it mean, "I'm good, but don't ask."

I start every day at awesome. It is a choice I make when I get out of bed in the morning. When people ask me how I am I tell them, "I'm awesome." I am frequently asked if that is really how I feel and my answer is, "If I start my day at awesome, I can finish my day at good even on a bad day!" It is a conscious choice I make every day.

I have no expectation that my life is perfect, so I live by my 80/20 rule. As long as I enjoy 80% of what I am doing I can put with the 20% that I don't enjoy. If you are looking for a job that you would rate at 100%, you're a fool. That job doesn't exist, so you are simply going to make yourself unhappy looking for it. I frequently rank my job and ask

myself overall what rating do I give it. For the most part I normally rank it around 90. That being said, I have days that are a 20. Fortunately, I don't have very many of those. I choose not to dwell on the 20%, so I can enjoy the 80 or 90% that make my happy.

I am going to give you my guide to help you find happiness in what you do and how you live.

Step 1: Measure your happiness on a 1-10 scale every day. Because we are scientists, I recommend putting it in a spreadsheet and track it over time. Put comments in an adjacent cell about why you gave it the rating you gave it for that day. When you start to graph the data points you will start to notice patterns. You can add the day of the week to determine if certain days are better than others. You're data experts. Look at the data and see what it's telling you.

Step 2: What are your happiness factors. Look back at the days you ranked high. Is there any commonality in those comment boxes about what made it a good day? What about the bad days? Over time you will come to understand what your happiness factors are and are not. But once you are aware of them you can start to own them rather than letting them own you. You can start to focus on the things that improve your happiness for the day. You can also learn to minimize those that you make you unhappy.

Step 3: Keep it up! This will require you to commit to daily tracking your happiness. Make it a habit. The outcome is only as good as the completeness of the data. It will take time to rewire your outlook on your happiness, but the end product, your happiness is worth it.

If you need a little happy music try these links: Bobby McFerrin - [Don't Worry Be Happy \(Official Video\) - YouTube](#) or [James Brown - I Got You \(I Feel Good\) \(Live 8 2005\) - YouTube](#)

My prayer for each of you is that you will still love being in pharmacy as much as I do after nearly 50 years. I love coming to work and what I do. I tell people all the time that I have the best job in the world and it's because I'm happy doing it. My 80/20 score today – 90. My happiness score today – 10. The day is young, so I might finish at an 8. You never know.

With HAPPINESS!

DANA

# South Dakota BOARD of PHARMACY

Kari Shanard-Koenders, RPh, MSJ // Executive Director



## BOARD WELCOMES NEW REGISTERED PHARMACISTS /PHARMACIES

Congratulations to the following 6 candidates who recently met licensure requirements and became licensed as new pharmacists in South Dakota (SD): Micah Benford, Coreliss Blue, Mark Cherney, Cassandra Devine, Franklin Dowling, and

Brandon Salke.

There were no SD full-time pharmacy licenses issued. There was one new SD part-time pharmacy license issued, Sioux Empire Triage Center dba The Link—Avera McKennan, Sioux Falls, #200-1737. There was one new SD wholesale license issued to Sanford USD Medical Center, Sioux Falls, #600-3253.

## SOUTH DAKOTA COVID VACCINE INFORMATION by Inspector Tyler Laetsch

As the vaccine for COVID-19 rolls out across the country, there are several moving parts and pharmacy is becoming a key player in the plan to help everyone become vaccinated. First and foremost, the Board wishes to thank everyone involved for going above and beyond the call of duty to help with the COVID-19 public health emergency. You are all are doing yeoman's work to support the cause of fighting this pandemic and caring for and enhancing the health of your patients. The Department of Health has created a website with the latest information on the vaccination plan: <https://doh.sd.gov/COVID/Vaccine/>. This website is a very useful tool containing links to required vaccinator training, the state's vaccination plan, what sector of the population is currently eligible for vaccination, and locations that are currently vaccinating, just to name a few key points. As this is a rapidly evolving situation, vaccinators are encouraged to check this site frequently. Further, you can volunteer to be one of the individuals providing the vaccine through the site!

## HHS PROVIDES FURTHER AUTHORIZATION UNDER PREP ACT IN 5<sup>th</sup> – 7<sup>th</sup> AMENDMENTS

The United States Department of Health and Human Services (HHS) issued a fifth amendment to the Public Readiness and Emergency Preparedness ("PREP") Act [5th Amend PREP Act 1.28.21](#). With this amendment to the Declaration, the Acting Secretary identifies two additional categories of persons who are qualified persons or covered persons for the purpose of administering COVID-19 countermeasures. This amendment allows healthcare providers who are licensed, in a state, to prescribe, dispense, and/or administer COVID-19 vaccines in any other State or jurisdiction where the PREP Act applies, and allows any physician, registered nurse, and practical nurse, whose licenses expired within the past five years to prescribe, dispense, and/or administer COVID-19 vaccines in any State. The sixth amendment [6th Amend Prep Act 2.10.21](#) further identifies federal employees, contractors, and volunteers as qualified persons to prescribe, dispense, or administer COVID-19 vaccines with CDC training, under the PREP Act. The seventh amendment [7th Amend PREP Act 3.16.2021](#) adds additional categories of qualified persons under the PREP Act. These categories include the following health care professionals and students: midwife, paramedic, advanced or intermediate emergency medical technician (EMT), physician assistant, respiratory therapist, dentist, podiatrist, optometrist, or veterinarian license or certified to practice in any state who may prescribe, dispense or administer. Further, the Amendment adds the following professions who can prescribe, dispense or administer COVID-19 Vaccines: any physician, advanced practice registered nurse, registered nurse, practical nurse, pharmacist, pharmacy intern midwife, paramedic, advanced or intermediate EMT, respiratory therapist, dentist, physician assistant, podiatrist, optometrist, or veterinarian who has held a license in good standing in any state in the last five years, subject to training requirements.



# South Dakota BOARD of PHARMACY

( continued )

## SD BOARD IMMUNIZATION Q & A by Inspectors Paula Stotz and Carol Smith

- Q:** Are all South Dakota pharmacy technicians allowed to administer immunizations under the PREP Act?  
**A:** Qualified and properly trained technicians who are supervised by a qualified immunizing pharmacist may administer FDA-authorized or FDA-licensed COVID-19 vaccines during the emergency period. Additionally, HHS also declared that properly trained technicians may immunize children age three to eighteen years with Advisory Committee on Immunization Practices (ACIP) recommended vaccines.
- Q:** When the HHS federally declared COVID-19 Public Health emergency has ended, may qualified and properly trained South Dakota pharmacy technicians continue to administer COVID-19 vaccines for all patients and ACIP recommended vaccines for children.  
**A:** This would not be allowed as currently the Administrative Rules of South Dakota, in ARSD 20:51:29, provides no allowance for pharmacy technicians to administer immunizations.
- Q:** May qualified and trained pharmacy technicians administer seasonal influenza vaccines?  
**A:** The HHS declaration under the PREP Act allows qualified and trained pharmacy technicians to administer ACIP recommended vaccines to pediatric patients ages 3 to 18 years old and COVID-19 vaccines to all patients during the public health emergency. The purpose of this declaration was to mitigate the noticeable decrease in rates of routine childhood vaccinations. The seasonal influenza vaccine is not included in the declaration for patients over 18 years of age. In the PREP Act, the Influenza vaccine may be administered to pediatric patients ages 3 to 18, according to ACIP guidelines and thus may be administered by technicians during the public health emergency.
- Q:** When storing vaccines, how often does the CDC recommend checking refrigerator or freezer temperatures?  
**A:** The CDC recommends checking refrigerator temperatures twice daily.

