



## HEADLINE NEWS

### Congratulations Roseman University College of Pharmacy Henderson Campus Class of 2017!

NVSHHP would like to congratulate all of the new graduates from Roseman University's College of Pharmacy Class of 2017! We wish them the best and are confident in their ability to positively impact the lives of their patients.

Donna Selina Cruz Abot  
 Mohammed Adem Aliyu  
 Ashleigh Michelle Andersen  
 Ian James Andrus  
 Ruben U. Apodaca  
 Karlo Nikko Angeles Arceo  
 Leslie Asanga  
 Ahmad Yassir Attalla  
 Maria Avelar  
 Michelle Jasmine Baeza  
 Trichelle Faith Barber  
 Peter Pons Santos Bautista  
 Gisela Amanda Bettendorf  
 Travis Jay Bill  
 Glenys Ivette Castro  
 Samantha Mae Chan  
 Desiree C. Chang  
 Brandon Robert Christensen  
 Chad Glenn Colwell  
 Elizabeth Mary Davie  
 Nicole Ashley De Galicia  
 Kelly Diane Dietzel  
 Daniel Elias Dilanji  
 Leila Emami  
 Donna Sun Eom  
 Mark Anthony Tuason Estigoy  
 Kenneth Parker Agustin Estrada  
 Jenny Nguyen Evans  
 Olia Evdokimova  
 Mahsa Farshchi  
 Chanelle Marie U. Felix  
 Myrien Rae Fernandez  
 Federico Antonio Gargiulo Castro  
 Amy Joy Hale  
 Payam Hedayaty

Christian Michael Heilman  
 Sandy Te Heng  
 Trinh Thi Tuyet Hoang  
 Chiahuei Hu  
 Eileen Hsu  
 Rachel Ann Jackson  
 Pradeep Kae  
 Samantha Helene Kaufman  
 Ryan Kavooosi  
 Nazanin Kazeminy  
 Katherin Lee Keesling  
 Stella Khachatryan  
 Shaghayegh Khatabi  
 Doyun Kim  
 Esther Hi Kim  
 Yu Na Kim  
 Evelyn Sam Kimdy  
 David Kogan  
 Gershon Eliezer Kohanbash  
 Rachel Kohanbash  
 Jared Scott Kohn  
 Olivia Kung  
 Sheyam Vallabhbai Ladwa  
 Anh Thi Minh Le  
 Glen Junghee Lee  
 Heather Han Lee  
 Kenny Li  
 Jerome Liao  
 Sepideh Limodem  
 Angela Chantel Limtong  
 Elmer Adrian Mares Morales  
 Avital Marzini Haziza  
 Brian James Matthew  
 Yulia Matveeva  
 Seung Ki Min

Mousa Mirakhor Kalimi  
 Siavash Mozaffarimehr  
 Michelle Linh Ngo  
 Alyssa Uyen Nguyen  
 Brian Michael Nguyen  
 Chris Huy Nguyen  
 Duy Minh Nguyen  
 Jeanny Nguyen  
 Jimmy Huy Nguyen  
 Joanne Phuong Nguyen  
 Lana Thao Nguyen  
 Lauren Kim Thi Nguyen  
 Lynn Thi-Kim Nguyen  
 Minh Ngoc Nguyen  
 Shaun Edward Nolette  
 Ana Novakovic  
 Daniel Anthony Ohan  
 Katherine Tadina Orta  
 Chol Hwan Pae  
 Bijal Rakesh Patel  
 Dhara Devendrakumar Patel  
 Sweta Devang Patel  
 Katrina Rae Peninoy  
 Jen Cam Giang Do Pham  
 Karen Nhu Pham  
 Vincent Thinh Bao Pham  
 Anum Rizvi  
 Kimberly Marie Rodgers  
 Nathaniel David Rodriguez  
 Mercy Ann Banzon Roman  
 Arnold Sadkus  
 Nai Hinh Saechao  
 Agafe Fronda Saguros  
 Elham Saidi  
 Jennifer Anne Sapon

