

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

In This Issue:

- New Executive Director's Introduction
- 2017 Convention Information and Registration



South Dakota Pharmacists Association

320 East Capitol
Pierre, SD 57501
(605)224-2338 phone
(605)224-1280 fax
www.sdpha.org

"The mission of the South Dakota Pharmacists Association is to promote, serve and protect the pharmacy profession."

President
Trisha Hadrick

President-Elect
Eric Grocott

Vice President
Erica Bukovich

Secretary/Treasurer
Lori Ollerich

Board Member
Bernie Hendricks

Board Member
Jan Lowe

Executive Director/Editor
Amanda Bacon
amanda@sdpha.org

South Dakota Board of Pharmacy

4001 W. Valhalla Blvd. Ste. 106
Sioux Falls, SD 57106
(605)362-2737
www.pharmacy.sd.gov

President
Diane Dady

Members
Tom Nelson, Lenny Petrik, Lisa Rave,
Dan Somsen

Executive Director
Kari Shanard-Koenders

Inspectors
Paula Stotz, Gary Karel, & Carol Smith

Support Staff
Beth Windschitl & Jessica Neal

Prescription Drug Monitoring
Program Director
Melissa DeNoon

Prescription Drug Monitoring
Program Assistant
Melanie Houg

SDPhA CALENDAR

Please note: If you are not on our mass e-mail system check our website periodically for district meetings and other upcoming events. They will always be posted at: <http://www.sdpha.org>.

SEPTEMBER

- 21 **South Dakota Board of Pharmacy Meeting** – The Lodge at Deadwood/
Russell Room, Deadwood,SD
1-5 p.m.
Registration Opens/Welcome Reception, SDPhA Annual Convention
The Lodge at Deadwood/Convention Center
5-7 p.m.
- 22 **SDPhA Annual Convention, Mountains of Opportunity in Pharmacy--**
The Lodge at Deadwood/Pine Crest Ballroom, Deadwood, SD
7:30 a.m.-6 p.m. CEs begin at 7:30 a.m.
- 23 **SDPhA Annual Convention, Mountains of Opportunity in Pharmacy--**
The Lodge at Deadwood/Pine Crest Ballroom, Deadwood, SD
8 a.m.-1 p.m. CEs begin at 8 a.m.

OCTOBER

14-18 NCPA Annual Meeting, Orlando, FL

Cover Photo Credit: Lance Bertram, Pierre, SD

SOUTH DAKOTA PHARMACIST

The SD PHARMACIST is published quarterly (Jan, April, July & Oct). Opinions expressed do not necessarily reflect the official positions or views of the South Dakota Pharmacists Association.

CONTENTS

FEATURES

- 2 SPhA Calendar
- 4 Director's Comments
- 5 President's Perspective
- 6 Board of Pharmacy
- 8 SDSU College of Pharmacy and Allied Health Professions
- 9 South Dakota Society of Health-System Pharmacists
- 10 Academy of Student Pharmacists
- 11 South Dakota Association of Pharmacy Technicians
- 12 SPhA Annual Convention Agenda**
- 13 SPhA Annual Convention Registration Form**
- 14 2017-2018 C&L and District Dues Contribution Form**

PHARMACY TOPICS

- 18 Financial Forum: Could You Improve Your Personal Finances Today/
- 20 Rx and the Law: Cybersecurity

CONTINUING EDUCATION

- 22 Pharmacist Consult: Zika Virus Disease - Public Health Concerns

ADVERTISERS

- 17 South Dakota Department of Health - Diabetes Pharmacy Toolkit
- 21 Pharmacists Mutual Companies
- 30 Classifieds

- 28 In Memoriam

Support of our advertisers makes it possible to bring you news in the form of a Journal. When making purchases and other equal factors, please give our advertisers the support they deserve.

DIRECTOR'S COMMENTS

Amanda Bacon | Executive Director



Ready for Adventuring

So...it's September, but technically still summer, so we'll go ahead and count this as the "summer" edition of the Journal, and I'll say thank you for your patience as I get my feet under me in this new position. We have certainly had a lot...and a lot coming fast and furious since I arrived!

On a recent summer weekend, my husband and I took our daughter to Mt. Rushmore, Keystone, and Bear Country. The beautiful Black Hills are home for me, so I have very eagerly awaited the day we could start to play tourist with her - and have her actually remember what she's seen and where she's been.

She's five now, and one of the things I truly adore about her most, are the crazy things she says. Sometimes they make me laugh out loud. Sometimes they make me really stop and think. On this day, she said something that made me do a little of both.

As she pulled her pink camo fishing hat down over her long, sun-bleached summer locks, she turned and looked at me and proudly declared, "Mommy! I'm ready for adventuring!"

I giggled at her partly because, well, she was cute, and has truly turned just about everything in my life into an adventure over the past five years. But, I also giggled because I have spent the entirety of my career up to this point in the communications business, and never once has it occurred to me to use "adventure" in that context. But I like it. A lot. So I'm going to start. Because it truly is how I feel about most of this summer, and coming to this office each day, to work for, and with, all of you - I'm adventuring!

When adventuring, I'm pretty sure there's some rule about, "Go big or go home," so my first day on the job was at the board retreat the beginning of June. The entire board hit the ground running with me - ready for, "adventuring" and each day since, has basically followed suit.

I've already had the opportunity to learn so much about the SDPhA's lengthy and impressive history, and I truly consider it an honor and a privilege to work with you to carry that legacy forward. I'm extraordinarily grateful to long-time executive director Sue Schaefer who has made something around a zillion introductions for me, and continues to answer my questions - no matter how out of left field, or crazy, they seem. She has been a tireless advocate for your profession for many years, and what's more - many of you call her friend. That speaks volumes to me, and is, in part why I was so thrilled to join this team. There's little doubt she leaves big shoes to fill. I'm grateful for her friendship, guidance, good nature, and that she continues to answer the phone when I call!

Sue, along with each of the board members have truly welcomed me like family. That's part of why the unexpected loss of Rob Loe came as such a blow. Rob's impact upon the profession in this state, as well as personally on most everyone he met, is beyond measure. He was a compassionate leader, and a tireless advocate for his patients and his profession. He was gracious. He was kind. He got things done. And he believed we are most strong when we stand together. Thank you to all who posted such kind words and remembrances on the SDPhA Facebook page - they were a source of comfort to many friends and family. Our thoughts and prayers continue to be with Rob's wife Val, and their four children.

I am excited to meet the rest of this "Pharm Pham" at the annual convention in Deadwood Sept. 22-23. If you have yet to register, please do so soon and plan to join us for, "adventuring" and "Mountains of Opportunity in Pharmacy." We have a special keynote addition to our line-up you don't want to miss! You can find more on pages 12-13.

Happy Adventuring! I look forward to meeting many of you very soon!

Amanda

PRESIDENT'S PERSPECTIVE

Trisha Hadrick | SDPhA President



Summer is here! In my area of the state we are very grateful for the rain we have recently received. It definitely improves the outlook for many in this area.

I'm very excited to report that our interview and hiring process was extremely successful. Our Board is happy to introduce our new Executive Director, Amanda Bacon, to you in this journal. She was able

to attend our Board Retreat, to meet the Board, and worked with Sue Schaefer during the month of June. We are fortunate she completely understands the value of having Sue continue as a transitional advisor. I'd like to publicly welcome Amanda to our Association and again thank Sue for her years of service to our profession! The transition seems to be going very smoothly and we look forward to working with Amanda in the future.

We again had several very deserving nominees for our awards that will be presented at our State Convention. Thank you to all who took the time to nominate a colleague! It's not too soon to start thinking about who you could nominate for next year. We all know many deserving individuals. They can be nominated through your District or you as an individual can submit a nomination to the Association.

Speaking of awards, [convention is coming up soon](#). Please join us in Deadwood at The Lodge on September 22-23. We hope the [lineup of speakers](#) and topics will appeal to pharmacists and technicians who practice in a variety of settings. Again this year at least twelve hours of continuing education (CE), including two full hours of immunization CE, will be offered. It's a great opportunity to get all twelve hours of CE you need for the year! You will also have a chance to meet Amanda and say thank you to Sue!

Regarding legislation, another practice act work group has been formed and we have met once. We did ask for direction from the South Dakota Department of Health (DOH) regarding any areas of the practice act they felt may be of some concern. Kim

Malsam-Rysdon, Secretary of Health, replied to our letter with her own which stated, "The DOH does not have any imperatives that it would like to see addressed in a practice act update."

Sec. Malsam-Rysdon indicated that licensing boards, including the Board of Pharmacy, have received direction relating to Gov. Daugaard's Red Tape Repeal Initiative. She further noted typically red tape repeal bills repeal outdated and unnecessary statutes and update statutes to support existing board processes. Sec. Malsam-Rysdon also wrote, "The timing of the introduction of any legislation to change the Pharmacy Practice Act is at the Association's discretion."

The Board of Pharmacy January 4, 2017 meeting minutes note that, "The Governors Initiative directs all State agencies to review governing statutes/rules for the purpose of updating as necessary."

The practice act workgroup is coming to a similar conclusion the previous work group did a couple years ago. Even though it was written about twenty-seven years ago, we feel the current practice act allows us to practice at the top of our scope, if the opportunity and situation are available. The vision of that work group can still be commended today!

Please stay tuned for more information and be ready to get involved in the process, if areas of concern are brought to our attention. Thank you in advance for your interest in this important topic that could affect all pharmacists in the state!

As I finish this article, I cannot forget to say thank you to some very important people. The current Board and our Executive Directors are great to work with and I know the Association will be in good hands as we go forward. My family has put up with me taking care of a few extra things this year and I am grateful they see the importance of it. Thank you to all of you for the opportunity to serve in this role! Hope to see you soon in Deadwood!