## PDMP UPDATE by Melissa DeNoon, PDMP Director

The year 2021 began with the statutory, annual South Dakota Prescription Drug Monitoring Program (SD PDMP) report on the monitoring and use of prescription opioids to the 2021 South Dakota Legislature's Senate and House standing committees for health and human services. The report included the following:

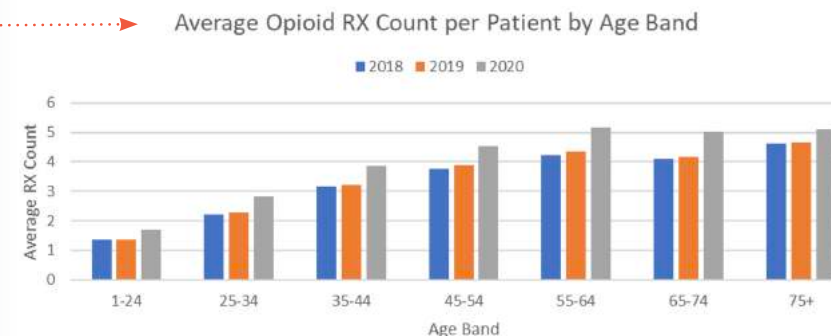
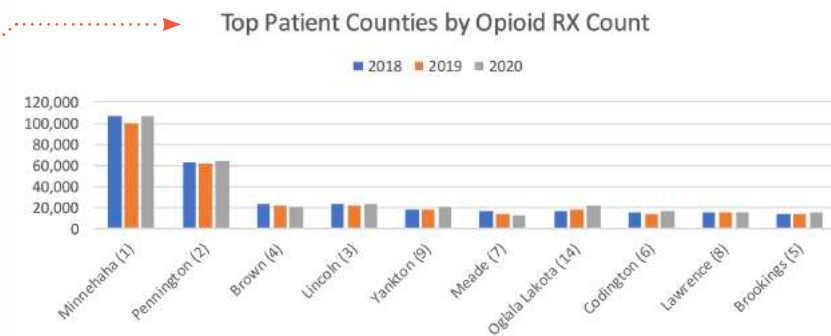
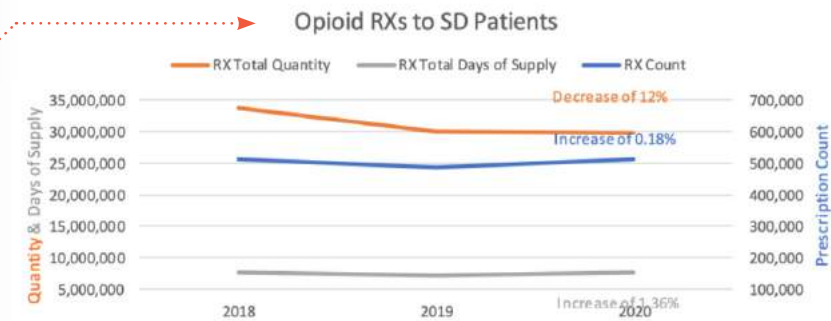
The side graph shows the three metrics measured for opioid prescriptions dispensed to SD patients: 1) prescription count, 2) prescription total quantity dispensed, and 3) prescription total days of supply. From 2018 to 2020, there were very slight increases in two metrics and a decrease in the third; note these percentage changes in the graph. Impacts of the COVID-19 pandemic were seen in these three metrics from 2019 to 2020. Even with a slight increase in the number of opioid prescriptions dispensed, prescribers did decrease quantities and increase how long these lesser quantities lasted.

The side geographical graph shows the top ten SD counties based on patient zip code for the number of opioid prescriptions dispensed. The number in parenthesis after the county name is that county's rank in population. Note there are two counties that decreased each year from 2018 to 2020, Brown and Meade. Conversely, Oglala Lakota county increased each year, 2018 to 2020.

The side age band graph shows the average number of opioid prescriptions dispensed per patient based on their age. An average of greater than four opioid prescriptions per patient is seen in all three years, 2018 to 2020, in patients 55 years of age and older and just in 2020 for patients between 45 and 54 years of age. Overall, the highest averages are in the 75+ age band.

Respectfully submitted, for the Board,

**KARI SHANARD-KOENDERS**



## BOARD MEETING DATES

Please check our website for the time, location and agenda for future Board meetings. Board meeting minutes are also on the website.

## BOARD OF PHARMACY DIRECTORY

### BOARD OF PHARMACY

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### PDMP DATA ACCESS

<https://southdakota.pmpaware.net/login>

### PDMP DATA SUBMITTERS

<https://pmpclearinghouse.net>

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[www.NABP.pharmacy](http://www.NABP.pharmacy)



# South Dakota SOCIETY of HEALTH- SYSTEM PHARMACISTS

## Haylee Allen, PharmD, BCPS, BCPP // SDSHP President



As I reflect over the past year – oh what a year – I feel that the events and challenges have given SDSHP the opportunity to fast-track our plans to deliver high quality, virtual CE. This has been a goal of SDSHP's for a while now, especially to allow a larger number of our membership to partake in our resident CE events and as an alternative method of delivery for our Annual

Conference given the snowpocalypse two years ago and the pandemic last year and this year. We will be continuing this evolution in our CE delivery by hosting a virtual SDSHP Annual Conference next month!

The 45th Annual SDSHP Conference is scheduled virtually on April 9th-11th, 2021. Our Annual Meeting Committee has planned a full 12 hours of CE – enough to renew a South Dakota pharmacist license for the year – over a variety of topics bound to have areas of interest for everyone! Our keynote speaker is ASHP CEO, Paul W. Abramowitz, PharmD, ScD. (Hon.), FASHP, and he will be speaking on the topic of leadership within pharmacy. Furthermore, we have partnered with TeamBuilding.com to host a virtual networking event one of the evenings as well. We hope you can join us for three fantastic days of great continuing education and networking! Please visit [www.sdshp.com](http://www.sdshp.com) to register for the conference and for further information!

SDSHP sponsored three virtual CE events early this year for its membership to attend. Each event featured residents from the various health-systems across South Dakota. The pharmacy residents delivered high-quality

CE on a wide variety of topics. These CE events occurred on January 16th, January 23rd, and January 30th. SDSHP would like to extend a special thank you to the residents for their hard work in providing outstanding CE to our membership in our first ever virtual CE events!

The 9th Annual SDSHP Statewide Residency Conference will be held again this summer. The date and format have not been established yet, but the conference will continue to provide an opportunity for residents to network and gain knowledge on topics that will benefit them during residency. I would like to thank Courtney Younge – our resident liaison – who has been diligently working to prepare another memorable year of programming.

With my term as SDSHP President coming to an end, I wanted to share some words of thanks. I am incredibly grateful to have worked with the 2020-2021 Board of Directors. Their dedication to SDSHP is what enables our organization to push forward and expand pharmacy services across South Dakota. I want to particularly thank our outgoing board members: Joe Berendse, Chance Wachholtz, Jordan Baye, and Dustin Moon (student liaison). Thank you for all you have done and for serving the members of SDSHP!

During the next year, we will continue to serve health-system pharmacist and technicians under the exceptional leadership of Jeremy Daniel!

Respectfully submitted,  
**HAYLEE ALLEN**

# SDSU COLLEGE of PHARMACY and ALLIED HEALTH PROFESSIONS

## Dan Hansen, PharmD // Interim Dean and Professor



Greetings from the College of Pharmacy and Allied Health Professions!