Katerina Segodnik  
 Sean Conrad Sendino  
 Mina Siassa  
 Shannon Lee Singleton  
 Koalani Nicole Smith  
 Pablo Sosa  
 Vahid Sula  
 Christian Allen Aguas Sy  
 Karen To Thai  
 Achille Edmond Tango Tiam  
 Cynthia To  
 Andrew Lam Tran  
 Christina Chau Tran  
 Laura Thao Tran  
 Thien Minh Tran  
 Alina Tho Truong  
 Ean Sullivan Tucker  
 Archana Poojan Vachhani  
 Rawa Matti Velasquez  
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 Jackline Ngweh Yembu  
 Monica Yeroushalmi  
 Jin Young Yi  
 Sandy Sam Yousif  
 Zoe Jennifer Yuan  
 Calli Andra Zitzer

**"To know even one life has breathed easier because you have lived.  
This is to have succeeded." - Ralph Waldo Emerson**

# Chapter News

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## Editors:

**Della Bahmandar,**  
Pharm.D., MBA, BCPS

**Alec Madriaga**  
Pharm.D. Candidate 2019

## **NVSHP/CSHP Joint Annual Meeting**



Come join your peers and attend Nevada's only state-associated pharmacy meeting. We welcome all pharmacists, student pharmacists, pharmacy technicians, and allied healthcare professionals!

CLICK [HERE](#) FOR MORE INFORMATION.

## Board of Directors

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**Jeanine Hearn, CPhT**  
Pharmacy Technician  
Representative

**Alec Madriaga**  
Student Representative

# Legislative Update



**Adam Porath**  
PharmD, BCPS,  
BCACP

NVSHP Director-at-Large  
Legislation

2017 has been an eventful year for the advancement of pharmacy practice in Nevada. NVSHP was active at the Nevada Legislature and helped foster the successful passage of two significant pieces of pharmacy legislation:

**SB260** – Removed practice site restrictions around collaborative practice agreements and outlined required elements for CPAs

**SB337** – Allows pharmacists to perform point of care lab tests

Most significantly, SB260 allows for the collaborative practice of pharmacy in all practice settings. Undoubtedly this change will expand patient access to pharmacist providers and improve outcomes for the citizens of Nevada.

At the national level the Pharmacy and Medically Underserved Areas Enhancement Act (H.R. 592/S. 109) continues to accumulate cosponsors. Currently the House version of the bill has 206 cosponsors including Mark Amodei (R-NV). Congressman Amodei is the first Nevadan to ever cosponsor provider status legislation. NVSHP members met with Congressman Amodei's office earlier this year and likely influenced his decision to cosponsor. I would encourage NVSHP members to email Congressman Amodei to thank him for his support (<https://amodei.house.gov/email-me/>).

Currently the Senate version of the provider status bill has 43 cosponsors. NVSHP members have met with both Senators Heller and Cortez Masto regarding S.109 and will continue to work to garner their support for this important legislation. I would again encourage NVSHP membership to reach out to each Senator by email encouraging them to cosponsor S.109.

Senator Cortez Masto (<https://www.cortezmasto.senate.gov/contact/connect>)

Senator Heller (<https://www.heller.senate.gov/public/index.cfm/contact-form>)

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## Upcoming Nevada Board of Pharmacy Meetings

**October 18 & 19**

### Las Vegas

Hilton Garden Inn Las Vegas Strip South  
7830 S. Las Vegas Boulevard  
Las Vegas NV 89123  
All meetings begin at 9:00 a.m.

**December 2 & 3**

### Reno

Hyatt Place  
1790 E Plumb Lane  
Reno, NV 89502  
All meetings begin at 9:00 a.m.