SOUTH DAKOTA BOARD OF PHARMACY

Kari Shanard-Koenders | Executive Director



BOARD WELCOMES NEW REGISTERED PHARMACISTS/ PHARMACIES

The following 34 candidates recently met licensure requirements and were registered as pharmacists in South Dakota: Joshua Alexander, Todd Belgum, Chelsea Berg, Danielle Bruscher, Kimberly Davidson, Stephanie Demers, Tyler Finocchio, Kaylie Gabur, Kathleen

Gehrels, Margit Hansing, Nicole Heeren, Breanne Hojer, Cynthia Holy, Zacharia Iverson, Hannah Lau, Sara Menning, Courtney Neubert, Joshua Ohrtman, Elizabeth Pegelow, Reed Reuman, Grant Strain, Andrew Thies, Brittanie Venard, Chance Wachholtz, Samantha Wagner, Patrick Warman, Shannon Wegleitner; Amanda Wehde, Jenna Welu, Abbey Wieczorek, Hailey Will, Zachary Williams, Christopher Wolbrink, and Nicholas Young.

There were three new pharmacy permits issued over the same time period: Bogen Corporation, dba True Care Family Pharmacy, Sioux Falls; Avera 7th Street Pharmacy, Sioux Falls – Change of Ownership (CHOW) from Van Hove Prescription Shop; and Lewis Family Drug #41, Centerville, CHOW from Centerville Community Pharmacy.

The following pharmacies closed during the quarter: Kmart Pharmacy #7306, Sioux Falls; Kmart Pharmacy #7318, Sioux Falls, and Varney Pharmacy, dba Medicine Shoppe, Parkston.

PHARMACIST LICENSE RENEWAL BEGINS AUG 1, 2017

The license renewal period for pharmacists begins Aug. 1, 2017 through Sept. 30, 2017. To ensure a successful renewal experience, follow these tips when completing renewal application:

- Plan Ahead, Start early – Remember, during pharmacist renewal, the Board continues to process non-resident, wholesale, intern, and technician applications.
- Renew online or via paper
- Instructions for online renewal will be communicated to pharmacists of record prior to August 1, 2017
- Paper application will be available August 1 at <http://doh.sd.gov/boards/pharmacy/assets/Renewal.pdf>
- Paper applications received prior to the renewal period will be held for processing starting August 1.

BOP HOSTS ASSISTANT SURGEON GENERAL, RADM PAMELA SCHWEITZER



On April 20, 2017, the South Dakota Board of Pharmacy and several pharmacy innovation leaders from around the state had an outstanding opportunity to meet with RADM Pamela Schweitzer, the Chief Professional Officer for Pharmacy and the Assistant Surgeon General for the US Public Health Service. Many topics were discussed including USPHS initiatives, integration of PDMP data into workflow, barriers to patient care, innovation in South Dakota, provider status, compounding, technician shortages, and a plethora of other topics. Very interesting dialogue and insight was shared on a variety of important topics important to the profession of pharmacy. Everyone left feeling pharmacists have a friend and rural champion in RADM Schweitzer.

WHAT CAN BE CHANGED ON A CONTROLLED SUBSTANCE PRESCRIPTION by Jenna Heyen, P4 Regulatory Rotation at SD Board of Pharmacy in Consultation with Sarah Boblenz, Group Supervisor for DEA Des Moines Office.

This Policy Statement is posted on the Board of Pharmacy web site at <http://doh.sd.gov/boards/pharmacy/assets/PolicyRxTransfer.pdf>.

Understanding what may or may not be changed on a CS prescription is confusing but is one of the many ways to continue to combat drug diversion while helping patients obtain their medications expeditiously. The rules regarding what can be modified apply to both written prescriptions and electronically prescribed prescription. The following summarizes changes that may be made to a prescription for a CII – CV without consulting or after consulting with the prescribing practitioner and what changes may never be made.

(continued on page 7)

SOUTH DAKOTA BOARD OF PHARMACY

(continued from page 6)

IMPORTANT A pharmacist is expected to use professional judgment and knowledge to determine when it is appropriate to make changes to any prescription including a prescription for a controlled substance.

May be added or modified <u>without consulting the practitioner</u>
<ul style="list-style-type: none"> • Patient's address • Practitioner's address • Practitioners telephone number • ¹Quantity may be modified ONLY in conjunction with change of Strength. The total quantity dispensed cannot exceed the total dosage initially authorized. <i>Example:</i> A prescription is written for methylphenidate 10mg/5ml with directions 5mg (5 ml) by mouth twice daily and a quantity of 300 mL to be dispensed. The pharmacy stocks the 10 mg/5ml concentration. The pharmacy may fill the prescription using the 10 mg/5ml methylphenidate HCl and change the dose and quantity to dispense accordingly. In this example, the pharmacist may change the dose to 2.5 ml (twice daily) and the quantity dispensed to 150 ml. ✓ The pharmacist must document the new quantity, strength, date and pharmacist initials on the <i>face of the prescription</i> • Practitioners DEA number may be added. However, <u>do not add a DEA number when the legitimacy of the prescription (i.e. prescriber or DEA number) is in question</u>. Only add the DEA number when it can be obtained from a validated source.
May be added or modified <u>after consulting the practitioner</u>
<ul style="list-style-type: none"> • Date of issue may be added <u>but not changed</u>. A pharmacist may not change a "do not fill until date" even if the provider is consulted. A pharmacist <u>may fill</u> prior to a "do not fill until" date in extenuating circumstances and after consulting the provider. <i>Example:</i> A prescription bears a "do not fill until 3/29" notation. Today's date is 3/26. The patient is leaving for a two week vacation tomorrow and requests that it be filled today. After obtaining approval by the provider, you may fill the prescription. ✓ The pharmacist must document the date, reason for early fill, "prescriber consulted", and pharmacist initials on the <i>face of the prescription</i>. • Drug Quantity and Strength <i>unless it falls under the example previously discussed¹</i> ✓ Includes situations where the acetaminophen strength is incorrect or missing in hydrocodone combination products. The prescriber should be contacted to verify strength of acetaminophen. • Directions for use <i>unless it falls under the example previously discussed¹</i> • Dosage form (capsules and tablets are not interchangeable) • Refill instructions for controlled substances III-V • Practitioners printed name (NOT practitioners signature) • Indication on prescription for buprenorphine containing products
May never be modified
<ul style="list-style-type: none"> • Patient's name • Name of controlled substance (<i>except where generic substitution permitted</i>) • Signature of the practitioner

(continued on page 16)



SOUTH DAKOTA STATE UNIVERSITY

College of Pharmacy and Allied Health Professions



Jane Mort | Acting Dean



Greetings from the College of Pharmacy and Allied Health Professions!

This year marked the 20th anniversary of our entry level Doctor of Pharmacy Program graduation, and on May 6th we honored 73 new PharmDs. Our graduates continue to do well in the job market. For example, 31.5% of the 2017 class took a residency (23 graduates), with 76.7% (23/30) of

those students participating in the match obtaining a residency (nationally 69.4%). In addition, we also celebrated the graduation of 20 MLS and two MPH students.

We are currently undertaking a careful revision to our PharmD curriculum in light of changes in practice activities, accreditation standards, and professional competencies. The process began in May of 2016, will span approximately 18 months, and is accompanied by a revision to our assessment plan. Dr. Teresa Seefeldt has provided significant leadership during this process and she has agreed to serve as the Acting Assistant Dean for Academic Programs during our College's leadership transition.

The University has started the dean search process. Provost Hedge has named the search committee that will be led by Dr. Fahrenwald, Dean of the College of Nursing. The timeline is set for interviews in early fall with a start date no later than July

2018. In other faculty news, we are glad to have Joe Berendse and Emily Van Klompenburg join us this summer at the VA Black Hills Health Care System at Fort Meade and the Sioux Falls VA Health Care System, respectively. We also recently began our search process for the William R. Hoch Family Endowed Professorship in Community Pharmacy Practice and a pharmacogenomics position in an ambulatory care setting. As mentioned in the spring edition, Dr. Dave Helgeland, Dr. Deb Farver, and Teresa Delfinis (academic advisor) are retiring. While we wish them all the best in their next phase, their expertise and leadership will be greatly missed.

South Dakota State University is well on the way to creating our next strategic plan. This fall, the University will produce the details of the plan. The College of Pharmacy and Allied Health Professions will then embark on our planning process in the spring. This will allow us to use the goals and objectives of the SDSU plan to frame our future work.

In closing, I would like to thank all of you for your support of the College. I can confidently say that our success would not be possible without alumni and SDSU supporters serving in a variety of roles (e.g., preceptors, advocates, leaders, donors). I don't know of a better group of professionals to work with!

If you are in Brookings, please stop by the Avera Health and Science building for a visit.

Best regards,
Jane Mort, Interim Dean

Did You Know?

As pharmacists, you can submit immunization information to the South Dakota Department of Health's Immunization Registry?

Contact Tammy LeBeau to get registered! Tammy is the Coordinator for South Dakota's Immunization Information System (SDIIS) and can be reached at her direct extension, 605-773-4783.

SD SOCIETY OF HEALTH-SYSTEM PHARMACISTS

Jessica Harris, Pharm.D., BCPS | SDSHP President



Greetings from the South Dakota Society of Health-System Pharmacists!

SDSHP held the 41st Annual Conference on April 7th and 8th at the Holiday Inn City Centre in Sioux Falls. The conference provided 8 hours of ACPE accredited CE and offered a separate technician track on Saturday morning. Ninety-five pharmacists, seven technicians, and

sixty students attended the conference on Friday. CE sessions received overwhelmingly positive reviews and ratings. Positive feedback was also received in regards to the venue; therefore, SDSHP will consider holding the Annual Conference at the Holiday Inn City Centre again in the future.

