

August 2017

Volume 4, Issue 5

## President's Message

*Excerpted from the NYSCHP President's Installation Speech at the Annual Assembly, 4/29/17*

I am honored to be among such prestigious company, among some of the pharmacy rock stars who have had their opportunity to make their mark on hospital and health-system practice of the pharmacy profession. I would like to thank and acknowledge my immediate predecessor, Joe Pinto, for his passion, leadership, and accomplishments during his presidential year. He kept his word by following through on getting the Council started on re-branding, re-newing, and re-charging. He also led us through our first year with Capitol Hill Management Services, a company that helps our organization focus on the needs of our members without getting bogged down in the details and logistics of running a small, non-profit organization in New York State. Our new website, logo, and colors are the boldest examples of his accomplishments. I plan to carry on his momentum to let the public and our legislators know that health-system pharmacists exist and that we have a profound impact on healthcare delivery in New York State.

Why do I and numerous others participate and lead organizations such as the Council? It is to provide a service to our community. Like I hear from candidates interviewing for admission to pharmacy school, "I want to help people." Yes, we are volunteers and have full-time pharmacy jobs, but at the same time, we want to make the world a better place and advocate for our patients. Interestingly, the laws we advocate are almost always about improving what we do for our patients, rarely for the pharmacy profession itself.

I look forward to working with the incoming board of directors, committee chairs and committee members, chapter officers, Council members, and students from throughout New York State to focus on the following initiatives this coming year:

- Look to the needs of our students, who are our future colleagues and members
- Develop and foster collaboration and interprofessional activities, like pharmacy school accreditation standards through ACPE
- Grow the funds for our political action committee (PAC) and be more assertive using those monies to further advocacy
- Establish and maintain a presence in the state capital on a continuous basis, and become a "go-to" resource for our lawmakers
- Lead the effort to expand our scope of practice with quality standards
- Address the needs of the 11 chapters across New York State that form the foundation of NYSCHP
- Continue to reach the goals of our 3-year strategic plan established under Joe Pinto's leadership
- Work with our Director of Communications, Catherine Millares, and our Council to produce a video demonstrating to the public the important work we do in hospitals and health systems
- Establish the role of a historian as we will celebrate 60 years since the establishment of NYSCHP in 1958

Thank you to my predecessors in the Council and colleagues, from past presidents to fellow board members, directors, chapter officers and delegates, for your guidance, mentorship and support in carrying out the Council's mission.

Christopher Jadoch  
*NYSCHP President*

### *Board of Directors*

*Christopher Jadoch*

*Anthony Longo*

*Joseph Pinto*

*Andrew Kaplan*

*Leila Tibi-Scherl*

*Marcia Gutfeld*

*William Allan Prescott, Jr.*

*Robert Berger*

*Catherine Millares-Sipin*

*Robert DiGregorio*

*Ruth Cassidy*

*Heide Christensen*

*Shaun Flynn*

*Abby Curro*

# The 12<sup>th</sup> Annual New York City Regional Pharmacy Residency Conference

By Vassilia Sideras and Jimmy Seo, Pharm.D. candidates 2018

Pharmacists and pharmacy students gathered at Long Island University on June 23<sup>rd</sup> for the 12<sup>th</sup> annual New York City Regional Pharmacy Residency Conference. This event, a collaboration between Long Island University and the Royal Counties, the New York City, and the Long Island Chapters of NYSCHP, showcased the research projects of current pharmacy residents. The setting encouraged engaging conversations between pharmacists, residents, and students. This event gave residents an opportunity to see the work that their peers had done and for future pharmacy residents and students to be exposed to what is expected of them in the future.

The event began with a continental breakfast, affording the attendees a chance to introduce themselves and network amongst one another. The opening presentation by keynote speaker, Mr. John Lasky, followed and was titled "Today's Productive Workforce." Mr. Lasky is the Chief Human Resources Officer of the Temple University Health System, a role that reinforced to him that employee engagement and commitment are directly related to achieving goals and increased productivity in the workforce. He discussed important characteristics employees should possess in an effective workplace and how to create such a workplace. He highlighted the importance of positive and negative feedback and how it is essential for employees to understand where they are now and what they need to do to improve. He also discussed the importance of developing new leaders, people who motivate and increase engagement to improve loyalty and productivity. The residents and students in the audience should apply this information and think about what characteristics to look for when seeking employment in the future as well as how they can be better mentors to future generations.