# Education

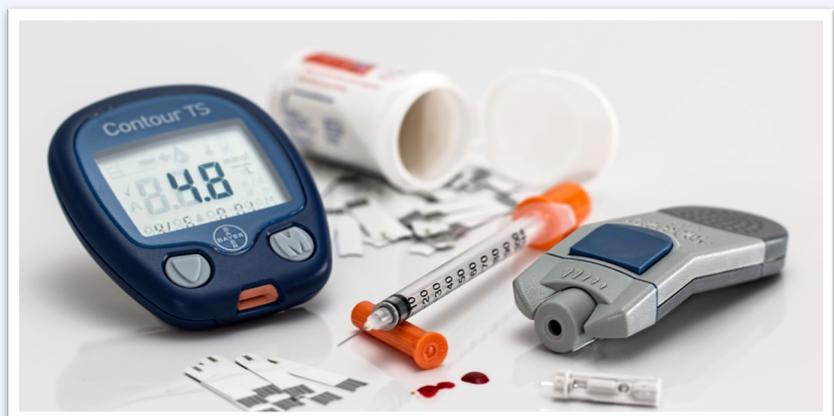


**Alana Whittaker**  
**PharmD, BCPS**

NVSHP Director-at-Large  
Education South

Earlier this year, the FDA approved a new combination diabetes medication, Qtern®. Qtern® is a combination of dapagliflozin, a sodium glucose cotransporter 2 (SGLT-2) inhibitor and saxagliptin, a dipeptidyl peptidase 4 (DPP-4) inhibitor. These agents work differently to lower blood glucose levels. The SGLT-2 inhibitor works at the level of the kidney to decrease renal reabsorption of glucose. The DPP-4 inhibitors work to block the enzyme, DPP-4, increasing the half-life of incretin hormones such as glucagon-like peptide -1 (GLP-1), and glucose-dependent insulinotropic polypeptide (GIP) therefore they cause a glucose dependent insulin secretion, decrease glucagon secretion, slow gastric emptying and promote satiety.

In August, GSK announced that will discontinue the production of albiglutide (Tanzeum®) and they expect that their supply will be depleted by July 2018. It is not recommended that any new patients start this agent at this time. Other GLP-1 agonists on the market include exenatide (Byetta®, Bydureon®), liraglutide (Victoza®), dulaglutide (Trulicity®) and lisixenatide (Adlyxin®). GLP-1 agonists are analogs of human GLP-1 and they cause a glucose dependent insulin secretion, decrease glucagon secretion, slow gastric emptying and promote satiety.



# Resident Spotlight



**Nila E. Sturlin**  
**PharmD, RPh**  
Clinical Pharmacist  
Resident  
Veterans Healthcare  
System

## A Day in the Life The Beginning of Residency

Congratulations! After the physical, psychological, and sometimes financial drain of the residency application cycle, you matched with the program of your dreams. You feel amazing, on top of the world. Friends and family inundate your social media page with Likes, Loves, Wows, and the occasional heartfelt testimonial. The exhilaration of the moment will sustain your enthusiasm until the day that you walk across the stage and become a Doctor of Pharmacy.

Within the week after graduation, the celebration fades and the reality of your onboarding checklist and NAPLEX study sends your limbic system into overdrive. Dormant fears and worry become apparent.

Onboarding requirements vary by program. One program may require that residents email a document or two. Others require a thorough background check with fingerprinting, numerous documents, countless hours of online training, and even a physical examination conducted by a medical professional. My residency required the latter.

By this time, your Residency Program Director (RPD) will have communicated a date by which you must be a licensed pharmacist, no exceptions. Passing the

pharmacy board exams becomes a major priority to keep the residency that you worked so hard to achieve. The sooner licensed, the better. You scramble to complete program specific prerequisites, find a place to live, plan and execute the move, while you study for the most important, “make or break” exam of your pharmacy career *but no pressure*.

I am from Illinois originally. I graduated from the University of Illinois Chicago College of Pharmacy. After traveling to more than ten residency interviews from coast to coast, I matched with a top residency program at Southern Nevada Veterans Health System. The caveat is that interview travel was expensive. Therefore, the move to Nevada would occur on a somewhat limited budget. In addition, the lack of available test dates meant I would move to Nevada before taking the board exams.

My mother and daughter demonstrated love and support by agreeing to leave the comfortable and the familiar. They would come to Nevada with me during the residency year. My husband and son left behind, geographically separated for one year. The cross country move was happening. It was happening on a limited budget and on blind faith that I would be successful. The responsibility weighed on

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# Resident Spotlight

*(Continued from page 5)*

me heavily as I studied for NAPLEX and Nevada MPJE. Anxiety made study unintelligible at times, but one thing was clear. Failure was not an option.