New board members were inducted at the Annual Conference and include:

- Past President: Rhonda Hammerquist
- President: Jessica Harris
- President-Elect: Aaron Larson
- Secretary: Gary Van Riper
- Treasurer: Nicole Hepper
- Board Members at Large: Deidra VanGilder and Kristina Peterson
- Resident Board Member: Haylee Brodersen
- Student Board Members: Khia Warzecha and Kali Bendix

After the Annual Conference wrapped up on Saturday, the SDSHP Board met with Kimberlee Berry from ASHP to discuss strategic planning. The Board is currently developing a strategic plan and will send it out to the membership when the final draft has been approved.

Summer Events

The 5th Annual SDSHP Statewide Residency Conference was held Fri., July 14, 2017 at the Cedar Shore Resort in Oacoma, SD. The conference provided an opportunity for residents to network and gain knowledge on topics that benefit them through residency.

The 16th Annual Gary Van Riper Society Open Golf Classic was held at the Central Valley Golf Course in Hartford Fri., July 28, 2017. This event supports SDSU student pharmacists by providing scholarships and funding for travel to the ASHP Clinical Skills Competition in December.

Please visit SDSHP's website at www.sdshp.com to learn more about SDSHP and find a list of upcoming events!

Respectfully submitted,
Jessica Harris, PharmD, BCPS
SDSHP President

ACADEMY OF STUDENT PHARMACISTS

Analisa Buysse | APhA-ASP SDSU Chapter President



Hello SDPhA!

Since the last newsletter, we have closed out the 2016-17 school year, and a new one is underway! The new executive board was inducted at our last chapter meeting and is pictured below at our recent executive board retreat. We also held our yearly raffle for our chapter members to thank them for all of their hard work throughout

the year. Our chapter also was excited to hear that we received the Award for Organizational Leadership for SDSU in the Board of Regents Student Organization Awards.

The new Executive Board of APhA-ASP has in the thick of fall programming work. Our theme for the upcoming year will be advocacy! We on the executive board aim to express the importance of promoting the profession to our peers, so that we can inspire other future pharmacists to continue to make advancements in our practice. Our committees will hold events centered on this theme throughout the upcoming year.

Most notably, we have started planning and organizing our upcoming "More Than A Count" campaign that will roll out early this fall. This campaign is designed to showcase

our wonderful profession to members of the public, as well as generate some excitement in the world of South Dakota pharmacy. Look forward to seeing us on Facebook and other social media sites as we are excited to show you what we have in store! This campaign is sponsored by SDPhA and we could not be more thankful for this opportunity they have granted us to impact the profession at the state level.



Pictured above is the 2017-18 executive board for our chapter of APhA-ASP. In the back row from right to left is Chris Kotschevar (Policy Vice-President), Dr. Brittney Meyer (Faculty Advisor), Bailey Buenger (President-elect), Janae Sampson (Patient Care Coordinator), Katey Norton (Membership Vice-President), and Scott Dingus (Recording Secretary). In the front row from right to left is Emilee Pierson (Communications Vice-President),

SAVE
the
DATE

SDPhA ANNUAL MEETING

SEPTEMBER 22-23, 2017

THE LODGE *at* DEADWOOD

SD ASSOCIATION OF PHARMACY TECHNICIANS

Sue DeJong | President



Summer time greetings from SDAPT!

Everyone who knows me, knows summer is my favorite time of the year. Hoping all of you are taking time to enjoy South Dakota's great outdoors!

Please notice that our 2017 SDAPT registration form is included in this issue.

We ask that you take the time to register your membership and register for our Fall CE Conference on Oct. 7th in Sioux Falls at the Avera Prairie Center, Sr. Colman room. Encourage your fellow technicians to be a part of SDAPT as well!

Our slate of CE presenters is now complete for our conference. Presenters include SD Board of Pharmacy, DCI's Matt Glenn, Dr. Jeremy Daniel, Jessica Strobl, Pharm D. and Laura Martin, PhD, Pharm D. They all will offer an interesting and informative day, for sure.

SDAPT also encourages technicians to attend the annual SDPhA conference in Deadwood September 22nd and 23rd. Remember,

due to our affiliation with SDPhA, SDAPT members are able to register for the conference at half price, \$75.00! A wonderful bargain!

Thank you to Jodi Sterrett, CPhT from Huron Regional for offering to be the Technician Liaison with SDSHP as a representative of SDAPT.

Please feel free to call any of your SDAPT board members at any time with questions, comments or suggestions. This is your organization to benefit, educate and encourage South Dakota's great technicians!

Your officers are:

Sue DeJong - President sdejong99@hotmail.com
Jerrie Vedvei - President Elect - jvedvei@nvc.net
Deb Mensing - Treasurer - damens55@hotmail.com
Diane Feiner - Secretary - diane.feiner@gmail.com

We'll be looking forward to seeing all of you in September and October!

2017 South Dakota Association of Pharmacy Technicians

www.SDAPT.org

MEMBERSHIP AND CONFERENCE REGISTRATION FORM

Membership includes:

Please Print Legibly

- FREE attendance to the annual Continuing Education Conference October 7th in Sioux Falls, SD
- One year's subscription of The South Dakota Pharmacist Journal
- Discounted rates for the South Dakota Pharmacist Association Annual Meetings
- An Awesome opportunity to network with others in your profession

NAME _____ CELL PHONE (____) _____

STREET ADDRESS _____ City _____ SD ZIP _____

EMPLOYER _____ CITY _____ WORK PHONE (____) _____

EMAIL ADDRESS _____

CPhT: YES or NO _____ PTCB Certification# _____ SD State Registration # _____

PAST MEMBER OF SDAPT: YES _____ NO _____ NEW MEMBER _____

Please list any other State or National Pharmacy Organization(s) you belong to: _____

Are you willing to serve on a committee? Yes or No _____ Committee: _____

Please check one:

_____ \$35 Membership & Attending October 7 Conference in Sioux Falls _____ \$35 Membership ONLY _____ \$25 October Conference ONLY

_____ Students may attend for Free: Where are you currently enrolled: _____

DUE NO LATER THAN SEPTEMBER 25, 2017

Make checks payable to: **SDAPT** Mail Check & Registration form to: **SDAPT Treasurer, Deb Mensing 5920 W Pebble Creek Rd, Sioux Falls SD 57106**

- Please note, this form is for the South Dakota Association of Pharmacy Technicians only. Please do not confuse this form with the SD State Technician registration form that is required by the South Dakota Board of Pharmacy.

**SDPhA Convention Line-up
Lodge at Deadwood
September 22-23, 2017**

Thursday Evening – Welcome/Reception/Registration 5-7 p.m.

Friday, September 22nd

7:30 – 8:00 a.m.

Keynote Address

Tom Menighan – APhA Executive Vice President and Chief Executive Officer

8:00 a.m. – 9:30 a.m.

“Pharmacy Law”

Dave Helgeland

9:30 a.m. – 10:30 a.m.

“Board of Pharmacy/PDMP Update”

Kari Shanard-Koenders & Melissa DeNoon

Business Meeting

10:30 a.m. – 11:30 a.m.

11:30 a.m. until 1:30 p.m.

Vendor Time/Luncheon/Awards Presentations

1:30 p.m. - 3:00 p.m.

“New Drug Update”

Dr. Joe Strain

3:00 p.m. – 3:30 p.m.

SDSU Ice Cream Social

3:30 p.m. – 5:00 p.m.

“Infectious Diseases – Fighting the Resistance”

Dr. John Kappes

5:00 p.m. – 6:00 p.m.

“History/Case Studies”

Bernie Hendricks/SDSU Student Pharmacists

DEADWOOD – On Your Own

Saturday, September 23rd

8:00 a.m. – 9:30 a.m.

Light Breakfast/Second Business Meeting

9:30 a.m. – 11:00 a.m.

“Diabetes – New Testing & Treatment Options”

Dr. Deidra VanGilder

11:00 – 1:00 p.m.

“Immunizations – What’s New?”

Dr. Wendy Jensen Bender

Dr. Alex Middendorf



131st Annual South Dakota Pharmacists Association Convention Registration Form

Lodge at Deadwood | Deadwood, SD | September 22-23, 2017

All SDSU Student Registrations are FREE!
(Hotel Not Included)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____

Home Phone: _____

Email: _____

Spouse/Guest Name: _____

eProfile ID: _____

For Hotel Reservations Call:
The Lodge at Deadwood
100 Pine Crest Lane • Deadwood, SD 57732
(605) 584-4800

Convention Registration Cancellation Policy:

Cancellations will be accepted without penalty prior to September 7, 2017.
A \$25 cancellation fee will be applied to all cancellations after September 7, 2017.
Refunds will be issued after October 1, 2017.

*Full Registration includes all educational sessions, exhibits, meals and evening events.

**One-Day Registration includes educational sessions, exhibits, meals, and evening event, if applicable.

	SDPhA Member	Spouse or Guest	Children	SDAPT Member	Pharmacy Technician	Pharmacy Student	Non-SDPhA Member
Full Registration*							
Before August 19, 2017	\$150	\$75	\$20	\$75	\$125	Free	\$225
After August 19, 2017	\$175	\$100	\$20	\$100	\$140	Free	\$250
One-Day Registration**							
Fri., Sept. 22, 2017	\$100	\$50	\$10	\$50	\$90	Free	\$150
Sat., Sept. 23, 2017	\$50	\$50	\$10	\$50	\$50	Free	\$75
Extra Tickets							
Friday Lunch	\$15	\$15	\$10	\$15	\$15	Free	\$15
Friday Supper	\$15	\$15	\$10	\$15	\$15	Free	\$15
Saturday Breakfast	\$15	\$15	\$10	\$15	\$15	Free	\$15

I would like to sponsor a student. I have included an additional gift of _____

I would like to contribute to the SDPhA Commercial & Legislative Fund.