Our students and faculty have been an integral part of combating COVID-19. They are on the frontlines making a difference in the lives of many patients:

- SDSU pharmacy students received firsthand experience in administering the COVID-19 vaccine.
- Students in the Master of Public Health program assisted in case investigation and contact tracing for South Dakota tribal communities and the USD community.
- Respiratory Care students worked as interns while finishing their degree to help address the workforce shortage due to the pandemic.
- As part of some of the student's clinical experience in the Medical Laboratory Science program, students helped with testing for COVID, influenza, RSV, and Streptococcus at drive-thru testing sites.
- SDSU faculty members took the lead in setting COVID-19 protocols at a number of different clinical sites.
- The Center for Family Medicine is dedicated to bringing medication-assisted treatment from those recovering from opioid addiction, essential during a pandemic.

The faculty and staff in our College continue to demonstrate excellence. Some recent examples include Dr. Seefeldt, Associate Dean for Academic Programs, being selected as one of the four finalists for the Honors College Teacher of the Year Award. Sue Fierstine, Budget & Administrative Coordinator, was nominated for SDSU's Outstanding Professional Award. On the student side, Abby Sirek, a P4 student, and her poster titled, "Assessing the Impact of an Educational Campaign on Patient Awareness and Perceptions of Expanded Pharmacy Services in South Dakota," were featured at the "Research's Top 12: Poster Session Forum" during APhA's Annual Meeting. APhA typically features a few hundred posters but only a select few receive this honor. This is a significant achievement!

This March, the College received word that the Master of Public Health has been accredited by the Council on Education for Public Health (CEPH). The Master of Public Health is a joint program between USD and SDSU. This is a huge step forward for what is still a relatively new program and will help ensure that we continue to meet the public health needs of the state and region. In addition, our Medical Lab Science (MLS) program received several impressive rankings in College Factual's 2021 Rankings Analysis and Online Schools Report. This is just one of several recent recognitions for MLS.

The College's research program continues to grow. Dr. Reineke received an RO1 grant to help eradicate tuberculosis, in collaboration with colleagues in South Africa. He is the first faculty member in the College of Pharmacy & Allied Health Professions to receive an international collaborative RO1 grant. At the upcoming Board of Regents meeting, we are also hoping to receive approval to begin offering an M.S. in Pharmaceutical Sciences in Fall 2021.

Four finalists have been selected for the dean of the College of Pharmacy & Allied Health Professions. Interviews took place the week of March 15th. It is anticipated a dean will be chosen this spring. Other searches include a post doc, population health faculty position, grant proposal specialist, medicinal chemistry faculty position, director of clinical education in respiratory care, instructor for respiratory care and pharmacy practice program assistant.

In closing, we are quickly approaching the end of the 2020-21 academic year. We are currently focused on planning an in-person Hooding Ceremony for our P4 students, along with a more traditional commencement ceremony. It is exciting to have the chance to celebrate the accomplishments of our students in a more traditional, yet safe, manner.

Please stop by the office in you are back in Brookings in the months to come.

**DAN HANSEN**



# SDSU's Student Collaboration for the ADVANCEMENT and PROMOTION of PHARMACY

Anna Mohr // SCAPP/APhA-ASP SDSU Chapter President



Hello from SCAPP!

SCAPP has been very busy this past semester, and I am excited to share with you what we have been doing!

In January, the Pediatric Pharmacy Association started a food drive and delivered the donations to the Ronald McDonald House in Sioux falls. We are happy that we could

support sick children and their families during these trying times. Our Pre-Pharmacy Committee also coordinated an interview night in January. At this event, Pre-Pharmacy students were able to practice for the entrance interview as well as receive tips and tricks from current professional students.

In March, our chapter of the American Society of Health-System Pharmacists hosted Dr. Anna Meyer to speak about her role. She is a long-term care pharmacist at Avera who has been an integral part of Avera's COVID immunization process in long term care facilities. We really appreciate her sharing her personal experience working with this specific patient population during these difficult times. ACCP has also been working hard and started a CV swap for all levels of pharmacy students to receive feedback from professors.

Our chapter of the National Community Pharmacists Association is hosting an over the counter case competition for members to practice recommendations and win prizes at the same time. The Public Health and Education Committee is taking their education online by having members create educational videos and post them on our Facebook page for poison prevention week.

We recently hosted our local Patient Counseling Competition this past month and would like to congratulate the winner, Mariah Roeman. Mariah is a third year pharmacy student and our P3 Patient Care Coordinator. She represented SDSU at the National Patient Care Competition at APhA Annual. This past week, we sponsored 15 students to attend the virtual APhA Annual Meeting. While we miss the traditional in-person conference, it was amazing to see members coming together from all across the country virtually.

At our next meeting, we will be completing our election process. It is an exciting time to see the future leaders of the organization step up to represent the pharmacy profession!

Sincerely,

**ANNA MOHR**



pharmacy  
technicians university



## PHARMACY TECHNICIANS UNIVERSITY

### THE BEST-IN-CLASS TRAINING PROGRAM FOR PHARMACY TECHNICIANS

#### FAQS

##### What is Pharmacy Technicians University (PTU)?

A comprehensive online pharmacy technician training program, designed for technicians of all levels that includes exam prep for the PTCE® and ExCPT exams, as well as the CSPT™ exam. PTU is engaging, self-paced, and interactive!

##### What does it cost?

SDPhA is committed to providing this program at the most reasonable rates possible. For more information: [sdpha@sdpha.org](mailto:sdpha@sdpha.org)

##### Why should I use PTU?

You will get:

- Easy-to-use and interesting course materials like videos and slides
- Modules divided into short parts you can complete at your own pace
- Knowledge checks and learning activities to help you remember what you learned
- Web-based training for access from any Internet-connected computer
- Thorough exam prep for PTCE®, ExCPT, and CSPT™ exams

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PHARMACY  
TECHNICIANS  
UNIVERSITY  
*PTU ELITE: CSPT®  
PREP PROGRAM*

PREPARE YOUR TECHS FOR SUCCESS ON  
THE PTCB STERILE COMPOUNDING EXAM

The *Pharmacy Technicians University (PTU)* Elite CSPT® (Compounded Sterile Preparation Technician) Prep Program provides an efficient and affordable program to prepare your PTCB-certified techs to pass the PTCB CSPT® exam. This new online exam prep program includes didactic and simulation courses on essential compounding knowledge standards, and is convenient, interactive, and easy to use.

BENEFITS

- \* **Shorter Prep Time:** Trainees who complete this PTCB-recognized program can sit for the CSPT® exam with just 1 year of experience in compounded sterile preparation (versus the standard 3-year requirement)
- \* **High-Quality and Comprehensive:** Curriculum aligned with PTCB's high standards for CSPT® certification. Courses cover all relevant topics, including compliance requirements for USP <797> and USP <800>
- \* **Top Pass Rates:** PTU grads boast a 77% pass rate on the PTCE® exam — 20% higher than the national average

Now, currently-practicing, nationally-certified pharmacy technicians can participate in the *PTU* Elite CSPT® Prep Program, saving you money and saving your technicians time. Plus, you'll be better prepared for Board of Pharmacy audits and reviews, and to demonstrate your commitment to quality, medication safety, and a higher level of patient care.

The program curriculum includes 27 didactic hours and 32 simulation hours. See reverse for complete curriculum list.