I passed both the NAPLEX and Nevada MPJE on the first attempt. I have been a fully licensed pharmacist since July. I received my license to practice pharmacy in the third week of residency orientation.

I just completed an intense three-week orientation where copious amounts of information have already been communicated. My thought is that with longitudinal activities, chief resident duties, projects, presentations, and a possible teaching certificate program that this will undoubtedly be the most grueling, yet rewarding and amazing year of my pharmacy career.

My residency program is composed of an exceptional team. My two co-residents are phenomenal. I am fortunate to be going through this process with caring, family-oriented colleagues with many shared values. We get along effortlessly. The RPD and residency program preceptors are all highly-skilled clinicians. They promote continuous improvement of the residency program and are

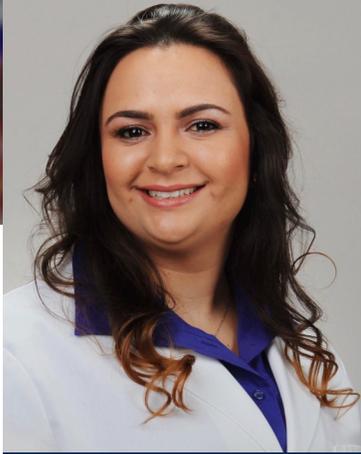
open to honest feedback. Our assigned mentors offer additional professional and personal support. Although the expectations are high, everyone wants to see the pharmacy residents succeed. PGY-1 residencies are designed to catapult residents' skills to the next level of clinical competency. I am certain that there will be times when I feel overwhelmed and discouraged.

In times of distress, I will remind myself of the reason that I applied to the residency program in the first place. The back of my new business card reads, "To fulfill President Lincoln's promise, to care for him who shall have borne the battle, and for his widow, and his orphan by serving and honoring the men and women who are America's Veterans" (VA Mission Statement).

I am here for the veterans. My goal is to become a Clinical Pharmacist at the Department of Veterans Affairs (VA). I chose to be a part of the VA PGY-1 residency program to develop clinical and non-clinical skills which will allow me to better serve the veterans and to provide optimal patient care. My advice to fellow PGY-1 residents is to establish a supportive network of friends, family, or colleagues. Stay true to yourself and remember your underlying motivation.



# New Drug Update



**Amanda Villa**

Pharm.D. Candidate 2018  
Roseman University  
College of Pharmacy

## **Xadago**<sup>®</sup> safinamide

Xadago, generic name safinamide, was approved by the FDA on March 21, 2017. It is a new drug from Newton Pharmaceuticals for the indication of adjunctive treatment to levodopa/carbidopa in patients with Parkinson's disease that are experiencing "off" episodes.

Parkinson's disease (PD) is a common neurodegenerative disorder with an estimated prevalence of 100 to 200/100,000 population<sup>3</sup>. Parkinson's disease is a progressive disorder, which leads to both disability (after about 10 – 15 years after onset of disease), and substantial financial burden for those diagnosed with the disease.

When utilizing traditional treatment with levodopa/carbidopa for Parkinson's disease, patients may experience "off" periods, where characteristics of Parkinsonism motor problems may re-emerge, such as resting tremor, cogwheel rigidity, and bradykinesia. Levodopa is the metabolic precursor of dopamine, and striatal dopamine is what lacks in Parkinson's disease, causing patients to experience symptoms of the disease. Levodopa crosses the blood-brain-barrier (BBB), to be converted to dopamine, while carbidopa inhibits the breakdown of levodopa to dopamine in the periphery (thus increasing available levodopa to cross the BBB)<sup>1</sup>. Levodopa/carbidopa is typically used as treatment after diagnosis for

those patients experiencing symptoms of impairment such as tremor, bradykinesia, rigidity, and postural instability/gait impairment<sup>5</sup>.