The pharmacy resident presentations were split up into two sessions, one before lunch and one after. A variety of topics were presented, including cardiology, critical care, general pharmacy practice, infectious diseases, oncology, pediatrics, and psychiatry. The presentations ranged from original research studies to reviews of current literature and case reports. After each presentation, the floor was open for any questions or comments. The evaluators asked the presenters specific questions about their topics, which further opened the floor to interesting conversation and insight from the audience.

This event was a great opportunity for current pharmacy residents, pharmacists, and students to not only learn about different topics, but also share their own experiences during the discussions. There was a great turnout and everyone looks forward to a successful conference again next year.

# University of Buffalo School of Pharmacy and Pharmaceutical Science Spotlight

The University at Buffalo School of Pharmacy and Pharmaceutical Sciences Student Society of Health-Systems Pharmacy (UB SPPS SSHP) has had an eventful and successful year. New programs were implemented in both semesters that had a positive impact on SSHP and UB SPPS.

The UB SSHP mentorship program kicked off another successful year with 18 pharmacists and seven P4 students paired with 34 P1-P3 students who shared similar career or clinical interests. The goal of the program is to provide the students with advice and guidance throughout the year. A new program implemented last year which continued to grow this year is the UB SSHP “Run After Your Residency” initiative, where P1 and P2 SSHP members can shadow local clinical pharmacists. Students can gain experience in a specific clinical setting to assist them in choosing a residency path. Seven pharmacists and 20 SSHP members have participated so far. Lastly, in collaboration with the UB SPPS Residency Advisory Committee and local residency programs, UB SSHP hosted a successful Pharmacy Residency Day in the fall semester and a Health-Systems Pharmacy Day in the spring semester, where pharmacists and residents presented the purpose of residency training, what to expect during residency and how to best prepare for residency.

During the fall semester, the SSHP chapter piloted a new fundraiser selling blank note cards with the UB SPPS logo that students could use to send a “thank you” note following residency or job interviews. SSHP also partnered with Lambda Kappa Sigma and Phi Lambda Sigma to assist with wellness programs during both semesters, such as “Fall Back On Track,” “Spring Into Health,” and the PLS Health Fair, which allowed SSHP to work directly with members of the community and provide education about cholesterol health and the Vial of Life program. Lastly, SSHP worked with a faculty member to host two curriculum vitae workshops during the fall semester prior to ASHP Midyear.

The 2016 ASHP Midyear Clinical Meeting in Las Vegas was attended by over 70 P3 and P4 students from UB SPPS, which was the highest turnout from UB students in recent years! Additionally, we were well-represented at the ASHP Clinical Skills Competition. P3 students Kelsey Violanti and Kristen Russo, who took first place in our local competition, fell just short of the top 10 at Midyear.

The spring semester was just as busy and successful as the fall semester. SSHP hosted our annual residency speaker series, “Reach Your Pinnacle: Let’s Get Clinical!” where pharmacists and residents in a variety of clinical settings spoke about their experiences. Topics included ambulatory care, internal medicine, oncology, managed care, psychiatric pharmacy, and infectious diseases. Our largest event in the spring semester was Trivia Night, where UB students faced off against students from the D’Youville College School of Pharmacy. The SSHP chapters from both schools collaborated on this event, which included a social/networking hour before 10 teams competed in three rounds of trivia.