I have included an additional amount of _____

Total Due \$ _____

Please send payment and registration to:

South Dakota Pharmacists Association

PO Box 518 Pierre, SD 57501

Tax ID#: 46-019-1834

Register Online at www.sdpha.org

**COMMERCIAL AND LEGISLATIVE (C&L) & DISTRICT DUES
CONTRIBUTIONS
2017/ 2018**

First Name _____ Last Name _____

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

2017 - 2018 Commercial & Legislative (C&L) Fund
(Memberships set by SDPhA C & L Executive Committee, 2007)

Pharmacy or Business Membership (\$100.00)
(Includes One Individual Membership)

Name of Pharmacy/Business _____

Name of Individual Included _____

Corporate Membership (\$200.00)
(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-\$10.00

Black Hills-\$20.00

Huron-\$10.00

Mitchell-\$10.00

Mobridge-\$10.00

Rosebud-\$10.00

Sioux Falls-\$20.00

Watertown-\$20.00

Yankton-\$15.00

TOTAL ENCLOSED

\$ _____

Mail to SD Pharmacists Association ♦ Box 518 ♦ Pierre, SD 57501-0518 ♦ FAX: 605-224-1280

2017 LEGISLATIVE REPORT

Robert C. Riter & Margo D. Northrup | SDPhA Lobbyists

DATE: March 29, 2017

The legislature adjourned sine die on March 27, 2017. There were a number of measures introduced of consequence to this profession. Ultimately, through the important involvement of the members of your Board and other pharmacists across the state, good results were obtained.

Several weeks prior to session, your Board learned that the Board of Pharmacy was going to be introducing several bills of significant impact to your profession. Included was a measure seeking to modify your Practice Act and as part thereof, gradually strip the Association's funding by eliminating its activities benefitting the profession. It became readily apparent that these substantial modifications had not received thorough vetting by your profession prior to preparation of the draft bill. At the behest of your leadership, your Executive and lobbyist met prior to session with the leadership of the Department of Health. Individual contacts were also made with the Department and with representatives of the Board of Pharmacy regarding the broad nature of the draft bill.

Ultimately, significant modifications were made in the draft bill, including striking that portion which would have eliminated the relationship between the Department of Health and the Association. Thereafter, additional modifications suggested by your Association were considered and HB 1043 was introduced in a much better form. The bill was presented to the House Health & Human Services Committee early in the session by representatives of the Board of Pharmacy but soon thereafter, the Board indicated to the legislature the need to examine some additional modifications. Hence, the bill was tabled. It appears likely a work group will be formed to consider proposed modifications to the Practice Act, just as has been done from time to time in prior years. It is anticipated that representatives of your Association will be participants therein.

The Board of Pharmacy did, however, successfully obtain passage of HB 1044, which had been introduced at its request. That measure revises provisions impacting wholesale drug distributors and outsourcing facilities. It also requires a fee for licensure of outsourcing facilities and creates certain additional rules for the transfer of products between certain trading partners.

The annual bill placing additional substances on the controlled substance schedule was approved in HB 1041. We would encourage you to review that bill and its particulars, but Thiafentanil was added to Schedule II controlled substances and Brivaracetam was added to Schedule IV. With the emergency clause, the bill once approved by the Governor was immediately effective.

Several bills were introduced at the request of the Interim Substance Abuse Prevention Committee. That committee began considering

issues relative to methamphetamines and opioids in prescription drugs. The proposals introduced by the committee, however, were limited to controlled substances. Ultimately, of the four bills introduced, two passed. SB 1 allows linking of the central repository into the electronic health records to allow health systems, pharmacies or health information exchanges to access data. It increases the requirements on dispensers to submit the information to the repository every twenty-four hours rather than once a week. SB 4 requires the Board of Pharmacy to report to the legislature regarding monitoring and use of opioids in the state.

SB 2, which would have required prescribers to access a prescription drug monitoring program data base prior to issuing a prescription for certain controlled substances, and SB 3, which would have made an appropriation to the Department of Health for the administration of a program regarding substance abuse, were both tabled by the first committee considering the bills at the request of the sponsors.

SB 43 also passed. That measure substantially expands the funds available within the Department of Social Services for intensive methamphetamine treatment services and is effective immediately.

The legislature also passed and the Governor approved SB 95. That measure resulted from prior discussions by advocates for broader access to cannabidiol, particularly in treating long term illnesses. The bill as passed and effective July 1, 2017, now includes cannabidiol as a Schedule IV drug, but excludes it from the definition of marijuana if it is approved by the US Food and Drug Administration. It appears that the bill's passage will not likely impact existing law but advocates may argue that CBD can be prescribed and thereafter dispensed by pharmacies. We suspect we will hear more from the Department of Health, which had been neutral on the bill, or the Attorney General's office regarding the ultimate impact of the bill's passage.

Late in the session the legislature also approved a 0.3% reimbursement increase for certain Medicaid providers. While that seems of little significance, with the budgetary constraints faced by the legislature this year, it was expected that no increases would be adopted.

It was a busy legislative session to include the several weeks leading up to the commencement thereof. We much appreciated the Board and other members across the state who took an active role in considering the issues on short notice and contacting legislators to ensure adequate information was available. Of course, your Executive, Sue Schaefer, not only coordinates these issues but leads the discussion and well represents the Association. It is a pleasure for my partner, Margo Northrup, and me to work with the Commercial and Legislative Branch of your Association to promote the issues important to your profession.

Thank you again.

SOUTH DAKOTA BOARD OF PHARMACY

(continued from page 7)

PRESCRIPTION TRANSFER INFORMATION

Please see the Board Policy Statement on prescription transfers when a prescription has not yet been filled (this includes CII – CV). Also included is the transfer of e-prescribed CS prescriptions. See the link on our website <http://doh.sd.gov/boards/pharmacy/assets/PolicyRxTransfer.pdf> for the entire Policy Statement.

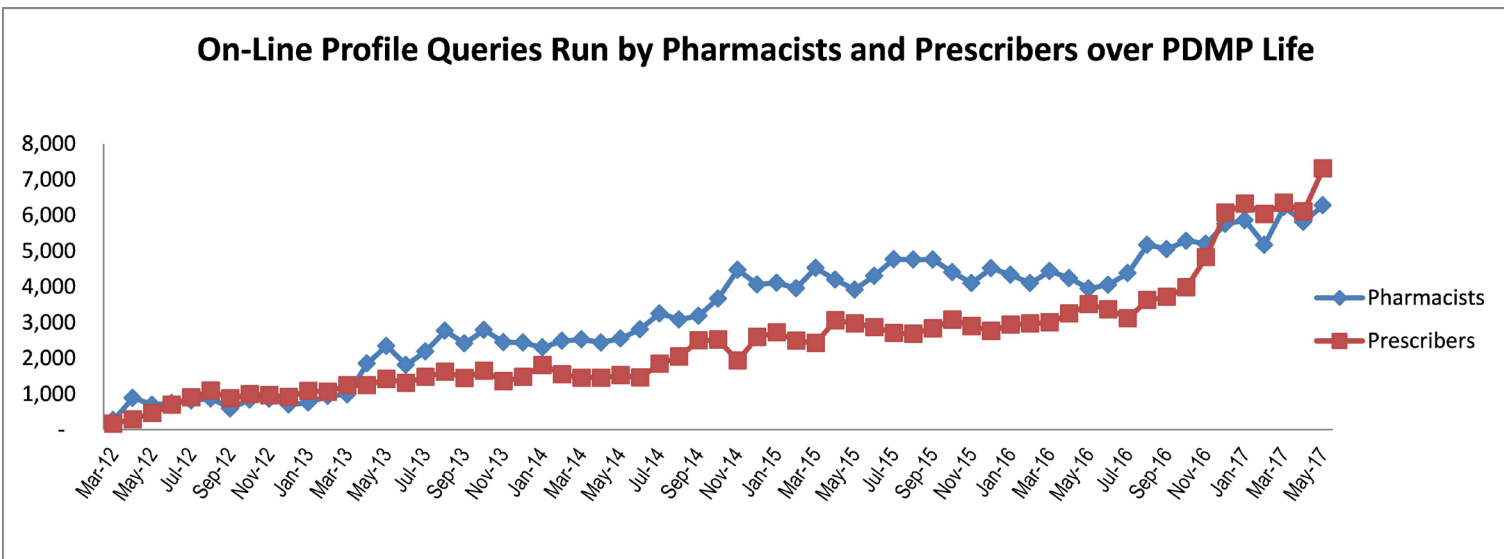
PDMP UPDATE by Melissa DeNoon, R.Ph., PDMP Director

The passing and signing of Senate Bill 1 mandated PDMP registration for everyone who has a SD Controlled Substance Registration (SD CSR) and takes effect July 1, 2017. Please ask the prescribers you work with if they are registered. The number of registrations for new PMP AWARxE accounts continues to grow as prescribers are informed of the mandate.

Since March, oxycodone/acetaminophen was displaced from the number ten spot by Lisdexamphetamine Dimesylate, Vyvanse®.

