

December 2013

In this issue:

NVSHP Election Results	2
NVSHP Annual Meeting	2-4
2013 Harvey A.K. Whitney Lecture Award Winner	5
Immunization Update	6-7
HIV Update and Review	7
Student Corner	8-9

Message From The President

On behalf of the NVSHHP board of directors I would like to take some time to reflect on this our 6th year of serving as the only state level pharmacy society in the state of Nevada. Our education committee has built on the experience of the past five years and I truly believe we experienced our most successful annual meeting to date! The entire program focused on uniting pharmacy in Nevada to ensure brighter tomorrow. On that note this was the first year the annual meeting boasted an education track fully dedicated to our technician members. Now that networking and the exhibitor hall have become staples at our annual meeting, we pushed the envelope by offering some professional development sessions to show support for the growth of new practitioners or seasoned practitioners looking to grow. I personally want to thank the education committee for all there hard work in delivering another successful event.

I would like to thank our legislative committee for their hard work in keeping us abreast of the changing healthcare regulations in our state and for drafting our position statement on the importance of technician certification to advance the profession.

Although we had a lot of new faces on the NVSHHP board this year, I would like to thank each executive member for there commitment to the organization. There focus and energy manifested in a robust yet achievable strategic plan for 2013. As a result NVSHHP has set the stage to better serve our members in the future. Development of a detailed policy and procedure manual and modernization of our website are just two notable examples of our accomplishments this year.

Lastly, I would like to personally thank each of our members for a great year. Without your support none of this would be possible! If you are interested in serving this great society that you have built please contact any member of our board or committees to learn more about our organization and how you can be involved. This is an extremely exciting time for pharmacy in Nevada! It is my hope that this meeting experience will spark further interest in NVSHHP and motivate you to become involved and give back to your profession.



Gary Brooks, Pharm.D., BCPS, BCNSP

New NVSHHP Website

This year, NVSHHP rolled out a new and improved website that is able to provide a more hands on approach to your NVSHHP membership. Our web address remains the same, www.nvshp.org, but there are many new functions. Our new site allows for members to become more interactive with each other, find resources available to them quickly, view your transactions and update your profile.

With our new website, we are hoping to expand the resources we have available to you. There are links to our By-Laws as well as our Policy and Procedure manuals to help guide our members to holding positions on our Board. Our Position Statements tab is where you can find the stand NVSHHP has taken regarding current pharmacy issues. A link to other CE resources can help you meet your license CE requirements. Our Career Center can help you find a new job or find potential employers. One of our own Board Members found his new job from our Career Center!

Points of Interest:

[Click here to become a fan of NVSHHP on Facebook!](#)

Stay up to date on NVSHHP news and events. Email changes to contact information to: nvshp@nvshp.org

NVSHHP Officers

Immediate Past President

Sandy Sierawski, R.Ph., MBA

President

Gary Brooks, Pharm.D.

(president@nvshp.org)

President-Elect

Robin Hager, Pharm.D.

Secretary

Roseann Visconti, Pharm.D.

(secretary@nvshp.org)

Treasurer

Ragini Bhakta, Pharm.D.

(treasurer@nvshp.org)

Directors-at-Large

Charles Quagliari, Pharm.D.

Diane Rhee, Pharm.D.

Awards and Nominations

Committee Chair

Sandy Sierawski, R.Ph., MBA

Technician Representative

Adrienne Santiago

Student Representatives

Sydney Smith

Winnie Wong

Welcome to our new NVSHHP Board Members!

Reed Howe, Pharm D, our new President– Elect, is a native to Nevada. He was born and raised in Reno attending the University of Nevada, Reno with a BS in Health Science. He then attended the University of Southern Nevada College of Pharmacy (now Roseman University) and graduated in 2004. Reed was awarded the St. Rose Scholarship and went right to work for St. Rose. Reed was instrumental in decentralizing the pharmacists at the Siena and Rose De Lima campuses. In 2006, the San Martin campus was opened with Reed as the Pharmacy Director. He continued his learning and leadership by attending the Pharmacy Leadership institute at the University of California, San Francisco in 2006-2007. He is currently working on his MBA at Roseman University of Health Sciences. He remains very active with Roseman Univeristy, sitting on many fund-raising committees and precepting pharmacy students. He has also been involved as a Nevada Health PAC liaison for St. Rose Dominican Hospitals.