Xadago is in the drug class known as the "MAO-B inhibitors", which also include drugs like Azilect (rasagiline) and Eldepryl/Emsam/Zelapar (selegiline). Monoamine oxidase B (MAO-B) is an enzyme found in most cell types of the body, which degrades dopamine. Safinamide is a selective, reversible inhibitor of MAO-B, whereas rasagiline and selegiline are both irreversible inhibitors of MAO-B. After diagnosis of Parkinson's disease, if the patient does not display symptoms of impairment, rasagiline is considered for treatment<sup>2</sup>. This raises the question of where Xadago will fit into treatment in the future.

*"a new drug... for the indication of adjunctive treatment to levodopa/carbidopa in patients with Parkinson's disease that are experiencing "off" episodes."*

When used as adjunctive treatment with levodopa/carbidopa for those pa-

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# New Drug Update

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tients experiencing “off” periods, safinamide modestly increased daily mean “on” time without troublesome dyskinesia (in clinical trials)<sup>2</sup>. According to those trials, safinamide may also improve clinical status, motor function, and health-related quality of life<sup>2</sup>.

Xadago comes as the branded product, in tablet formulations of 50 mg and 100 mg. The price for 30 tablets in either strength is currently \$803.33. For the indication of Parkinson’s disease (adjunctive treatment to levodopa/carbidopa), safinamide is dosed as 50 mg once daily, and after 2 weeks of therapy, providers can increase the dose to 100 mg once daily. Safinamide does not require any dose adjustment in renal impairment, although in moderate hepatic impairment (Child-Pugh class B) the maximum dose is 50 mg once daily. In severe hepatic impairment (Child-Pugh class C), its use is contraindicated by the manufacturer. Contraindications for safinamide include concomitant use of other monoamine oxidase inhibitors (MAOIs) or other drugs that are potent inhibitors of MAO, opioids, serotonin-norepinephrine reuptake inhibitors (SNRIs), tricyclic, tetracyclic, or triazolopyridine antidepressants, cyclobenzaprine, methylphenidate, amphetamine, St John’s wort, or dextromethorphan. Patients should avoid tyramine-containing foods such as cheese and red wine while taking this medication, as it may increase the patient’s risk for hypertensive crisis. Xadago has numerous potential drug interactions, so it is important to evaluate patients’ current medication regimen for potential interactions. The most common adverse effects patients may experience when using Xadago are dyskinesia, hypertension, falling, insomnia, and nausea<sup>4</sup>.

## References:

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# Student Symposium



**John Obena**

Pharm.D. Candidate 2019  
Roseman University  
College of Pharmacy  
—  
Student Alliance President

On the first day of the event, students met with directors of different hospitals around the Las Vegas area, including the VA, UMC, MountainView, Sunrise, and Desert Springs Hospital. Through direct interaction, students asked questions pertaining to what directors were looking for in candidates as well as how to better prepare for residency. This proved to be an invaluable source of knowledge, as many personal questions about residency were answered by each director. Throughout the day, students were also introduced to different presentations pertaining to Industry pharmacy, professionalism, and leadership which not only helped develop my personal skills but also learn about other opportunities to grow myself as a residency candidate. At the end of the day, the Quiz Bowl Competition was a great conclusion to the day due to the amount of people participating and friendly competition.

The second day only got better as students learned specific details about residency and interacted with residents from different hospitals. After interacting with multiple residents, I learned more about each residency and gathered the pros and cons of each residency, as the residents remained truthful about stress and time management. Another event I found valuable was the speed interviewing where different interview questions were asked to each student, and after each response feedback was given. Residents and pharmacists were the ones asking the questions and giving feedback, so any feedback given was something to take to heart. Through this experience, I not only learned my strengths and weaknesses but also learned different responses that I could use at any interview.

Overall, the Student Symposium was a great event that helped me learn more about residency, how to become a better residency candidate, and different residencies around the Las Vegas and Arizona area. After the conclusion of this event, I feel more prepared to go into a PGY1 and pursue a career in institutional pharmacy. The Student Symposium though is not only an event for people interested in residency, but is an event that pertains to all students looking for a career in pharmacy. I highly recommend any student who wants to learn more about post graduate education as well as those students who may not know what they want to pursue after graduation to attend the next Student Symposium, as the event is fun and informative!