Rachael Cardinal

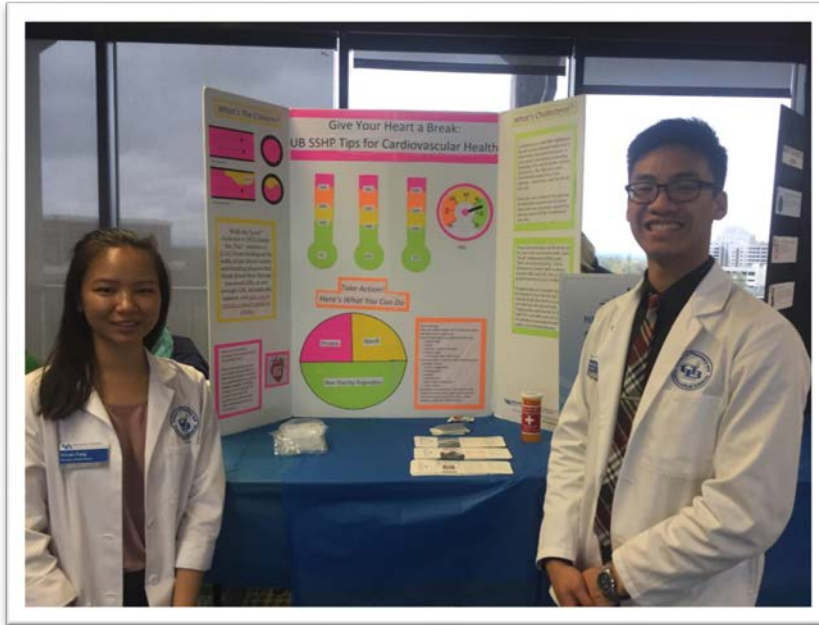
University at Buffalo School of Pharmacy & Pharmaceutical Sciences, Class of 2018

SSHP President

Erin Slazak, Pharm.D., BCPS

University at Buffalo School of Pharmacy & Pharmaceutical Sciences

SSHP Faculty Co-Advisor



***Student members! Interested in contributing to the news brief? Want to have your article featured in the next issue? Please contact NYSCHP Director of Communications Dr. Catherine Millares-Sipin at [cmillaressipin@gmail.com](mailto:cmillaressipin@gmail.com) for more information.***

# Legislative Update

## Lobby Day and Current Pharmacy Bills You Should Know About

On April 25th, over 400 students and pharmacists gathered in the “Egg” in Albany to talk to legislators during our annual Pharmacy Lobby Day. This group spanned multiple pharmacy associations like PSSNY, NYSCHP, ACCP, the Chain Pharmacy Association, and ASCP (among others). Lobby Day is the one day where we all get together and rally together to promote bills related to our profession. The day commenced with encouraging words from pharmacy leaders and Assemblymen McDonald and Englebright as well as Senator Griffo (all sponsors of our bills).

This year, we promoted three bills:

1. The first bill - Pharmacy Technician Registration and Certification (S5584 Griffo/A4611-A Englebright) - will finally help to define and regulate pharmacy technicians in New York State. It is a bifurcated bill that requires pharmacy technicians to be registered, when working in the community setting, or certified, when working in hospitals or assisting in compounding in any setting. There are grandfathering provisions in place to allow for long-time pharmacy technicians in good standing to be able to continue their jobs after the law is implemented. We believe this bill will help pharmacists work at the top of their licenses, decrease drug diversion, and help improve medication safety.
2. The second bill - Intern as Immunizers (S1043 Funke/A2857 McDonald) - will allow pharmacy interns to administer vaccines under the direct supervision of a licensed and certified immunizing pharmacist. Forty-three other states allow pharmacy interns to administer vaccines. This will give students valuable training and expand our immunization impact as well.
3. The third bill - Immunization Expansion/Removal of Sunset (S321 Robach/A455 Paulin) - will expand vaccines that pharmacists can administer to all CDC-recommended vaccines, including Hepatitis A and B, varicella, HPV, and MMR. It will also make the law permanent, since it currently sunsets in July 2019.

If you missed Lobby Day, no worries! The time is now to contact your legislator and advocate for these important pieces of legislation. We must engage in grass-roots efforts and act collectively to create change. And if possible, try to join next year's Lobby Day in Albany. The most inspiring part was seeing the hundreds of students in their white coats ready to speak passionately about what they can do if they were only allowed to. This gave me faith in our profession's future.