Roseann Visconti, Pharm D, was re-elected to serve as our secretary. She currently works for Roseman University of Health Sciences as an Assistant Professor of Pharmacy Practice as well as a Clinical Pharmacy Specialist at the VA Southern Nevada Healthcare System.

Delaram Bahmandar, Pharm D Candidate 2014, Susan Nguyen, Pharm D and Alana Whittaker, Pharm D., BCPS, were elected for our three Director-at-Large positions.

Delaram Bahmandar is expected to complete her dual Doctor of Pharmacy degree and Masters in Business Administration at Roseman University of Health Sciences in June 2014. She has held many leadership positions during her tenure at Roseman University including President of Student Alliance, the student society of ASHP.

Susan Nguyen is currently an Assistant Professor of Pharmacy Practice at Roseman University and precepts pharmacy students at the University Medical Center in Las Vegas. She has recently moved to Nevada from Ohio State after graduating from The Ohio State University and completing a PGY-I residency at Ohio State and Clinical Partners.

Alana Whittaker is an Assistant Professor of Pharmacy Practice at Roseman University with a practice site at Valley Hospital in Las Vegas where she rounds with an Internal Medicine team from the Touro University College of Osteopathic Medicine. She serves as a preceptor for Adult Acute Care rotation. She received her Doctor of Pharmacy from Howard University in Washington, DC and completed her Pharmacy Practice Residency at Sentara Healthcare in Norfolk, Virginia and her Internal Medicine Specialty Residency at Seton Family of Hospitals/University of Texas at Austin in Austin, Texas.

NVSHHP Annual Meeting October 4-5, 2013

The NVSHHP Annual Meeting for 2013 was held at the John Ascuaga's Nugget in Sparks, NV. In attendance were pharmacists, pharmacy technicians, and physicians. NVSHHP welcomed 40 pharmacists for a dynamic meeting which included continuing education topics on common outpatient infections, dysglycemia, toxicology of opiates, hot topics in drug information, and new anticoagulant medications. Those in attendance praised the high quality of the speakers and their education materials. One attendee was quoted as saying "NVSHHP provides it's members with a high quality educational experience at a great value."

NVSHHP also honored several Nevada pharmacists this year for their contribution to the profession and the positive impact they have had in our state. Dr. Jan Carmichael was presented with the 2013 Whitney Award, Dr. Scott Mambourg was presented with the Bowl of Hygeia award, and Dr. Tracie Balvanz was given the Pharmacist of the Year award for 2013. Congratulations to our honorees and thank-you for your hard work and dedication to the profession, each award was well-deserved.

NVSHHP was proud to host a roundtable discussion for student pharmacists during the Annual Meeting. Northern Nevada residents and various pharmacy leaders for the state met with Student Pharmacists regarding post-graduate training, CV tips, and advice on good interviewing skills during the residency process.

NVSHHP would like to thank all those involved in the planning and execution of another successful Annual Meeting and we look forward to Annual Meeting 2014 in Las Vegas, NV.

NVSHP Annual Meeting October 4-5, 2013



Jannet Carmichael presenting her Whitney Award talk



Gary Brooks presented Tracie Balvanz with the Pharmacist of the Year Award



Beth Foster presenting Scott Mambourg with the Bowl of Hygeia Award

NVSHP Annual Meeting October 4-5, 2013



2013 Whitney Award Winner: Jannet Carmichael

Highest honor in health-system pharmacy recognizes Carmichael's outstanding contributions

Written by: Scott Mambourg, Pharm.D.



Jannet M. Carmichael, Pharm.D., BCPS, FCCP, FAPhA, a noted health-system pharmacy leader, is the recipient of the American Society of Health-System Pharmacy's (ASHP's) 2013 Harvey A.K. Whitney Lecture Award. Dr. Carmichael received the award on June 4th during ASHP's Summer Meeting in Minneapolis.

Dr. Carmichael is the Veterans Integrated Service Network (VISN) Pharmacy Executive for VISN 21, where she coordinates safe and cost effective use of medications through pharmacy service, formulary management and health analytics in a network of VA Health Care Systems in Northern California, Northern Nevada, and Hawaii. VISN 21 pharmacy services are provided in 48 geographic sites of care (8 VA Medical Center Divisions and 40 outpatient centers), cares for 400,000 veterans, dispenses \$250 million of medications and employs 350 pharmacists and 200 pharmacy technicians.