# Student Symposium



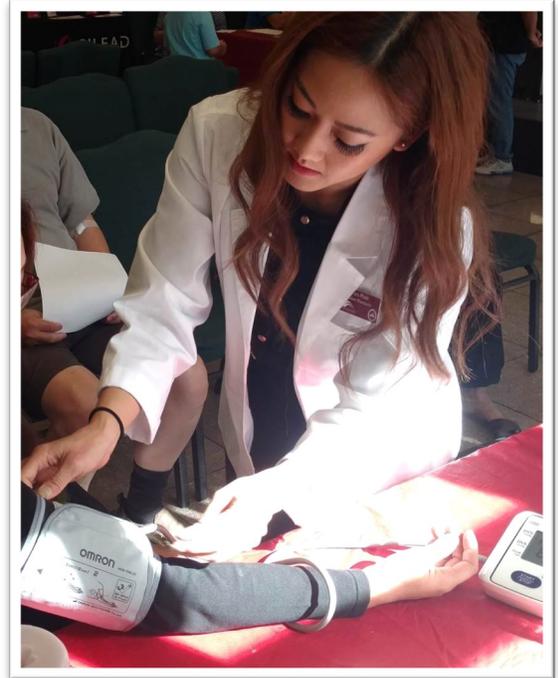
# Student Chapter News



**Clara Pham**

Pharm.D. Candidate 2019  
Roseman University  
College of Pharmacy

Reflecting on my experiences as a new student pharmacist, I remember one of the most impactful events for me was working a community health fair for the first time. I had participated in the training sessions at school, but had never conducted screenings or counseling sessions with patients previously, so I was nervous. When I showed up for my shift in the Chinatown Plaza, I encountered dozens upon dozens of patients who were excitedly waiting for their screenings. The other students and I took turns at the different stations and traded duties throughout our shift. As I took blood pressure readings and performed glucose and cholesterol tests, I felt that the patients were comfortable and trusted me. They listened when I made suggestions for lifestyle improvements, and I happily answered questions when they asked for more information. I was surprised to find that I felt real connections in the short



*“I realized the importance of taking what I had previously learned ... and being able to make the information relatable for patients”*

interactions that I had with each patient, and that perhaps I had actually made an impact in someone’s life. I realized the importance of taking what I had previously learned about disease states and being able to make the information relatable

for patients. I found it motivating each time a patient left the station with a smile, even when their numbers were off-target because they knew the changes they had to make for improvement. The other students and I had a great time working together while interacting and having quite a few laughs with the people in the community. As a second-year student pharmacist now, I look forward to being a project manager for the same health fair this upcoming fall! I am thankful for the opportunities the organization provides me so that I can do my part in serving the community. I am proud to be a student pharmacist and of the pharmacy profession!

# Student Chapter News



**Brent Czerniak**

Pharm.D. Candidate 2019  
Roseman University  
College of Pharmacy

Every Fall, Roseman University pharmacy students head to their new IPPE rotation sites. One of the requirements to be able to participate is obtaining an influenza vaccine. This presents an opportunity for our Student Alliance chapter to get involved and directly impact our student body. As the Operation Immunization Chair for our chapter, I was able to coordinate with Albertsons Pharmacy to provide influenza vaccines to students in both the College of Nursing and the College of Pharmacy on the Roseman University campus. This allows students to be able to obtain their flu shot while on campus and during their lunch hour without taking time away from studying.

This event also allowed for P2 pharmacy interns to practice their immunization skills in a real world setting. Over the course of one hour, 10 P2 pharmacy students were able to successfully immunize over 150 students and faculty. The experience gained during this event will help pharmacy interns provide properly executed and safe immunizations to the general public this fall at IPPE sites and immunization clinics in the greater Las Vegas area.

Operation Immunization will work closely with many major pharmacy companies in the Las Vegas area including Albertsons/Vons, Smiths, and CVS Health to manage immunization clinics this fall. Currently, there are over 50 clinics planned for this fall with many more to come. These will give more pharmacy students the opportunity to positively impact the communities we live in and promote the importance of vaccinations.