May Most Prescribed Drugs	RX's	Quantity	Days Supply	Quant/Rx
HYDROCODONE BITARTRATE/ACETAMINOPHEN	15,992	978,903	212,969	61
TRAMADOL HCL	10,860	874,809	212,089	81
ZOLPIDEM TARTRATE	6,887	239,382	237,506	35
CLONAZEPAM	6,528	416,791	214,431	64
DEXTROAMPHETAMINE SULF-SACCHARATE/AMPHETAMINE SULF	6,410	370,149	242,378	58
LORAZEPAM	6,256	339,231	163,730	54
ALPRAZOLAM	5,002	309,822	142,628	62
METHYLPHENDATE HCL	4,917	255,355	180,242	52
OXYCODONE HCL	3,701	314,534	74,612	85
LISDEXAMFETAMINE DIMESYLATE	3,499	135,719	131,748	39

Online queries performed by prescribers outpaced pharmacist queries each month since December 2016



The SD PDMP submitted an application for a 2017 Harold Rogers PDMP Enhancement Grant on April 21, 2017. The grant projects include funds to: 1) Integrate Regional Health's EHR with the SD PDMP, 2) Expand the drug take-back program project from the 2016 HR Grant, and 3) Integrate PMP AWARxE with SD licensing boards to automate credentialing. The awardees will be announced in September 2017.

(continued on page 19)

MORE THAN 200,000 SOUTH DAKOTANS ARE AT RISK.

THE TOOLS TO FIGHT DIABETES ARE IN YOUR HANDS.

You now have the ability to affect change.
The pharmacy toolkit you've received carries with it guides
and tools to offer potentially lifesaving information to your
at-risk customers. **You can make a difference.**



PREVENT. MANAGE. LIVE.
www.diabetes.sd.gov

FINANCIAL FORUM

This series, Financial Forum, is presented by PRISM Wealth Advisors, LLC and your State Pharmacy Association through Pharmacy Marketing Group, Inc., a company dedicated to providing quality products and services to the pharmacy community.

Could you Improve your Personal Finances Today?

Simple decisions & new habits might lead you toward a better financial future

In life, there are times when simple decisions can have a profound impact. The same holds true when it comes to personal finance. Here are some simple choices you could make that may leave you better off financially – in the near term, the long term, or both.

Use less credit. Every time you pay with cash instead of credit, you are saving pennies on the dollar – actually, dimes on the dollar. At the start of December, the average “low interest” credit card in America charged users 12.45%, the average cash back card 17.15%. If you want to see your bank balance grow, try consistently paying in cash. There is no need to pay extra money when you pay for something.¹

Set up automated contributions to retirement plans & investment accounts. By automating your per-paycheck salary deferrals to your workplace retirement plan or your IRA, you remove the chore (and the psychological hurdle) of having to make lump-sum contributions. You can bolster invested assets with regular inflows of new money, without even thinking about it. Often, arranging these recurring account contributions takes 20 minutes or less of your time.²

Bundle your insurance. Many insurers will give you a discount if you turn to them for multiple policies (home and auto, possibly other combinations). This may help you reduce your overall insurance costs.

Live somewhere less expensive. Sure, it takes money to move, but that one-time cost might be worth absorbing, especially if you can perform your job anywhere. A look at the December United States Rent Report at ApartmentList.com reveals that the median rent for a 1-bedroom apartment in Los Angeles is \$1,900. The median rent for a 1-bedroom apartment in Spokane is \$630. What is the median rent for a 2-bedroom apartment in Boston? \$3,200. How about in Fayetteville, North Carolina? \$700.³

Look into refinancing your largest debts. Perhaps your student loans could be consolidated. Perhaps you could qualify for a refi on your mortgage (while rates are still low). Both of these

moves could free up money and leave you with more financial “breathing room” each month.

Spend less money on “stuff” and more money on yourself. Many people associate possessions with well-being – the more “toys” you have, the richer your life becomes. That kind of thinking can quickly put you deep in debt. You may find yourself living on margin as your “toys” depreciate. A wise alternative: pay yourself first and direct more of your income into retirement or savings accounts. Or if you like, use some money you would normally spend on creature comforts to attack your debt. Instead of simply entertaining yourself today, make money moves on behalf of your financial future. Too many people give their financial future little thought, and they may be in for a shock when they reach retirement age.

We all want to splurge now and then, but try spending money on memorable experiences instead of flashy items – you may find the former many times more valuable than the latter. Forgo several purchases a month and see what happens. A recent SunTrust bank survey found that roughly a third of U.S. households earning \$75,000 or more live paycheck to paycheck. Earlier this year, Money noted that the average household credit card balance was nearly \$16,000. In short, people are spending too much.⁴

Some expenses are obligatory, others spur-of-the-moment and unexamined. Pause and think before you buy something; do you really need it? If you separate your needs from your wants and say no to several of them, you may find yourself living a simpler life with less debt and more cash.

Spend less than what you make, invest and save some of the difference – this is the classic path toward improving your financial situation.

(continued on page 19)

Financial Forum

(continued from page 18)

Citations.

- 1 - bankrate.com/finance/credit-cards/current-interest-rates.aspx [12/1/16]
- 2 - forbes.com/sites/robertberger/2016/05/14/20-ways-to-improve-your-finances-in-under-20-minutes/ [5/14/16]
- 3 - apartmentlist.com/rentonomics/national-rent-data/ [12/1/16]
- 4 - time.com/money/4320973/why-you-are-poor/ [6/6/16]

.....
Pat Reding and Bo Schnurr may be reached at 800-288-6669 or pbh@berthelrep.com.

Registered Representative of and securities and investment advisory services offered through Berthel Fisher & Company Financial Services, Inc. Member FINRA/SIPC. **PRISM Wealth Advisors LLC is independent of Berthel Fisher & Company Financial Services Inc.**

.....
This material was prepared by MarketingLibrary.Net Inc., and does not necessarily represent the views of the presenting party, nor their affiliates. All information is believed to be from reliable sources; however we make no representation as to its completeness or accuracy. Please note - investing involves risk, and past performance is no guarantee of future results. The publisher is not engaged in rendering legal, accounting or other professional services. If assistance is needed, the reader is advised to engage the services of a competent professional. This information should not be construed as investment, tax or legal advice and may not be relied on for the purpose of avoiding any Federal

SOUTH DAKOTA BOARD OF PHARMACY

(continued from page 16)

SPBM Audit Lessons Learned

Pharmacies are seeing an increase in audits by PBM's. The audits tend to focus is on expensive medications and those with variable days' supply. Using the guidance learned from an audit can save future PBM take-back dollars! It is important to document EVERYTHING on the prescription either electronically or on the hard copy. The prescription documentation record should include the date, time, person conferred with, what was confirmed about the prescription and the initials of the person who did the calling. Directions need to be specific and complete to determine days' supply. For insulins, the number of units and frequency need to be accurate. If the physician writes for 3 bottles of 10 ml each and this is a 32 days' supply; fewer bottles should be dispensed or if available a smaller size dispensed to avoid take-backs from the PBM. Creams and ointments need specific directions regarding the area of application and times per day.

There are charts available to calculate the amount per area and then the grams per day to determine days' supply. The PBM's target transfer prescriptions of expensive medications in their audits. Transfer prescriptions need to be complete with the date written and the first fill recorded, including prescriptions where they are the same. All information required by law must be recorded to avoid a take-back. Doxycycline is a frequently audited medication because it is available in both Monohydrate and Hyclate. Providers need to be contacted and the specific salt verified on the prescription if it is not specified. If your pharmacy is audited you must respond by the deadlines given

by the PDM. The PBM will take back reimbursements from any audited prescription and its refills, if you fail to include all of the information requested and required. In some cases, this simply means to copy the front and the back of the prescription and include it in your response to the PDM.

BOARD MEETING DATES

Please check our website for the time, location and agenda for future Board meetings.

BOARD OF PHARMACY DIRECTORY

Office Phone: 605-362-2737
Office Fax: 605-362-2738

- Kari Shanard-Koenders, Executive Director - kari.shanard-koenders@state.sd.us
- Melissa DeNoon, Director, SD PDMP - melissa.denoont@state.sd.us
- Gary Karel, Pharmacy Inspector - gary.karel@state.sd.us
- Paula Stotz, Pharmacy Inspector - paula.stotz@state.sd.us
- Carol Smith, Pharmacy Inspector - carol.smith@state.sd.us
- Beth Windschitl, Senior Secretary - beth.windschitl@state.sd.us
- Melanie Houg, PDMP Assistant - melanie.houg@state.sd.us
- Jessica Neal, Senior Secretary - jessica.neal@state.sd.us
- Board of Pharmacy Website - www.pharmacy.sd.gov
- PDMP Data Access Website - https://southdakota.pmpaware.net/login
- PDMP Data Submitters Website - https://pmpclearinghouse.net/
- National Association of Boards of Pharmacy - www.NABP.pharmacy



AND THE LAW by Don R. McGuire Jr., R.Ph., J.D.

This series, Pharmacy and the Law, is presented by Pharmacists Mutual Insurance Company and your State Pharmacy Association through Pharmacy Marketing Group, Inc., a company dedicated to providing quality products and services to the pharmacy community.

Cybersecurity

Cybersecurity continues to make the news and to be a source of concern for all business owners. The recent WannaCry ransomware attack affected companies and governments in more than 150 countries. Data breaches and cyberattacks also occur in healthcare. In Rhode Island, the car of an employee of the state's largest health network was broken into and a laptop was stolen. The laptop contained sensitive information on about 20,000 of the network's patients. A healthcare provider in Texas had an unencrypted hard drive stolen. The hard drive contained information (e.g., social security numbers, dates of birth, driver license numbers, insurance information, etc.) about its patients going back to 2009. It is critical for pharmacies to assess their data security and take steps to strengthen it.