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PTU ELITE: CSPT PREP PROGRAM CURRICULUM

INTRODUCTION

- Introduction & Orientation
- CSPT Training Questionnaire

BASIC PHARMACEUTICS

- Parenteral Dosage Forms
- Ratios
- Proportions

DOSAGE CALCULATIONS

- Weight-Based Dosages
- Dosage Calculations: Parenterals
- Dosage Calculations: Milliequivalents and Units

COMPOUNDING CALCULATIONS I

- Compounding Calculations
- Percentage Calculations
- Drug Concentration Calculations
- Dilution Calculations

COMPOUNDING CALCULATIONS II

- Infusion Calculations
- Alligation Calculations

PHARMACOLOGY REFERENCES

- CSPT® Medications List
- Pharmacology Key Points Reference
- Injectable Anticoagulants
- Dispensing Insulin and Other Injectable Medications

MEDICATION SAFETY

- Safety Data Sheets

INSTITUTIONAL PHARMACY PRACTICE

- Hospital: Medication Preparation
- Hospital: Medication Delivery
- Medication Disposal in the Hospital
- Dispensing Medications for Surgeries
- Medication Delivery in the Hospital
- Using Barcodes
- Hospital: Patient Safety Practices

REVIEW

- CSPT Practice Exam

STERILE COMPOUNDING I

- Sterile Compounding
- Sterile Compounding: Personal Protective Equipment
- Sterile Compounding: Aseptic Handwashing
- Simulation: Aseptic Hand Washing
- Sterile Compounding: The Laminar Flow Hood
- Laminar Flow Hood Simulation

STERILE COMPOUNDING II

- Sterile Compounding: Syringes and Needles
- Sterile Compounding: Supplies and Equipment
- Preparation of Sterile Compounds
- Using Aseptic Technique for Sterile Compounding
- Quality Standards and Requirements
- Maintaining Environmental Processes for Sterile Compounding
- Simulation: IV Fluid Preparation
- Simulation: IV Piggyback
- Simulation: IV Push
- Simulation: Manipulate Ampules
- Simulation: Reconstitute Lyophilized Powder
- Simulation: Parenteral Nutrition

STERILE COMPOUNDING SUPPLEMENTAL RESOURCES

- ASHP's Guidelines on Compounding Sterile Preparations
- ISMP's Guidelines for Safe Preparation of Compounded Sterile Preparations

CHEMOTHERAPY COMPOUNDING

- Chemotherapy Overview
- Chemotherapy Prep
- Simulation: Chemotherapy Agent Preparation

HAZARDOUS MEDICATION HANDLING

- ASHP's Guidelines on Handling Hazardous Drugs
- NIOSH List of Antineoplastic and Other Hazardous Drugs

DRUG INFORMATION RESOURCES

- Package Inserts Part I
- Package Inserts Part II
- Drug Information Resources

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## PHARMACY TECHNICIANS UNIVERSITY PTU ELITE: SOFT SKILLS PROGRAM

### SHARPEN YOUR TECHS' SOFT SKILLS TO IMPROVE TEAMWORK AND PATIENT CARE

Designed exclusively for the pharmacy technician role, the *Pharmacy Technicians University (PTU)* Elite: Soft Skills Program helps techs build and develop essential competencies that lead to safer, patient-centered care and improved staff retention.

With a focus on communication, empathy, leadership, conflict management, and teamwork, this online program combines practice-ready clinical resources with multimedia modules to foster harmonious, well-rounded pharmacy teams.

### BENEFITS

- \* **Enhance patient care** - Technicians learn actionable communication tactics to defuse tense situations, acknowledge sensitive topics, and put patients at ease.
- \* **Improve teamwork** - Technicians gain skills in collaboration, managing up, leadership, and more.
- \* **Support career development** - Investing in well-rounded technicians leads to lower turnover and higher job satisfaction.



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The *PTU* Elite: Soft Skills Program is an 11-didactic-hour online solution that builds soft skills competency using video simulations, case studies, and real-world scenarios that are specific to pharmacy technicians and the pharmacy setting. Each student receives a certificate upon successful completion of the program.

## PTU ELITE: SOFT SKILLS PROGRAM CURRICULUM

Interactive learning modules in each course make implementation of new skills easy, and include highly-relevant, concise, technician-specific information. Each student receives a certificate upon successful completion of the *PTU: Elite* Soft Skills Program.



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# 2020/2021 COMMERCIAL & LEGISLATIVE DISTRICT DUES CONTRIBUTIONS

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ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

HOME PHONE \_\_\_\_\_ MOBILE PHONE \_\_\_\_\_

EMPLOYER / COMPANY \_\_\_\_\_

WORK ADDRESS \_\_\_\_\_

WORK CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

WORK PHONE \_\_\_\_\_ WORK FAX \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

Do you wish to receive SDPhA email alerts regarding important pharmacy issues? ☐ YES ☐ NO

## COMMERCIAL & LEGISLATIVE FUND Memberships set by SDPhA C & L Executive Committee, 2007

### PHARMACY OR BUSINESS MEMBERSHIP \$100.<sup>00</sup> Includes One Individual Membership

NAME OF PHARMACY / BUSINESS \_\_\_\_\_

NAME OF INDIVIDUAL INCLUDED \_\_\_\_\_

### CORPORATE MEMBERSHIP \$200.<sup>00</sup> Two or more stores of the same corporation

NAME OF CORPORATION \_\_\_\_\_

NAME OF INDIVIDUAL INCLUDED \_\_\_\_\_

### INDIVIDUAL MEMBERSHIP

☐ \$50 LEVEL ☐ \$75 LEVEL ☐ OTHER \$ \_\_\_\_\_

### DISTRICT DUES Circle your District

ABERDEEN – \$20.<sup>00</sup> BLACK HILLS – \$20.<sup>00</sup> HURON – \$10.<sup>00</sup> MITCHELL – \$10.<sup>00</sup> MOBRIDGE – \$10.<sup>00</sup>

ROSEBUD – \$10.<sup>00</sup> SIOUX FALLS – \$20.<sup>00</sup> WATERTOWN – \$20.<sup>00</sup> YANKTON – \$15.<sup>00</sup>

**TOTAL ENCLOSED** \$ \_\_\_\_\_

MAIL TO: SD PHARMACISTS ASSOCIATION, BOX 518, PIERRE, SD 57501-0518 / FAX: 605-224-1280



Have you ever wondered how your Well-Being compares to others? Consider investing six minutes in your well-being. The Well-Being Index is a brief online self-assessment, invented by the Mayo Clinic and brought to you through a partnership with the American Pharmacists Association (APhA), which provides you immediate individualized feedback including tools and local and national resources to address your well-being. You can set-up the frequency you wish to assess your well-being and track your progress.

Your information and score are private and your individual score will not be shared with APhA or anyone else. You do not have to be an APhA member to participate.


TAKE THE SURVEY NOW  
IN A FEW EASY STEPS:

1. Go to: [www.mywellbeingindex.org/signup](http://www.mywellbeingindex.org/signup)
2. If asked for a participation code, use APhA
3. Register (approx. 3 minutes)
4. Take the survey (approx. 3 minutes)







# 2020 Recipients of the “Bowl of Hygeia” Award




Barry Rich  
Alabama




Robert Kronenberg  
Arizona




Mike Smets  
Arkansas




Robert Scheidtman  
California




Debra Devereaux  
Colorado




Mark Petrucci  
Connecticut




Hooshang Shanehsaz  
Delaware




Humberto Martinez  
Florida




Drew Miller  
Georgia




Wendy Iwasaki  
Hawaii




David Mikus  
Illinois




Tom DeVille  
Indiana




Peter Fay  
Iowa




Mike Bellesine  
Kansas




Bob Oakley  
Kentucky




Stephen Hill  
Louisiana




Kevin Holland  
Maine




Carol Stevenson  
Maryland




Todd Brown  
Massachusetts



The “Bowl of Hygeia”