Ask not what your profession can do for you; ask what you can do for your profession.

Best,  
Monica Mehta, PharmD, MPH, BCPS



Picture: Shaun Flynn, Joe Pinto, and Monica Mehta on Lobby Day.





## Lobby Day Highlights



Senator Tim Kennedy, Buffalo (center); students from D'Youville School of Pharmacy; and Professor Chris Daly, University at Buffalo (right)



UB Students Attending Lobby Day

# Political Action Committee (PAC) Fund

***Have you donated to the NYSCHP PAC fund? Wait...Do you know what the PAC fund is?***

The New York State Council of Health-system Pharmacists (NYSCHP) is positioned to have immense influence on the laws, rules, and regulations that govern the practice of pharmacy. NYSCHP maintains a division on public policy and an active public policy committee in addition to a lobbyist, VP of public policy, and seasoned executive director for/of policy work. NYSCHP was successful in getting Collaborative Drug Therapy Management signed into law on May 18, 2011. NYSCHP also supports legislation that expands the role of pharmacists as immunizers (successful limited expansion 2012), the elimination of citizenship as a requirement to become a licensed pharmacist in NYS (eliminated in 2012) and registration and certification of technicians.

By donating to the PAC fund, you can help support the legislative efforts of the pharmacy community.

To make a donation, please contact the NYSCHP office at [Office@nyschp.org](mailto:Office@nyschp.org) or Christopher Jadoch at [jodochc@dyc.edu](mailto:jodochc@dyc.edu).



## Royals Chapter Spotlight

The Royal Counties Chapter of the New York State Council of Health-system Pharmacists, which serves Brooklyn, Queens, and Staten Island, is proud to announce our new executive board members: President-Elect Bejoy Maniara, Secretary Maria Sorbera, and Director-at-Large Marian James. It is with great confidence that I am able to proclaim that we will have another wonderful year. Of course, we are saddened to see the outgoing executive board members, Elizabeth Chung, Jaclyn Scott, Nina Chhabra, and Mark Warych, leave. However, I know - without a doubt in my mind - that they will continue to be active members, who are more than willing to pass their wisdom on to those who succeed them.

To keep our tradition going, we held our installation ceremony at Russo's on the Bay in Howard Beach this past June. To start the night off, representatives from different hospitals within our region were called up to say a few words about their residents, including their journey and development over the past year, as well as their future plans. All representatives were ecstatic to speak on behalf of their residents. Our distinguished guest, Anthony Longo, subsequently installed our new executive board for 2017-2018. It was an honor and privilege to be installed by the President-Elect of the New York State Council of Health-system Pharmacists. The night ended with a bang when Bishoy Luka, back by popular demand, hosted "Pharmacy Jeopardy." Members were selected at random to make up four teams that ferociously competed in what resulted in a very close game. The collective efforts of all our members made this an installation to remember!

This past year, in addition to providing more educational programs that benefit our members, we also strived to provide opportunities for our members to give back to our community. In October, when terrible weather resulted in poor attendance at one of our continuing education programs, I developed an idea to get our venue to pack the extra 35 meals for a surprise delivery to the Restfull Nights Homeless Shelter in South Jamaica, Queens. They were overcome with joy to receive the wonderful food. Later that month, Royal Counties paired up with student pharmacists from Long Island University to educate our nation's veterans on diabetes management at the Annual Health Fair held in Fort Hamilton, Brooklyn. We even ordered and provided custom Royal Counties pill boxes to increase the chance of adherence for patients we counseled. In December, Royal Counties teamed up with the New York City chapter to collect toys to provide to the Toys for Tots Foundation. We collaboratively collected over 50 gifts for less fortunate children, and the event was a huge success! We hope to continue to proactively provide more to our community in the days, months, and years to come!