# Novel Drug Approvals

Brand Name	Generic Name	Approval Date	Indication
	benznidazole	8/29/2017	To treat children ages 2 to 12 years old with Chagas disease
Vabomere	meropenem and vaborbactam	8/29/2017	To treat adults with complicated urinary tract infections
Besponsa	inotuzumab ozogamacin	8/17/2017	To treat adults with relapsed or refractory acute lymphoblastic leukemia
Mavyret	glecaprevir and pibrentasvir	8/3/2017	To treat adults with chronic hepatitis C virus
Idhifa	enasidenib	8/1/2017	To treat relapsed or refractory acute myeloid leukemia
Vosevi	sofosbuvir, velpatasvir, and voxilaprevir	7/18/2017	To treat adults with chronic hepatitis C virus
Nerlynx	neratinib maleate	7/17/2017	To reduce the risk of breast cancer returning
Tremfya	guselkumab	7/13/2017	For the treatment of adult patients with moderate-to-severe plaque psoriasis
Bevyxxa	betrixaban	6/23/2017	For the prophylaxis of venous thromboembolism (VTE) in adult patients hospitalized for an acute medical illness
Baxdela	delafloxacin	6/19/2017	To treat patients with acute bacterial skin infections
Kevzara	sarilumab	5/22/2017	To treat adult rheumatoid arthritis
Radicava	edaravone	5/5/2017	To treat patients with amyotrophic lateral sclerosis (ALS)
Imfinzi	durvalumab	5/1/2017	To treat patients with locally advanced or metastatic urothelial carcinoma
Tymlos	abaloparatide	4/28/2017	To treat osteoporosis in postmenopausal women at high risk of fracture or those who have failed other therapies
Rydapt	midostaurin	4/28/2017	To treat acute myeloid leukemia
Alunbrig	brigatinib	4/28/2017	To treat patients with anaplastic lymphoma kinase (ALK)-positive metastatic non-small cell lung cancer (NSCLC) who have progressed on or are intolerant to crizotinib

# Novel Drug Approvals

Brand Name	Generic Name	Approval Date	Indication
Brineura	cerliponase alfa	4/27/2017	To treat a specific form of Batten disease
Ingrezza	valbenazine	4/11/2017	To treat adults with tardive dyskinesia
Austedo	deutetrabenazine	4/3/2017	For the treatment of chorea associated with Huntington's disease
Ocrevus	ocrelizumab	3/28/2017	To treat patients with relapsing and primary progressive forms of multiple sclerosis
Dupixent	dupilumab	3/28/2017	To treat adults with moderate-to-severe eczema (atopic dermatitis)
Zejula	niraparib	3/27/2017	For the maintenance treatment for recurrent epithelial ovarian, fallopian tube or primary peritoneal cancers
Symproic	naldemedine	3/23/2017	For the treatment of opioid-induced constipation
Bavencio	avelumab	3/23/2017	To treat metastatic Merkel cell carcinoma
Xadago	safinamide	3/21/2017	To treat Parkinson's disease
Kisqali	Ribociclib	3/13/2017	To treat postmenopausal women with a type of advanced breast cancer
Xermelo	telotristat ethyl	2/28/2017	To treat carcinoid syndrome diarrhea
Siliq	brodalumab	2/15/2017	To treat adults with moderate-to-severe plaque psoriasis
Emflaza	deflazacort	2/9/2017	To treat patients age 5 years and older with Duchenne muscular dystrophy (DMD)
Parsabiv	etelcalcetide	2/8/2017	To treat secondary hyperparathyroidism in adult patients with chronic kidney disease undergoing dialysis
Trulance	plecanatide	1/19/2017	To treat Chronic Idiopathic Constipation (CIC) in adult patients



## **Become involved with NVSHP!**

NVSHP is seeking members who would like to actively participate in changing the profession of pharmacy. We would love to have you serve on one of our standing committees: Education, Membership, or Legislation. If you are interested in becoming more involved, please email us at: [nvshp@nvshp.org](mailto:nvshp@nvshp.org).