Carrie Germain  
Michigan




Kendra Metz  
Minnesota




Ann Franklin  
Mississippi




Marty Michel  
Missouri




Howard Beall  
Montana




Christopher Shaffer  
Nebraska




Daniel Heller  
Nevada



Thomas Algozzine  
New Hampshire




Ed Rucki  
New Jersey




Chris Woodul  
New Mexico




Amina Abubakar  
North Carolina



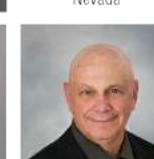
David Sandberg  
North Dakota




Troy Gahm  
Ohio




Linda Howrey  
Oregon




Gerard O'Hare  
Pennsylvania



Tracey Iaveira  
Rhode Island




Jenny Moss  
South Carolina




Doug Johnson  
South Dakota




Roger Davis  
Tennessee




Takova Wallace-Gay  
Texas




Paige Patterick  
Utah




Rob Carpenter  
Vermont




Mark Vaughan  
Virginia




Don Downing  
Washington



Jose Diaz-Luna  
Washington DC



Ron Mabie  
Wisconsin



Antoinette Brown  
Wyoming

Photo Not Available  
Roger Paganelli  
New York

The Bowl of Hygeia award program was originally developed by the A. H. Robins Company to recognize pharmacists across the nation for outstanding service to their communities. Selected through their respective professional pharmacy associations, each of these dedicated individuals has made uniquely personal contributions to a strong, healthy community. We offer our congratulations and thanks for their high example. The American Pharmacists Association Foundation, the National Alliance of State Pharmacy Associations and the state pharmacy associations have assumed responsibility for continuing this prestigious recognition program. All former recipients are encouraged to maintain their linkage to the Bowl of Hygeia by emailing current contact information to [awards@naspa.us](mailto:awards@naspa.us). The Bowl of Hygeia is on display in the APhA History Hall located in Washington, DC.

20 • South Dakota Pharmacist

# Bowl of Hygeia Award Nomination

Minimum Selection Criteria

- Licensed to practice in South Dakota
- Not a previous recipient of this award
- Outstanding record of community service, which apart from his/her specific identification as a pharmacist reflects well on the profession
- Award not presented posthumously

Nominee’s Full Name: \_\_\_\_\_ (Nickname)

Nominee’s Mailing Address: \_\_\_\_\_ (City/State/Zip)

Practice Site: \_\_\_\_\_ (City/State/Zip)

College of Pharmacy Nominee Graduated From: \_\_\_\_\_ (Year Graduated)

List pharmacy jobs held:

List positions or honors in pharmacy organizations:

List community service activities (including any elected or appointed positions in local, county or state government; membership in and positions held in various community and charitable organizations):

Name of spouse and any other family information:  
\_\_\_\_\_  
\_\_\_\_\_

This individual was nominated by \_\_\_\_\_ District of SDPhA.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(District Officer, Nominating Person, or Nominee)

21 • Spring Edition 2021



# Distinguished Young Pharmacist Nomination

Minimum Selection Criteria:

- Entry degree in pharmacy received less than ten (10) years ago
- Licensed to practice in South Dakota
- Member of SDPhA in the year selected
- Practiced community, institutional, or consulting pharmacy in the year selected
- Participated in national pharmacy association activities, professional programs, state association activities and/or community service

Nominee’s Full Name: \_\_\_\_\_  
(Nickname)

Nominee’s Mailing Address: \_\_\_\_\_  
(City/State/Zip)

Practice Site: \_\_\_\_\_  
(City/State/Zip)

College of Pharmacy Nominee Graduated From: \_\_\_\_\_  
(Year Graduated)

List pharmacy jobs held:  
\_\_\_\_\_  
\_\_\_\_\_

List memberships, positions or honors in pharmacy organizations:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List community/church activities:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List national and state association activities or other professional programs:  
\_\_\_\_\_  
\_\_\_\_\_

Additional comments why this nominee should receive this award (to be completed by nominating individual).  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(District Officer, Nominating Person, or Nominee)

# Hustead Award Nomination

Minimum Selection Criteria:

- Licensed to practice in South Dakota
- Not a previous recipient of this award
- Made significant contribution(s) to the profession
- Not solely based on community service
- Demonstrates the dedication, resourcefulness, service and care that has made pharmacy one of the most respected professions in our country

Nominee’s Full Name: \_\_\_\_\_  
(Nickname)

Nominee’s Mailing Address: \_\_\_\_\_  
(City/State/Zip)

Practice Site: \_\_\_\_\_  
(City/State/Zip)

College of Pharmacy Nominee Graduated From: \_\_\_\_\_  
(Year Graduated)

List pharmacy jobs held:  
\_\_\_\_\_  
\_\_\_\_\_

List positions or honors in pharmacy organizations:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List significant professional contributions:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List community service activities:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of spouse and any other family information:  
\_\_\_\_\_  
\_\_\_\_\_

This individual was nominated by \_\_\_\_\_ District of SDPhA.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(District Officer, Nominating Person, or Nominee)



# SD Salesperson of the Year Award Nomination

Minimum Selection Criteria

- Salesperson operating in South Dakota
- Individual and/or company has shown outstanding support of pharmacy in South Dakota

Nominee’s Full Name: \_\_\_\_\_ (Nickname)

Nominee’s Mailing Address: \_\_\_\_\_ (City/State/Zip)

Practice Site: \_\_\_\_\_ (City/State/Zip)

Please identify why this nominee should receive this award (to be completed by nominating individual).

Signature: \_\_\_\_\_  
(District Officer, Nominating Person, or Nominee)

Date: \_\_\_\_\_

# SD Technician of the Year Award Nomination

Minimum Selection Criteria

- Registered Pharmacy Technician working in South Dakota.
- Outstanding service record
- Demonstrates excellent pharmacy technician skills in a pharmacy practice setting in the year selected

Nominee’s Full Name: \_\_\_\_\_ (Nickname)

Nominee’s Mailing Address: \_\_\_\_\_ (City/State/Zip)

Practice Site: \_\_\_\_\_ (City/State/Zip)

Please identify why this nominee should receive this award (to be completed by nominating individual).

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



# CONTINUING EDUCATION *for* PHARMACISTS

## CDC: Vaccine Storage and Handling, Part 1: Plans, Staff Education

..... Knowledge-based CPE

### Course Development:

The following public report was published by the Centers for Disease Control and Prevention (CDC).

### Course Development / Sponsorship:

This course is sponsored by the South Dakota State University College of Pharmacy and Allied Health Professions, Brookings, SD.

Permission has been granted by the U.S. Food and Drug Administration for use of this material in the development of CPE activities for pharmacists.

**GOAL:** To provide pharmacists with actionable information on CDC recommendations for vaccine storage and handling plans and staff education.

## LEARNING OBJECTIVES:

1. Summarize the critical nature of appropriate storage and handling of vaccines;
2. Explain the protocols that should be detailed in a facility's vaccine storage and handling plan;
3. Define the vaccine-handling term, "cold chain";
4. Name the critical components of an appropriate emergency vaccine retrieval and storage plan;
5. Outline the responsibilities to be undertaken by a facility's primary vaccine coordinator or alternate coordinator.

## CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)

[Vaccine Storage and Handling](#)

### Vaccine Storage and Handling

There are few immunization issues more important than the appropriate storage and handling of vaccines. The success of efforts against vaccine-preventable diseases is attributable in part to proper storage and handling of vaccines. Vaccines exposed to temperatures outside the recommended ranges can have reduced potency and protection. Storage and handling errors can cost thousands of dollars in wasted vaccine and revaccination. Errors can also result in the loss of patient confidence when repeat doses are required.

It is better to not vaccinate than to administer a dose of vaccine that has been mishandled. Vaccine management, including proper storage and handling procedures, is the basis on which good immunization practices are built.

Vaccines must be stored properly from the time they are manufactured until they are administered. Assuring vaccine quality and maintaining the cold chain is a shared responsibility among manufacturers, distributors, public health staff, and health-care providers.