Have a safe and joyous summer!  
Deep Patel, PharmD  
President, Royal Counties Chapter



Royals Chapter Installation of Officers

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Pharmacy Jeopardy

Toys for Tots



Health Fair



# Royals Chapter Spotlight

## Betrixaban: A New Anticoagulant for VTE Prophylaxis

It is certainly an exciting time to be a pharmacist working in the field of anticoagulation. One recent development in the anticoagulation realm is the introduction of betrixaban (Bevyxxa®), a newly-approved factor-Xa inhibitor with a novel indication. Betrixaban is not only the first drug of its kind approved for prophylaxis of venous thromboembolism (VTE) in hospitalized patients, but also the only drug with this indication. The unique indication of betrixaban will provide healthcare providers with a new approach to prevent thromboembolic events, and give patients an additional safeguard against VTEs.

Betrixaban selectively inhibits free and prothrombinase-bound factor Xa without any direct platelet effects. It is approved for the prophylaxis of VTE in adults that are hospitalized for an acute illness and have risk factors for VTE. Betrixaban comes in the form of an oral capsule, and is available in both 40 mg and 80 mg strengths.<sup>1</sup> Therapy should start with 160 mg on day one, followed by 80 mg once daily with food. The recommended treatment duration is between 35 and 42 days.<sup>2</sup> While current guidelines do not recommend using extended-duration prophylaxis after discharge, they have not been updated recently and other data has shown that the risk of VTE remains increased for up to a month after patients leave the hospital.<sup>3,4</sup> Since current parenteral therapy for VTE prophylaxis is usually stopped when a patient leaves the hospital, betrixaban's oral formulation can allow for a more convenient way for patients to receive prolonged VTE prophylaxis after discharge if necessary.

Approval of betrixaban for the prophylaxis of VTE in patients hospitalized for an acute medical illness with risk factors for VTE stemmed from the results of a randomized, double-blind, multinational trial titled Acute Medically Ill VTE Prevention with Extended Duration Betrixaban (APEX). Patients hospitalized for an acute medical illness, including heart failure, infectious disease, respiratory failure, rheumatic disease and ischemic stroke, were randomly assigned to receive subcutaneous enoxaparin for 10 ± 4 days plus oral betrixaban placebo for 35 to 42 days, or subcutaneous enoxaparin placebo for 10 ± 4 days plus oral betrixaban for 35 to 42 days. Patients were eligible if they were at least 40 years old, were immobilized for at least 24 hours, were expected to stay in the hospital for at least three days and had certain risk factors including positive D-dimer test or history of VTE. The patients were analyzed in three progressively inclusive cohorts:

1. Patients with an elevated D-dimer (at least two times the upper limit of normal)
2. Patients with an elevated D-dimer OR an age of at least 75 years
3. All enrolled patients

The primary efficacy endpoint studied in the APEX trial was a composite of asymptomatic proximal deep-vein thrombosis, symptomatic VTE and death from VTE. The principal safety outcome was major bleeding at any point until seven days after discontinuation. The occurrence and relative risk of the primary efficacy endpoint compared to enoxaparin is summarized below:

Cohort	Occurrence of primary efficacy endpoint		Relative Risk (95% Confidence Interval)
	Betrixaban	Enoxaparin	
1	132/1914 (6.9%)	166/1956 (8.5%)	0.81 (0.65-1.00); p = 0.054
2	160/2842 (5.6%)	204/2893 (7.1%)	0.80 (0.66-0.92); p = 0.03
3	165/3112 (5.3%)	223/3174 (7.0%)	0.76 (0.63-0.92); p = 0.006

With respect to safety, major bleeding occurred in 0.7% of patients in the betrixaban group and 0.6% of patients in the enoxaparin group (relative risk, 1.19, 95% CI, 0.67-2.12; p = 0.55). The authors concluded that while there was no significant difference in cohort 1, there is possible benefit of betrixaban in the other cohorts.<sup>5</sup> In a post hoc analysis of the APEX trial, it was found that extended-duration betrixaban reduced fatal or irreversible bleeding or ischemic events (cardiopulmonary death, myocardial infarction, pulmonary embolism and ischemic stroke) by about 30% when compared to standard-duration enoxaparin in all patients after 77 days. Sixty-five patients would require treatment with betrixaban to prevent one fatal or irreversible event versus enoxaparin.<sup>6</sup> Lastly, a pharmacokinetic study was performed which