Stronger regulations are sure to come, but improvements to your data security now will minimize the chances that your pharmacy ends up as your community's lead news story. As an example, the New York Department of Financial Services recently promulgated new rules for cybersecurity of financial institutions. This includes banks, insurance companies, and other financial services institutions. It does not apply to health care organizations or entities. The regulations contain 15 requirements for a cybersecurity program. This article will not review all of them, but will address some that apply to the situations we have already seen.

The regulations require penetration testing and vulnerability assessments. This would mean at least annual testing of firewalls and other portions of the overall cybersecurity program. This should alert you to any shortcomings in your security and give you the opportunity to remedy them before an incident occurs.

Also required is training and monitoring for your system's users. Training is an integral part of a security program because a leading cause of data breaches is the people using the system. Phishing attacks and similar techniques succeed because they fool a user into allowing unauthorized access to the pharmacy's data.

Encryption is another important tool and New York's regulation is going to require it. The regulation requires that data be encrypted both while being transmitted (such as by e-mail) and also while resting on hard drive. This requirement would help secure data that

is physically taken, such as in the stolen laptop or server examples. Many people think to encrypt data while it is in transit, but steps should also be taken while it is being stored.

The regulation also requires that organizations periodically dispose of sensitive information no longer needed for business operations. This will require the organization to assess the need to retain sensitive information and then follow their own policies and procedures to securely dispose of unneeded information. This action may have mitigated the damage done when the hard drive containing seven years of data was stolen in Texas.

The world continues to move toward more virtual and digital realms, so these challenges are not going away. Dealing with data breaches is expensive. Some studies estimate around \$200 per record affected. For the data of those 20,000 patients on the laptop, this equates to around \$4 million. And this doesn't take into account your reputational damage. The pharmacist-patient relationship is built on trust and data breaches will seriously damage these relationships. Ransomware can also be devastating to your pharmacy. Having your system held hostage until you pay the ransom (or can re-construct your system from back-ups) will, at a minimum, inconvenience your patients. It may cause them to question whether they should share their personal information with you.

There is no reason to wait for a law or regulation to be passed before shoring up your data security. You are already holding sensitive patient information and there are already numerous threats out there in cyberspace. A cyber incident can cause significant financial and reputational damage to your practice. This is not the time to take an ostrich approach to your data security.

.....
© Don R. McGuire Jr., R.Ph., J.D., is General Counsel, Senior Vice President, Risk Management & Compliance at Pharmacists Mutual Insurance Company.

This article discusses general principles of law and risk management. It is not intended as legal advice. Pharmacists should consult their own attorneys and insurance companies for specific advice. Pharmacists should be familiar with policies and procedures of their employers and insurance companies, and act accordingly.

Career Safeguard

Pharmacists Mutual

At Pharmacists Mutual Insurance Company, we protect not only your pharmacy, but you as well. You're covered no matter where your job takes you, with \$1 million per occurrence and as much as \$3 million aggregate. In our recent study, we found that 75% of claims were related to wrong drug or wrong dose – even with protocols in place. We know mistakes happen. But you've invested too much to become a pharmacist, and now's the time to help safeguard that investment by purchasing **professional liability insurance coverage**. Call us today at 800.247.5930 for more information or apply online at phmic.com.



phmic.com

Our Mission

To help our customers attain peace of mind through specialized insurance products, risk management solutions, and superior personal service.

Not licensed to sell all products in all states.

Continuing Education for Pharmacists

“Pharmacist Consult: Zika Virus Disease - Public Health Concerns”

(Knowledge-based CPE)

Course author:

Hannah F. Schmidt, Pharm.D.
Pharmacy Practice Resident
Firstlight Health System
Mora, MN

Disclosure: The author, planners, and reviewers of this course have had no financial relationships with any com-

Goal: To enhance pharmacists’ understanding of the Zika virus and the related health concerns for various population groups.

Pharmacist Learning Objectives

1. Identify the family and genus of the mosquito known to transmit the Zika Virus;
2. Describe the history of the Zika virus and its current geographical infection patterns;
3. Describe the key transmission characteristics of Zika infections;
4. Identify typical symptoms, diagnosis parameters, and potential health consequences for people with suspected Zika virus infections;
5. Assess treatment recommendations for patients with suspected infections;
6. Provide patient education on best practices for prevention of Zika infections;
7. Counsel patients about Zika transmission concerns relating to pregnancy and breastfeeding.

Zika Virus Overview

The Zika Virus is a mosquito-borne single-stranded RNA virus of the *Flaviviridae* family, genus *Flavivirus*. It is transmitted via the bite of an *Aedes* (*Ae. aegypti* and *Ae. albopictus*) mosquito.

While most infected persons only experience mild flu-like symptoms or no symptoms at all, there is now international cause for concern due to an increased incidence of severe neurologic and autoimmune complications.

Due to the multitude of questions and concerns voiced by the public, dissipation of accurate information regarding the Zika Virus is essential.

Spread

The Zika virus was first discovered over 60 years ago in Uganda and was transmitted by the *Aedes africanus* mosquito. At the time, Zika was noted to only cause mild illness. It wasn’t until 2013 that Zika was discovered to have a possible link between congenital malformations and severe neurologic autoimmune complications.

From its origins in Uganda, 67 countries now have confirmed cases of Zika. Due to the geographical expansion in new cases, in February 2016 Zika was declared a Public Health Emergency of International Concern by the World Health Organization (WHO).

However, in the United States locally-acquired Zika has only been reported in Florida which has 139 confirmed cases, according to the CDC in an October 26, 2016 report.

All other cases in U.S. states have been travel-acquired from exposure to the virus in other countries. There have been over 28,000 cases reported in U.S. territories, the vast majority of which were locally-acquired.

Transmission

Zika is transmitted via the bite of an *Aedes* mosquito which has also been shown to transmit dengue and chikungunya viruses.

The *Aedes* mosquito is an aggressive daytime biter and lives both indoors and outdoors near people. They are especially prevalent in areas of standing water where they can lay eggs.

Once transmitted via mosquito bite, infected persons can infect others through sexual contact, blood transfusions, and from mother to child during pregnancy. When infected persons are bitten by uninfected mosquitos, those mosquitos may then carry the virus and pass it on, potentially spreading Zika to new areas and countries.

Unfortunately, Zika can be transmitted even if the infected person is asymptomatic. Currently, the length of time via which Zika can be transmitted person to person is unknown.

Symptoms

Symptoms vary from person to person. Most people do not have any symptoms at all or present with mild flu-like symptoms. The most common symptoms include:

- Fever
- Rash
- Joint pain
- Conjunctivitis

Muscle pain and headache can also occur. These symptoms usually last a few days to a week. As symptoms are mild, many patients do not go to the doctor and may never be diagnosed.

Patients should be counseled to see their doctor for testing if they have symptoms and have recently traveled to an area with Zika.

Complications

The Zika Virus has been linked to a number of birth defects including vision and hearing loss, impaired growth, and most notably, microcephaly. In addition, other neurological disorders such as Guillain-Barré syndrome have been reported.

While there is scientific consensus of an increased risk of these neurologic conditions and defects after Zika infection, more research is necessary to determine the incidence and potential severity of these complications.

#1 Active learning question:

Guillain-Barré Syndrome (GBS) is a serious autoimmune condition that affects between 3,000 and 6,000 Americans each year. Exact cause of GBS is unknown. It often presents 10-14 days following a mild viral infection with symptoms that range from tingling in peripheral extremities to _____ and _____.

Most patients fully recover within a year.

Source: [*Medical News Today, 23 March 2016*](#)

Diagnosis

Patients who have traveled to an area with known Zika activity and have begun to experience symptoms should be undergo molecular testing (RNA NAT / IgM) for the Zika virus. Pregnant women who have traveled to, or live in, an area with Zika should also be tested regardless of symptoms. (Additional information on diagnostic testing is available from the CDC at: <https://www.cdc.gov/zika/hc-providers/types-of-tests.html>)

Diagnosis is normally based upon travel history, symptoms, and test results. Zika usually remains in the blood of an infected person for approximately one week, and laboratory testing on blood, urine, or other bodily fluids can confirm the diagnosis. When being tested for Zika, patients should also be tested for dengue and chikungunya as the *Aedes* mosquito commonly carries these viruses and can cause similar symptoms.

Treatment

Unfortunately, once a Zika diagnosis has been confirmed, treatment is purely supportive. No medications are currently available to treat Zika. Supportive care is similar to treatment for cold and flu-like symptoms. This includes drinking plenty of fluids and resting. Acetaminophen can also be used to reduce fever and pain.

Specifically of note, aspirin and NSAIDS should not be used until dengue can be ruled out to reduce the risk of bleeding.

The neurologic complications of Zika such as microcephaly and Guillain-Barré syndrome are not curable, but should be treated following usual guidelines to improve outcomes.

#2 Active learning question: Dengue fever

The Zika virus has spread into known dengue endemic regions. Since both steroidal agents and NSAID agents can cause hemorrhaging in dengue patients, these medications should be avoided until dengue can be positively ruled out.

A waiting period should be observed for these agents until affected patients have been afebrile for _____ hours and have had no other warning signs of severe dengue.

- a. ≥ 24 hours b. > 48 hours c. ≥ 72 hours

Source:

[*CDC – Clinical Management Dengue Endemic areas pdf*](#)

Prevention

The best way to prevent Zika infection is to avoid travel to areas with known Zika virus. However, if faced with exposure to Zika, there are several important ways to lessen the risk of transmission.

Mosquito Transmission

Preventing mosquito bites is the first step to preventing infection in areas with Zika. Using EPA-

approved mosquito repellants, treating clothing with pyrethrin, wearing long-sleeved shirts, and long pants, and staying indoors or in areas with mosquito netting are important measures to significantly reduce bite risks.