A proper cold chain is a temperature-controlled supply chain that includes all equipment and procedures used in the transport and storage and handling of vaccines from the time of manufacture to administration of the vaccine.

By following a few simple steps and implementing best storage and handling practices, providers can ensure that patients will get the full benefit of vaccines they receive.

### Vaccine Storage and Handling

Vaccine-preventable disease rates decreased in part because of proper storage and handling. Storage and handling errors

- decrease potency and reduce effectiveness and protection
- cost thousands of dollars in wasted vaccine and revaccination
- loss of patient confidence

It is better to not vaccinate than to administer a dose of vaccine that has been mishandled

### Cold Chain (a temperature-controlled supply chain)

- Vaccines must be stored properly from the time they are manufactured until they are administered
- Shared responsibility among manufacturers, distributors, public health staff, and healthcare providers

### Storage and Handling Plans

Every facility should have detailed written protocols for routine and emergency vaccine storage and handling, and they should be updated annually. These policies and procedures should be available in writing as a reference for all staff members and easily accessible.

A routine storage and handling plan provides guidelines for daily activities, such as:

- Ordering and accepting vaccine deliveries
- Storing and handling vaccines
- Managing inventory
- Managing potentially compromised vaccines

Every facility should also have an emergency vaccine retrieval and storage plan. The plan should identify a backup location where the vaccines can be stored. Considerations when choosing this site include appropriate storage units, temperature monitoring capability, and a back-up generator that can maintain power to the vaccine storage units. Potential back-up locations might include a local hospital, pharmacy, long-term care facility, or the Red Cross.

There should be an adequate supply of packing materials and portable refrigerators and freezers or qualified containers and packouts on hand to accommodate the facility's largest annual vaccine inventory (e.g., flu season). A refrigerated truck may be needed to move large inventories of vaccine.

Power outages or natural disasters are not the only events that can compromise vaccine. Forgotten vials of vaccine left out on the counter or doses of vaccine stored at improper temperatures due to a storage unit failure are other examples of how vaccines can be potentially compromised. Protocols after an event will vary depending on individual state or agency policies.

Contact the local or state health department immunization program (hereafter referred to as "immunization program"), vaccine manufacturer(s), or both, for appropriate actions or guidelines that should be followed for all potentially compromised vaccines. Do not discard vaccines unless directed to by the immunization program and/or the manufacturer.

### Staff Training and Education

Assign a primary vaccine coordinator who is responsible for ensuring that vaccines are stored and handled correctly at each facility.

Designate at least one alternate (back-up) vaccine coordinator who can perform these responsibilities in the absence of the primary coordinator.

These responsibilities include, but are not limited to, the following tasks:

- Ordering vaccines
- Overseeing proper receipt and storage of vaccine deliveries
- Organizing vaccines within the storage unit(s)
- Temperature monitoring of the storage unit(s) (i.e., current temperature at least two times each workday).
- Recording temperature readings on a log
- Daily physical inspection of the storage unit(s)
- Rotating stock so that vaccines closest to their expiration dates will be used first
- Monitoring expiration dates and ensuring that expired vaccines and diluents are removed from the storage unit(s) and not administered to patients
- Responding to potential temperature excursions
- Overseeing proper vaccine transport
- Maintaining all appropriate vaccine storage and handling documentation, including temperature-excursion responses
- Maintaining storage equipment and maintenance records
- Maintaining proper documentation for the VFC program in participating facilities
- Ensuring that designated staff is adequately trained
- Assign responsibilities to a primary vaccine coordinator; designate at least one alternate (back-up) vaccine coordinator



# CONTINUING EDUCATION *for* PHARMACISTS

A physician partner or member of management should be directly involved with the clinical staff that is responsible for vaccine storage and handling. Management staff should have a clear understanding of the vaccine replacement costs and clinical implications of mismanaged vaccines.

All personnel who handle or administer vaccines should be familiar with the storage and handling policies and procedures for their facility. This includes not only those who administer vaccines, but also anyone who delivers or accepts vaccine shipments and anyone who has access to the unit(s) where vaccines are stored. Vaccine storage and handling training should be provided to all new personnel who handle or administer vaccines, including temporary staff.

Continuing education for staff is essential when new vaccines are stocked and when there are any changes to the storage and handling guidelines for a particular vaccine. CDC has a free web-based storage and handling module as part of the online training tool, *"You Call the Shots."*

Continuing education credit for a variety of healthcare professionals and a certificate of completion are available. Many immunization programs and professional organizations also offer vaccine storage and handling training programs.

## Vaccine Storage and Handling

This chapter provides an overview of best practice guidance for storage and handling. CDC's Vaccine Storage and Handling Toolkit[2MB, 82 pages], contains comprehensive information on best practices and recommendations. Manufacturers' product information and package inserts include the most current information about the storage and handling of specific vaccines. Refer to CDC's Storage and Handling webpage for links to these and other resources. Participants in the Vaccines for Children (VFC) program or those who have any vaccines purchased with public funds should consult their state or local immunization program for specifics because some program requirements may differ from the information contained in the Vaccine Storage and Handling Toolkit.

## CDC Acknowledgement

The editors thank Donna Weaver, Patricia Beckenhaupt, and JoEllen Wolicki, National Center for Immunization and Respiratory Diseases, CDC, for their contribution to this chapter.

## Selected References

1. Centers for Disease Control and Prevention (CDC). General recommendations on immunization: recommendations of the Advisory Committee on Immunization Practices. MMWR 2011;60(no. RR-2): 23-27.
2. CDC. Recommendations and Guidelines: Storage and Handling
3. Food and Drug Administration (FDA)
4. Manufacturers' Product Information
5. National Institute of Standards and Technology (NIST). Thermal Analysis of Refrigeration Systems Used for Vaccine Storage, 2009, Household, Dormitory-Style Refrigerators and Data Loggers.
6. Immunization Action Coalition Storage and Handling Handouts

## Learning Assessment

Active learning quiz questions and Learning Assessment test questions for this course were developed by the South Dakota State University College of Pharmacy and Allied Health Professions.

## Financial Disclosure

The developer of this course has no financial relationships to declare.

## CDC: Vaccine Storage and Handling, Part 1: Plans, Staff Education

*Learning Assessment Post-test. Select correct answer(s) for each question.*

1. Vaccine management, including proper storage and handling procedures includes the following principles:
  - A. Good vaccine management is the basis on which good immunization practices are built.
  - B. A proper cold chain is a temperature-controlled supply chain that includes all equipment and procedures used in the transport and storage and handling of vaccines from the time of manufacture to administration of the vaccine
  - C. It is better to not vaccinate than to administer a dose of vaccine that has been mishandled.
  - D. All of the above
2. Every vaccine-administering facility should have detailed written protocols, to include
  - A. Routine emergency vaccine storage and handling,
  - B. Protocols updates every 3 years.
  - C. Policies and procedures available in writing as a reference for all staff members, easily accessible.
  - D. All of the above.
3. Facility written protocols for vaccine handling and storage should include.
  - A. Managing potentially compromised vaccines.
  - B. Ordering and accepting vaccine deliveries.
  - C. Managing inventory.
  - D. All of the above.
4. Potentially compromised vaccines should be discarded immediately.
  - A. True
  - B. False
5. A properly managed 'cold chain' is a temperature-controlled supply chain that includes all equipment and procedures used in the transport and storage and handling of vaccines from the time of manufacture to administration of the vaccine.
  - A. True
  - B. False
6. Maintaining a secure 'cold chain' is a shared responsibility among manufacturers, distributors, public health staff, and healthcare providers.
  - A. True
  - B. False
7. EMERGENCY vaccine retrieval and storage plan should be a written plan which.
  - A. Is accessible to management personnel only.
  - B. Identifies back-up storage location(s) with appropriate storage units, temperature monitoring capability, and back-up generator that can maintain power to the vaccine storage units.
  - C. Include an adequate supply of packing materials and portable refrigerators and freezers or qualified containers and packouts, or refrigerated truck.
  - D. All of the above.
8. A facility's primary vaccine coordinator should ensure that storage unit temperatures monitored once weekly and recorded in a log.
  - A. True
  - B. False
9. Monitor expiration dates and remove expired vaccines and diluents from the storage unit.
  - A. True
  - B. False
10. Vaccine storage and handling training do NOT need to be provided to temporary staff.
  - A. True
  - B. False
11. Management staff should be fully educated and up to date, on vaccine replacement costs and the clinical implications of mismanaged vaccines.
  - A. True
  - B. False
12. Continuing education for staff is essential when new vaccines are stocked and when there are any changes to the storage and handling guidelines for a particular vaccine.
  - A. True
  - B. False