analyzed the efficacy and safety between the full 80 mg dose of betrixaban against the 40 mg dose used in patients with a creatinine clearance between 15 to 30 mL/min, or with concomitant use of a strong P-glycoprotein inhibitor. The median concentration of betrixaban among patients receiving the 80 mg dose was higher than that of the 40 mg dose (19 ng/mL vs 11 ng/mL,  $p < 0.001$ ). While there was no excess of major bleeding associated with either betrixaban dose compared with enoxaparin, there was no difference in the primary efficacy outcome with the 40 mg dose compared with enoxaparin across all cohorts.<sup>7</sup>

Before dispensing betrixaban to patients at risk for VTE, we must first consider safety and appropriateness of use. Until further research supporting its use is available, betrixaban should be avoided in pediatric patients, as neither safety nor effectiveness has been established.<sup>1</sup> Safety in pregnancy and lactation is also unestablished, and should be avoided unless the potential benefit to the mother outweighs potential risk to the child.<sup>1</sup> Betrixaban should be used cautiously in patients with renal impairment, and should be dose-adjusted if the creatinine clearance is between 15 and 30 mL/min. The recommended dose in these patients is 80 mg once as an initial dose, followed by 40 mg once daily for the duration of therapy.<sup>1</sup> Other patients who require dose adjustments include patients taking other medications that are P-gp inhibitors. In addition, betrixaban should not be used in patients with severe hepatic impairment.<sup>1</sup> As with other anticoagulants, betrixaban has the potential to increase bleeding risk, particularly when combined with other antiplatelet medications, anticoagulants, thrombolytic medications, selective serotonin reuptake inhibitors (SSRIs), selective norepinephrine reuptake inhibitors (SNRIs) and nonsteroidal anti-inflammatory drugs (NSAIDs).<sup>1</sup> Bleeding is the most common adverse event associated with betrixaban, and all patients should be counseled on signs and symptoms of internal bleeding.<sup>2</sup> In the event of a bleed, there is currently no available antidote to reverse the anticoagulant effect.<sup>2</sup> Use of betrixaban is contraindicated in patients who are experiencing active bleeding.<sup>2</sup> Finally, betrixaban has a black box warning for epidural or spinal hematomas in patients who are receiving betrixaban concomitantly with neuraxial anesthesia, or who are undergoing spinal puncture; therefore, patients should be screened for appropriate use and monitored for any signs or symptoms of neurological impairment.<sup>1</sup>

The approval of betrixaban represents an exciting development in the field of anticoagulation. The use of betrixaban in acute medically ill patients with VTE risk factors gives clinicians more options in preventing thromboembolic events in their patients. Studies looking at the use of betrixaban in patients with atrial fibrillation and in patients after total knee replacement have occurred.<sup>8,9</sup> While betrixaban is not approved for either of these indications, these studies warrant the future investigation of the drug for other uses. Be on the lookout for betrixaban, the latest factor Xa inhibitor now approved.

Sarah Krizan, Jessica Maas, Kevin Won  
PGY1 Residents, Long Island Jewish Medical Center

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# Calling all NYSCHP members!!!

Are you as excited about the New York State Council of Health-system Pharmacists as we (the NYSCHP Communications Committee members) are? Let us know why! Send us your iPhone or Android videos and tell us why you joined NYSCHP! What has NYSCHP done for you?

These videos will be used as a marketing tool to spark interest in NYSCHP among pharmacists, student pharmacists, and pharmacy technicians throughout New York State and to ultimately increase our membership and broaden your networking base!

In addition, the NYSCHP communications committee would like to create an educational video targeting the lay public.

Are your non-pharmacist friends/family/colleagues still confused about what you do as a health-system pharmacist? Help us educate them! Send us your iPhone or Android videos about the number 1 or 2 or 3 things the public should know about our profession! Tell everyone just how much the practice of pharmacy has changed over the years!

We look forward to hearing from you and seeing your videos.