After returning home from an area with Zika it is still important to prevent mosquito bites. If an uninfected mosquito bites an infected person the mosquito can transmit the virus to other people. Precautions should be taken for at least 3 weeks to prevent this form of transmission.

Sexual Transmission

Be aware of the travel history of any sexual partners. To protect sexual partners, men and women should abstain from sex or use a barrier method of protection such as condoms. Men should follow these precautions for six months after the last possible exposure or after the start of symptoms (regardless of diagnosis). Women should follow these precautions for eight weeks.

Pregnancy

Women who are pregnant or plan to soon become pregnant should avoid traveling to areas where Zika is prevalent. Safe sex practices should also be followed if sexual partners may have been exposed to Zika.

If a pregnant woman has traveled to or lives in an area with the Zika virus she should consult her doctor regardless of symptoms.

Breastfeeding

While avoidance of Zika is recommended for pregnant women, breastfeeding is still recommended even if the mother is a known carrier of Zika. The WHO recommends exclusive breastfeeding for at least the first 6 months of life.

Vaccine

While research is being conducted to learn more about the Zika virus, there is currently no vaccine available.

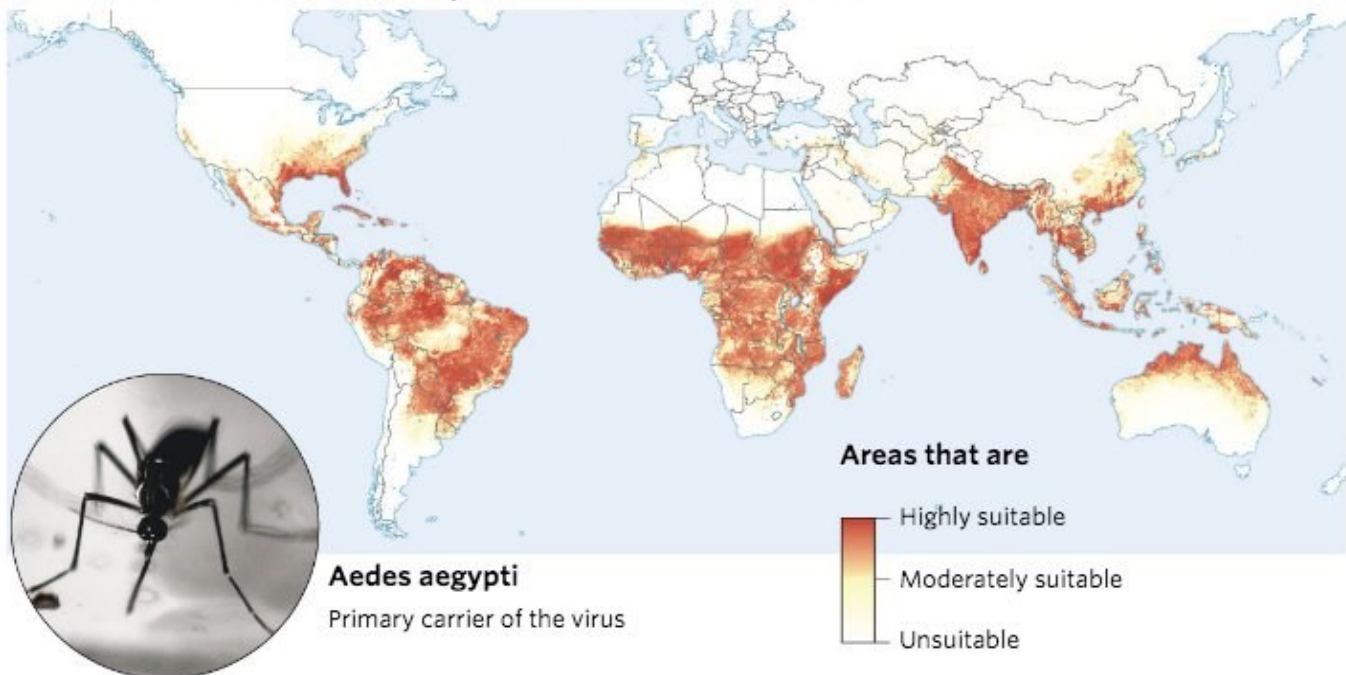
Summary of the situation

According to a World Health Organization (WHO) update (Feb 2017), “The Zika Virus continues to spread geographically to areas where mosquitoes are present that can transmit the virus.”

Preventative measures are advised in these areas to reduce potential risk of adverse events associated with active infections, especially in pregnant females.

Zika's primary carrier is the *Aedes aegypti* mosquito, which flourishes in warm climates around the world...

Predicted habitats of the main mosquito that transmits the Zika virus



Sources: Kraemer MUG et al., eLife Sciences, University of Oxford; photo by Marvin Recinos/Agence France-Press/Getty Images (aegypti)

References

Centers for Disease Control and Prevention [Internet]. US Department of Health and Human Services; c2016 [updated 2016 Oct 24; cited 2016 Oct 25] Zika Virus. Available from: www.cdc.gov/zika

World Health Organization [Internet]. WHO; c2016 [updated 2016 Oct 20; cited 2016 Oct 25] Zika Virus. Available from: <http://www.who.int/topics/zika/en/>
<http://www.who.int/features/qa/zika/en/>

Course Development: This course was developed under the guidance and review protocols of the Office of Continuing Education, South Dakota State University College of Pharmacy.

Financial disclosure:

The author of this course has had no relevant financial relationships with any commercial party having a vested interest in the content of this article.

Patient education brochure attached for your use.

“Pharmacist Consult - Zika Virus Disease: Public Health Concerns”

Learning Assessment - Post-test

1. Zika can be transmitted through:
A. Sex B. Mosquitos C. Blood D. All of the Above
2. Which mosquito carries the Zika Virus, and what type of virus is Zika?
A. Anopheles, caudovirales
B. Aedes, flavivirus
C. Culex, flavivirus
D. Aedes, caudovirales
3. Where did the Zika virus originate?
A. Florida B. Brazil C. Spain D. Uganda
4. What is a Zika diagnosis based off?
A. Symptoms B. Travel history C. Blood or urine test D. All of the Above
5. Which symptoms are commonly associated with the Zika Virus?
A. Microcephaly in newborns
B. Guillain-Barré syndrome
C. Mild flu-like symptoms
D. Meningitis
6. There is a vaccine for the Zika virus. A. True B. False
7. To prevent transmission of the Zika virus during sex, potentially infected females should:
A. Abstain from sex or use condoms for 6 months
B. Abstain from sex or use condoms for 8 weeks
C. Only abstain from sex or use condoms if symptomatic
8. After traveling to a country with confirmed Zika, you should:
A. Watch for common symptoms of the Zika Virus
B. Go to the doctor immediately to be tested for Zika
C. Take precautions to prevent mosquito and sexual transmission
D. A and C
E. All of the Above
9. Breastfeeding is contraindicated if the mother is infected with Zika. A. True B. False
10. Treatment for Zika:

“Pharmacist Consult - Zika Virus Disease: Public Health Concerns” *(Knowledge-based CPE)*

To receive 1.0 Contact Hours (0.1 CEUs) of continuing education credit, preview and study the attached article and answer the 10-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 70% (7/10) is not achieved on the first attempt, another answer sheet will be sent for one retest at no additional charge.

Credit upload to a participant’s eProfile account - within two weeks following successful completion of this course.



The 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: #0063-0000-17-032-H01-P.

Learning Objectives - Pharmacists: 1. Identify the family and genus of the mosquito known to transmit the Zika Virus; 2. Describe the history of the Zika virus and its current geographical infection patterns; 3. Describe the key transmission characteristics of Zika infections; 4. Identify typical symptoms, diagnosis parameters, and potential health consequences for people with suspected Zika virus infections; 5. Assess treatment recommendations for patients with suspected infections; 6. Provide patient education on best practices for prevention of Zika infections; 7. Counsel patients about Zika transmission concerns relating to pregnancy and breastfeeding.

- Circle the correct answer:**
- | | | |
|------------|--------------|-----------|
| 1. A B C D | 5. A B C D | 9. A B |
| 2. A B C D | 6. A B | 10. A B C |
| 3. A B C D | 7. A B C | |
| 4. A B C D | 8. A B C D E | |

Course Evaluation – must be completed for credit.

	<u>Disagree</u>					<u>Agree</u>	
Material was effectively organized for learning:	1	2	3	4	5	6	7
Content was 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
<i>List any learning objectives above not met in this course:</i> _____							
<i>List any important points that you believe remain unanswered:</i> _____							
Course material was evidence-based, balanced, noncommercial:	1	2	3	4	5	6	7
<i>List any details relevant to commercialism:</i> _____							
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 #: _____

Address: _____
 Street City State ZIP

Email address: _____ Ph: _____ Interest in additional CE courses? Y / N

e-Profile ID number (ePID): _____ Date of Birth (MMDD): _____

Course release date: July 3, 2017 / Expiration date: July 3, 2020 / Target audience: Pharmacists

Please mail this **completed answer sheet** with your check of \$8.00 to: **SDSU College of Pharmacy – C.E. Coord.**
 Office Ph: 605-688-4242 / **Bernie.Hendricks@sdstate.edu** **Box 2202C, Brookings, SD 57007**

IN MEMORIAM

Larry Harrison

In a world of red tractors and red pickup trucks, where cattle graze and wheat fields forever wave, a man that we will dearly miss, now watches over it all.

Larry Veldon Harrison was born in Aberdeen, Washington on June 17, 1945 to Veldon "Tuff" and Mildred (Trautman) Harrison. He moved to South Dakota at five months old with the family to the farm northeast of White River. He attended Prosperity Flats Grade School through 8th grade and graduated from White River High School in 1963.