## CDC: Vaccine Storage and Handling, Part 1: Plans, Staff Education

Knowledge-based CPE

To receive 1.0 contact hours (0.10 CEUs) of continuing education credit, preview and study the attached article and answer the 12-question post-test by circling the appropriate letter on the answer form below and completing the evaluation. A test score of at least 75% is required to earn credit for this course. If a score of 75% (9/12) is not achieved on the first attempt, another answer sheet will be sent for one retest at no additional charge.

Participants should verify credit upload to their NABP accounts within two weeks of submission of this answer sheet to insure appropriate credit award.



South Dakota State University College of Pharmacy is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education. The Universal Program Identification number for this program is: #0063-0000-18-085-H06-P.

**Learning Objectives for Pharmacists:** 1. Summarize the critical nature of appropriate storage and handling of vaccines; 2. Explain the protocols that should be detailed in a facility's vaccine storage and handling plan; 3. Define the vaccine-handling term, "cold chain"; 4. Name the critical components of an appropriate emergency vaccine retrieval and storage plan; 5. Outline the responsibilities to be undertaken by a facility's primary vaccine coordinator or alternate coordinator.

**Circle Correct Answer:**

1. A B C D	4. A B	7. A B C D	10. A B
2. A B C D	5. A B	8. A B	11. A B
3. A B C D	6. A B	9. A B	12. A B

**COURSE EVALUATION:** must be completed for credit.

	DISAGREE				AGREE			
Material was effectively organized for learning:	1	2	3	4	5	6	7	
Content was timely and applicable for re-licensing / recertification:	1	2	3	4	5	6	7	
Each of the stated learning objectives was satisfied:	1	2	3	4	5	6	7	

List any learning objectives above not met in this course: \_\_\_\_\_

List any important points that you believe remain unanswered: \_\_\_\_\_

Course material was evidence-based, balanced, noncommercial:	1	2	3	4	5	6	7	
List any details relevant to commercialism: _____								

Learning assessment questions appropriately measured comprehension:	1	2	3	4	5	6	7	
Length of time to complete course was reasonable for credit assigned:	1	2	3	4	5	6	7	

Approximate amount of time to preview, study, complete and review this 1.0 hour CE course: \_\_\_\_\_

**Comments:** List any future CE topics of interest and related skill needs: \_\_\_\_\_

NAME: \_\_\_\_\_ RPh LICENSE #: \_\_\_\_\_ TECHNICIAN #: \_\_\_\_\_  
STREET: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_ PH: \_\_\_\_\_ INTEREST IN ADDITIONAL CE COURSES? Y / N  
e-PROFILE ID NUMBER (ePID): \_\_\_\_\_ DATE OF BIRTH (MM/DD): \_\_\_\_\_

Course release date: Sept. 1, 2018 / Expiration date: Sept. 1, 2021 / Target audience: Pharmacists

Please mail this **completed answer sheet** with your check of \$8.00 to SDSU College of Pharmacy-C.E. Coord., Box 2202C, Brookings, SD 57007. Office Ph: 605-688-6646 / Scout.Forbeshurd@sdstate.edu

# CLINICAL NOTE

## BEST PRACTICES

The light at the end of the tunnel is approaching as Operation Warp Speed delivered COVID-19 vaccines to healthcare workers and LTC residents in December 2020. There will certainly be bumps in the road, supply chain delays and allocations, which means that most patients will not be able to receive COVID-19 vaccines until mid- to late 2021.

The federal government has pre-paid for millions of vaccine doses and will be distributing them to health care providers at no cost, which means that when government-supplied vaccine becomes available at community pharmacies, you will not have to pay to acquire it. **For vaccine doses supplied by the federal government, pharmacies may NOT charge patients for the vaccine itself, but may bill payers for the administration.** The federal government has mandated coverage under Medicare Part B, Medicaid and Commercial insurance with no out-of-pocket costs to patients. The CARES Act also provides for reimbursement for uninsured patients through the Health Resources & Services Administration (HRSA).

PAYER	COVERAGE & BILLING CONSIDERATIONS
<b>Medicare Part B</b>	<ul style="list-style-type: none"><li>• PHARMACY must enroll as Part B Provider (either as supplier type Pharmacy or Mass Immunizer)</li><li>• Medicare Advantage patients will have vaccine administration covered under FFS</li><li>• You will need a medical billing intermediary such as FDS, OmniSys, Change Healthcare, or EBS</li><li>• Two-dose vaccine administration reimbursement = 1st dose \$16.94, 2nd dose \$28.39</li><li>• Single-dose vaccine administration reimbursement = \$28.39</li></ul>
<b>Medicaid</b>	<ul style="list-style-type: none"><li>• May be covered under pharmacy or medical benefit</li><li>• All programs required to cover – FFS and Medicaid MCO</li><li>• Reimbursement will vary</li></ul>
<b>Commercial</b>	<ul style="list-style-type: none"><li>• May be covered under pharmacy or medical benefit</li><li>• Payers MUST cover it for both in-network AND out-of-network providers</li><li>• Reimbursement will vary</li></ul>
<b>Uninsured</b>	<ul style="list-style-type: none"><li>• Pharmacies may bill HRSA – managed by “Optum Pay” (must be contracted) – not the same as OptumRx</li></ul>

The coverage for COVID-19 vaccine may be under the pharmacy benefit (via NCPDP standard) or the medical benefit (via CPT codes). Here is a summary of billing information known to PAAS National® as of December 23, 2020.

PHARMACY BENEFIT*						MEDICAL BENEFIT		
Vaccine	NDC-11	Billing Quantity & Units	Days' Supply	Dose 1	Dose 2	CPT Codes	Dose 1	Dose 2
Pfizer BioNTech1	59267-1000-01	0.3 mL	1	SCC-02 to	SCC-06 to	91300	0001A	0002A
Moderna2	80777-0273-10	0.5 mL	1	indicate “first dose”	indicate “final dose”	91301	0011A	0012A

(1) Pfizer BioNTech vaccine has a package size of 1.5 mL and will deliver 5 doses of 0.3 mL

(2) Moderna vaccine has a package size of 5 mL and will deliver 10 doses of 0.5 mL

**NCPDP also recommends that pharmacy claims will need to submit the following for ZERO-COST vaccines:**

1. Professional Service Code (440-E5) of “MA” (Medication Administered)
2. Ingredient Cost Submitted (409-D9) of \$0.00 or \$0.01
3. Incentive Amount Submitted (438-E3) to request payment for administration (e.g., \$16.94 or \$28.39)
4. Basis of Cost Determination (423-DN) of “15” (free product or no associated cost)

In general, vaccine claims are low risk for PBM audits; however, audits are always possible, and you should be prepared with good documentation. The PREP Act authorized pharmacists to order and administer the COVID-19 vaccine. PAAS recommends pharmacies create a placeholder “prescription” for your records; many pharmacies already do this when billing for other vaccines under protocol. Additionally, it will be necessary to document the administration through a Vaccine Administration Record as well as provide the patient with an EUA fact sheet (in place of a vaccine information sheet).