## *Instructions for submission:*

- *Please take video using landscape mode.*
- *Make sure you are not wearing any items that have a logo*
- *Submit your videos by September 1<sup>st</sup>, 2017*
- *Email videos to [office@nyschp.org](mailto:office@nyschp.org)*





# NYSCHP and Local Chapter Upcoming Events

## *August 2017*

- August 23<sup>rd</sup>: NYCSHP Chapter: Active Shooter Training
- August 24<sup>th</sup>: NYCSHP Chapter: CE Program
- August 25<sup>th</sup>: NYSCHP Student Program Downstate

## *September 2017*

- September 7<sup>th</sup>: NYSCHP CCC Webinar Series (12PM): Understanding and Minimizing the Impact of Drug Shortages, Erin R. Fox, PharmD, BCPS, FASHP, Senior Director of Drug Information and Support Services and Adjunct Associate Professor for the Department of Pharmacotherapy at the University of Utah
- September 9<sup>th</sup>: NYSCHP Student Program Upstate
- September 9<sup>th</sup>: Western Chapter: Essential Skills for Students at D'Youville
- September 12<sup>th</sup>: NYCSHP Chapter: New Practitioners Networking Program
- September 14<sup>th</sup>: NYCSHP Chapter: Networking Program
- September 21<sup>st</sup>: NYCSHP Chapter: Industry Relations CE Program
- September 21<sup>st</sup>: Western Chapter: Perioperative Care of the Bariatric Surgery Patient (CE)
- September 26<sup>th</sup>: LISHP Chapter with NYS DOH: HIV Medication Errors
- September 29<sup>th</sup>: Tristate Summit Program (see page 14)

## *October 2017*

- October 3<sup>rd</sup>: NYCSHP Chapter: Clinical/Directors Roundtable
- October 21<sup>st</sup>: NYSCHP Critical Care Program Downstate
- October 24<sup>th</sup>: NYSCHP CCC Webinar Series (3PM): New pharmacy practice opportunity: Enhancement of the transitions of care process, Emma M. Gorman, PharmD, Clinical Assistant Professor, Department of Pharmacy Practice, D'Youville College School of Pharmacy
- October 28<sup>th</sup>: NYSCHP Critical Care Program Upstate



## Registration is now open for...

### *Tri-State Health-System Pharmacy Summit 2017*

Friday, September 29, 2017  
DoubleTree by Hilton Hotel  
455 S Broadway, Tarrytown, NY, 10591  
914-631-5700

[DoubleTree](#)



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Pharmacy Leadership Development Workshop

To register go to: <http://www.nyschp.org/tri-state-health-system-pharmacy-summit-2017>

# Job Posting

Interested in posting a job in our monthly news brief?

Our news briefs are distributed to approximately 2000 pharmacist, pharmacy resident, pharmacy intern, and pharmacy technician members on a monthly to bimonthly basis. It also featured in our social media accounts and website.

**NYSCHP** | New York State Council of Health-system Pharmacists

Member Login

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## Welcome to the New NYSCHP Website!

NYSCHP is proud to announce the launching of this new resource for both our members and the public to support and assist health-system pharmacists in New York State. We will be using the next few weeks for further testing and uploading of content before announcing the website's full implementation. **Members will receive an email with a member name and password to gain access to their member profiles within the next 10 days.** Please watch for updates and new features to be sent to you as we work to improve and expand the website's member options. In the meantime, we hope all visitors will explore and enjoy, and as always, if you have any suggestions or questions, please let us know.

### NYSCHP Unveils New Association Logo

The Board of Directors of the New York State Council of Health-system Pharmacists has selected a new logo and color scheme for the association after a year-long logo design competition among NYSCHP's membership. [Click here](#) for more information

#### Quick Links

- Council News Briefs
- Position Statements
- NYS Board of Pharmacy
- Research & Education Foundation (REF)
- Career Center
- Journal of Pharmacy Practice

#### Upcoming Events

Thu Apr 27, 2017  
[2017 NYSCHP 56th Annual Assembly](#)  
Category: Events

For more information please email at [Office@NYSCHP.org](mailto:Office@NYSCHP.org)