After high school, Larry attended college at the University of South Dakota and South Dakota State University graduating from the College of Pharmacy in 1969. His professional career took him to Sioux Falls where he worked as a Pharmacist until moving back to the farm in 1977. He purchased Ranchland Drug in 1978 and operated the business providing pharmacy and veterinary supplies to residents of the surrounding community.

Larry loved his life on the farm, the livestock, and everything related to the business. All one had to do was spend a few minutes with him to feel his passion. Larry was equally passionate about the drugstore and the people he served. He put in many long hours making sure people were taken care of.

Carol Johnson

Carol Lynn Johnson, a child of God, passed into the Kingdom of Heaven on June 11, 2017, while in the loving care of family and friends at the Dougherty Hospice House-Avera Health in Sioux Falls, SD. For 53 years she graced all with her peaceful, loving spirit.

Born to Donald and Gloria (Hille) Johnson on January 7, 1964, in Sioux Falls, Carol grew up and attended Sioux Falls public schools. Graduating in 1987 from the College of Pharmacy at South Dakota State University, Carol enjoyed a successful professional career with several area businesses including Scott's Pharmacy, HyVee and Tel-Drug Inc.

Carol faced the impacts of multiple sclerosis in her adult life with gifts of courage and serenity emanating from her faith in Jesus Christ, love of family and friends, and support of her faith community at Trinity Baptist Church in Sioux Falls. She took great pleasure in advocating MS initiatives with administrative support such as ensuring notices of meetings and seminars were sent timely.

In his subtle way, his humor was infectious. The love he had for his family was strongly evident in his words of endearment, encouragement, sometimes more direct than we liked, but always wanting the best for us. He was generous to his community and to those who surrounded him with support.

This past year, Larry has experienced many life changing events. But the most rewarding event was when he committed his life to our loving Savior. We can find comfort in the fact that Larry is no longer suffering but instead rests in the comforting arms of Jesus.

Larry is survived by his loving and caring wife, Linda, White River; beautiful daughter Olivia (Tony) Conrad, Sioux Falls; step children, Spencer Blom, White River, and Kaitlyn Blom, Gillette, WY; four granddaughters, Kenisha Harrison, St. Cloud, MN, Zahra Harrison, Minneapolis, MN, Isabelle Barnes, Sioux Falls, and Leightyn Blom, White River; two sisters; Patti (Wayne) Stromer, White River, and Peggy (Tom) Honn, Ault, CO; many nieces, nephews, and a host of other relatives and friends.

Larry was preceded in death by his parents Veldon "Tuff" and Mildred Harrison; one sister, Beverly; grandparents Emmett and Otellia Harrison, and Fred and Ethel Trautman; and niece, Kristi Siegmund-Hermes.

"Happy Johnson," a most favored feline family member, received Carol's loving attention and care as they spent many hours in the company of each other. Carol enthusiastically attended many local area theatrical productions and movies. Carol also genuinely enjoyed family dinners with her immediate family, after which more than a few board games would spice up the occasion! Earlier in her life, Carol was thrilled to travel to Europe with the Washington High School Band, and especially valued a trip to Sweden connecting to family and friends while accompanied by "Aunt" Bette Peterson. Shirley Larson recently provided Carol with professional services and encouragement as a trusted friend.

Grateful for having shared her life are her mother, Gloria Hoffman, Sioux Falls; brother, Dale Johnson (Lois), Sioux Falls; brother, Dennis Hoffman (Jeri) and family, Sioux Falls; sister, Patricia (Harlan) Nelson and family, Louisiana. Also surviving Carol are uncles, Junior Hille, Charles Pekas Leonard (Jackie) Johnson and numerous cousins. She was preceded in passing by her father, Donald Johnson; her second dad, Marlin Hoffman; aunts, Glenda Pekas, Carol Hille and Elinore Johnson; and a cousin, Scott Hille.

IN MEMORIAM, continued

Rob Loe

Robert Loe, 44, of Pierre, died Thursday, July 13 at Avera Heart Hospital in Sioux Falls.

Robert Craig Loe, son of Oscar and Carolyn (Gemar) Loe, was born in Pierre and raised in Sioux Falls. He attended Lincoln High School where he excelled academically and graduated with honors in 1991. He enjoyed basketball and hunting in his high school years. Rob then attended South Dakota State University and graduated Summa Cum Laude with a pharmacy degree in 1996.

Rob married his high school sweetheart, Valerie Krumvieda, on March 15, 1997. They started their married life in Layton, Utah where he was a pharmacist at Kmart. In December 1997, they made the move to Pierre, when he was hired as a pharmacist at Walmart and worked there until 2011. He then transferred to Lynn's Dakotamart as the pharmacist manager from 2011- present.

Rob and Valerie enjoyed renovating many historic homes in Pierre. They loved going for walks and spending time with friends. They have also spent countless hours farming and looked forward to their pumpkin harvest this fall. Most of all, he loved being a father to their four children; Nicholas 15, Isaac 13, Emmy 10, and Alyssa 8.

Rob's favorite times were spent at his farm preparing the land for wildlife refuge and planting crops, especially the pumpkin patch. He cherished time with his boys: pheasant and deer hunting, watching them compete in swimming, basketball, baseball and trap shooting. Rob treasured his time with his girls, watching them in gymnastics, swimming and the countless trips to Zesto's for those summer ice cream treats that always melted too fast.

Harold H. Schuler

Harold H. Schuler, 94, died peacefully on June 15, 2017 in his home in Tucson, Arizona. Schuler was born and raised on a farm near Tripp, S.D. After graduation from Tripp High School, he served in World War II as a member of the 20th Army Air Force in Guam. He graduated from the University of South Dakota with a B.A. in 1950 and a M.Ed. in 1951. That year he was named Director of the South Dakota School Lunch program in Pierre, where he later met and married his wife Leona, a local school teacher.

He served as an assistant to United States Senator Francis Case from 1954 to 1962, living both in Pierre and in Washington, D.C. Following the death of Senator Case in 1962, he purchased the Hughes County Abstract Company. In 1964, he was appointed Executive Secretary of the S.D. Board of Pharmacy and the S.D. Pharmaceutical Association. He continued in the abstract business until 1979 and as secretary to the pharmacists until 1986.

For more than twenty years following his retirement, Schuler devoted himself as an author, researcher, and community leader to the preservation and promotion of South Dakota history. Schuler wrote numerous books and articles on South Dakota history, especially on the history of Pierre and its surrounding area. Schuler wrote a regular column for the Pierre publication River Life.

Work was always a priority for Rob; sleep was the one thing he didn't have time for. Rob was always looking for the next adventure, be it a hunting trip with his boys, finding more acres to farm or a house to build with Kris.

Rob was involved in many clubs and activities including: the Department of Social Services Medicaid Advisory Committee, OAHE Inc., Human Legal Rights Positive Action Plan committee member, Pierre Izaak Walton board member, advocate for Civic CASA children, Medicaid Solutions Workgroup committee member, Past President of the SD Pharmacists Association, American Pharmacists Association, Prescription Opioid Abuse Advisory Committee, and Pierre Pheasants Forever. He was also instrumental in starting the TF Riggs High School Clay Target Team and was the head coach of the team for two years.

Those who will be forever grateful for sharing in his life include: his wife, Valerie, sons, Nicholas and Isaac, daughters, Emmy and Alyssa, mother, Carolyn Loe of Sioux Falls, sister, Kari (Michael) Janak of Sioux Falls and their children Jordan and Dillan, Also, in-laws Wayne and Debbie Krumvieda of Sioux Falls, brother-in-law Darren (Tonia) Krumvieda of Flandreau, SD and their children Shelby, Jordan, Landon, Connor, Brooklyn and Dillon, brother-in-law Jason (Sasha) Krumvieda of Sioux Falls and their children Max, Miles and Marcus. His aunts include: Marsha Gemar of Scotland, Ita Vellek of San Diego, CA, one uncle, Craig Loe of Manassass, VA and numerous cousins.

Rob was preceded in death by: his father, Oscar Loe, uncle, Max Gemar, aunt, Chisako Loe, uncle, Dr. Donald Vellek, cousin, Mike Gemar and his grandparents.

Schuler's books on South Dakota forts including Fort Pierre, Fort Sully and Fort Sisseton, are held in libraries throughout the world. The Center for Western Studies at Augustana College recently reprinted Schuler's Fort Sisseton book.

Schuler served on the Board of Trustees of the South Dakota Historical Society and in 2015 was honored by the SDHS with its award for lifetime achievement, the Robinson Memorial Award.

Schuler was active in numerous Pierre organizations including the First United Methodist Church, the Pierre Elks Club, and the Pierre Chamber of Commerce.

Harold is survived by his wife Leona of Tucson, Arizona. His two daughters, Lynda Schuler and Debra Cromwell, also live in Tucson, along with Debra's husband Gary Cromwell and their children Catie and Charlie. His son Mark Schuler, lives in Bismarck. Harold is also survived by his sister Lucille Whiting of Mesa, Arizona.

The family requests that memorial contributions in Harold's name be made to Peppi's House TMC Hospice at Tucson Medical Center in Tucson, Arizona or the South Dakota Historical Society Foundation in Pierre, South Dakota.

CLASSIFIEDS

**To Place a Classified Ad in the Journal
Call, write, fax or email the ad to:**

South Dakota Pharmacist Classified
P.O. Box 518, Pierre, SD 57501
email: sdpha@sdpha.org
phone: (605)224-2338 fax: (605)224-1280

Classified Rates

Classified ads are \$25.00 per five line ad/per issue. Additional lines will be billed at \$1.00 per line.

Including your company logo will be an extra \$5.00 charge.