**PAAS Tips:**

- See CDC website for additional COVID-19 vaccine product information
- See NCPA's COVID-19 Vaccine Information page for numerous resources
- NCPDP Emergency Preparedness Guidance – COVID-19 Vaccines 1.0 has a billing matrix for numerous scenarios
- See your medical billing intermediary for more details on billing Medicare Part B
- See your state Medicaid agency, health department and pharmacy association for local resources
- See HRSA website for information about uninsured patients

PAAS National® is committed to serving community pharmacies and helping keep hard-earned money where it belongs. Contact us today at (608) 873-1342 or info@paasnational.com to see why membership might be right for you.

By Trenton Thiede, PharmD, MBA, President at PAAS National®, expert third party audit advice and FWA/HIPAA compliance.

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# HELP!

## AUDITED PRESCRIPTION

### IS WAITING FOR PICKUP

Over the last few years, there has been an increase in the number of PBMs auditing prescriptions within the current billing cycle. These are often desk audits containing one or two prescription claims. Many of these audits will request a copy of the prescription as well as the signature log. This creates confusion on how, and when, to respond to the audit if the prescription is still waiting to be picked up.

Here is a recent example of a Prime Therapeutics audit to illustrate this point:

1. Claim submitted January 12, 2021
2. Desk audit received January 13, 2021 – request for prescription + signature log
3. Pharmacy call to PAAS National® on January 18, 2021 – prescription not dispensed as of this date
4. Response deadline January 27, 2021

What should the pharmacy do?

**Option 1** – respond immediately; submit a copy of the prescription with a note that the prescription has not yet been dispensed

**Option 2** – wait to respond until the prescription is dispensed; then send a copy of the prescription and signature log

Note: Prime Therapeutics has a 14-day return to stock requirement. Therefore, if the prescription is NOT dispensed by January 26, the pharmacy should reverse the claim and send copy of the prescription plus a note that the medication was not picked up and the claim has been reversed.

- PAAS Tips:**
- Submit the requested documentation that exists at the time of your response
  - If one of the requested documents has not yet been created (i.e., a signature log), then include a note to the auditor explaining why this document is not included
  - There is no extra credit for responding to audits early
  - Pharmacies must respond to all PBM audits (even if claims have been reversed)
  - If you find a billing error prior to response, contact the auditor for direction as some audits explicitly indicate it is acceptable to resubmit claims, while others say the exact opposite

*PAAS National® is committed to serving community pharmacies and helping keep hard-earned money where it belongs. Contact us today at (608) 873-1342 or [info@paasnational.com](mailto:info@paasnational.com) to see why membership might be right for you.*

**By Trenton Thiede, PharmD, MBA, President at PAAS National®, expert third party audit advice and FWA/HIPAA compliance.**

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## 2021 Scholarship Winners

Pharmacists Mutual is proud to support students who are interested in serving in an independent or small chain community pharmacy or an underserved geographic or cultural community. Each student listed received a \$2,500 scholarship.

**Brianna O'Gary** North Dakota State University  
**Catherine Hayes** University of Illinois at Chicago  
**Colin Collery** University of Illinois at Chicago  
**Ganiat Asuni** Philadelphia College of Osteopathic Medicine  
**Hayden Wooldridge** University of Mississippi  
**Hassan Khatib** Wayne State University  
**Kristian Tan** Keck Graduate Institute  
**Kayla Lucas** Virginia Commonwealth University  
**Kensey Hunt** St. Louis College of Pharmacy  
**Kinsey McClure** University of South Carolina

**Madison Yoakum** Ohio Northern University  
**Olivia Denny** University at Buffalo, The State University of New York  
**Matthew Brock** Medical University of South Carolina  
**Megan Breier** Ohio Northern University  
**Marlee Clements** Mercer University  
**Megan Hardy** South Dakota State University  
**Morgan Rambo** Samford University  
**Sarah Erlingheuser** University of Connecticut  
**Steven Kramer** St. Louis College of Pharmacy  
**Sarah Lankford** Presbyterian College

## ACCEPTING APPLICATIONS FOR 2022 SCHOLARSHIPS

October 1, 2021 – December 1, 2021 • [phmic.com/scholarship/](https://phmic.com/scholarship/)



# OBITUARIES

## *Paul F. Van De Rostyne*



Paul F. Van De Rostyne, age 66 of Yankton, SD passed away on Wednesday, February 17, 2021 at Avera Sacred Heart Hospital in Yankton. Memorial services will be 2:00 PM, Wednesday, February 24, 2021 at Trinity Lutheran Church, Yankton, SD with Rev. Jeff Otterman officiating. Visitation will be one hour prior to the service at the church. Due to COVID-19 concerns Paul's services will be live streamed at:

<https://www.facebook.com/opsahlkostel/live>. Those wishing to attend in person are required to wear a mask and to practice social distancing guidelines. Online condolences may be made at: [www.opsahl-kostelfuneralhome.com](http://www.opsahl-kostelfuneralhome.com). Arrangements are under the direction of Opsahl-Kostel Funeral Home & Onsite Crematory, Yankton, SD.

Paul F. Van De Rostyne, son of Joseph and Bonnie, was born in Sioux Falls, SD and died Wednesday, February 17, 2021 at Avera Sacred Heart Hospital, Yankton, SD at the age of 66.

When Paul was in the 3rd grade, his family moved to Aberdeen, SD. Paul studied Pharmacy at South Dakota State University and worked in several retail pharmacies for 35 years. Paul retired in April 2020 due in large part to the pandemic.

Paul was married to Belinda (Linda) Vilhauer July 7, 1979 and they lived for the most part in Sioux Falls, where they had two children: Zachary 1984 and Brian 1991. Paul was an

avid outdoorsman who enjoyed fishing, hunting, camping, and canoeing, particularly in the Boundary Waters Canoe Area in Minnesota. These hobbies were never more fun than when shared with the people he loved. Paul had a love for good conversation and loved spending time with friends and family. Minnesota Vikings football games offered the perfect opportunity to banter both about the game he enjoyed and about life's eccentricities. In recent years spending time with his grandsons was amongst his favorite activities.

Paul was also known to his family and friends for his intellectual curiosity and ability; he had an encyclopedic memory for everything he read and received a full scholarship to Rensselaer Polytechnic University, the largest dollar amount scholarship awarded at that time in South Dakota. He was one of the most avid debaters around the family dinner table!

Paul enjoyed gardening and growing fruit trees and grape vines in the back yard. He was a great cook and made every meal he cooked special. His sons have both become good cooks in large part because Paul shared his talents with them. He spent many hours reading books in all genres and sportsman magazines. He also supported Ducks Unlimited, Pheasants Forever and the Sierra Club.

Paul will be deeply missed by his wife, Linda of Yankton; son, Zack (Kristi) Ethan (6) and Miles (3) of Hartford, SD and son, Brian of Sioux Falls; siblings: Peg, Pamm, Joe, Cathy, Greg, Bob, Rich and Tom; sibs-in-law: Dennis, Donald and Ricky.

Paul was preceded in death by his parents, grandparents, uncles, aunts, and several cousins.

## Classifieds

### *Classified Rates*

Classified ads are \$25 per five line ad per issue.

Additional lines will be billed at \$1 per line. Including your company logo will be an extra \$5 charge.

### *Place a Classified*

To place a classified ad, please write, email, call or fax:  
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