During her 30 year career with the VA Healthcare System, Dr. Carmichael has made significant contributions to the system's progressive pharmacy practice model, including the use of quality metrics to improve patient care and patient safety while lowering healthcare costs. She oversaw the development of pharmacist-run primary care and inpatient clinics at the VA Sierra Nevada Healthcare System, a program that received ASHP's Best Practices in Health-System Pharmacy Award in 2002. She provided direct patient care in this environment for 20 years and continues to be credentialed and privileged as a VA Clinical Pharmacy Specialist.

In her current role, she leads clinical pharmacy management initiatives that contribute to optimal prescribing practices for a variety of conditions including diabetes, hypertension, hyperlipidemia, metabolic syndrome, anticoagulation, pain management, oncology, infectious disease, osteoporosis and coordinates initiatives to improve patient care and drug safety. She is also responsible for the VISN 21 Clinical Data Warehouse, Health Analytics, Pharmacoeconomics and Pharmacoepidemiology programs. Dr. Carmichael is the Pharmacy Residency Director for the VISN 21 PGY2 Managed Care System residency program, which offers specialized training in pharmacoepidemiology and health care analytics. She has trained over 75 PGY1 and PGY2 residents during her career.

In addition to her leadership roles in the VA, Dr. Carmichael has authored hundreds of professional papers, book chapters and research projects throughout her career. Dr. Carmichael is the co-author of the IMPROVE research project, a multi-center study of the clinical and economic benefits of clinical pharmacist interventions in VA Medical Centers. She is a frequent speaker on progressive pharmacy practice throughout the country.

An active member of national and state pharmacy associations, Dr. Carmichael is a past president of ASHP, past Chairman of the ASHP research and Education Foundation, past member of the Commission on Credentialing and currently serves on PPMI planning and implementation groups. She has served as president of the Nevada Pharmacy Alliance and the Nevada Pharmaceutical Association. She participates as a member of numerous professional boards and committees. Dr. Carmichael was the chair of the BCPS Pharmacotherapy Council and a member of the Board of Directors of the Board of Pharmacy Specialties (BPS), serving as Board Chair from 2007-2009. Dr. Carmichael served on the Nevada Board of Pharmacy and is a member of the Accreditation Council on Pharmacy Education's (ACPE) site evaluation teams for accrediting schools of pharmacy. She served on the National Quality Forum (NQF) Medication Management Steering Committee and was a member of the technical expert panel for the Centers for Medicare and Medicaid Services (CMS) Maintenance and Development of Medication Measures initiative.

Dr. Carmichael received a bachelor of science in pharmacy from the University of Iowa and a Doctor of Pharmacy from the University of the Pacific. She is past "Pharmacist of the Year" recipient from the Nevada Society of Health-System Pharmacists, has received the Bowl of Hygeia Award, the University of Iowa Distinguished Alumni Award, the APhA Distinguished Federal Pharmacist Award and the Robert G. Leonard Memorial Award. She is a Board Certified Specialist (BCPS), a Fellow of the American Pharmacists Association (APhA) and a Fellow of the American College of Clinical Pharmacy (ACCP).

ASHP has administered the Harvey A.K. Whitney Lecture Award, established in 1950 by the Southeastern Michigan Society of Hospital Pharmacists, since 1963. Harvey A.K. Whitney, ASHP's first president, was an editor, author, educator, practitioner, and leader in hospital pharmacy. Nominations for the award are made by past recipients and ASHP members. The winner is selected by a majority vote of past honorees.

Immunization Update—What's New for the 2013-2014 Influenza Season

Written by: Christina M. Madison, Pharm.D., BCACP, Rhea Conlu and Kseniya Kozlova, Pharm.D.
Candidates, Class of 2014, Roseman University of Health Sciences



Receiving an annual Influenza vaccination is an essential component to our communities' overall health and wellness. As one of the most trusted healthcare providers, pharmacists play a key role in making sure our communities are appropriately immunized. Universal vaccination for all individuals age 6 months and above remains the standard of care recommended by the Centers for Disease Control and Prevention (CDC). The CDC recommends immunizing as soon as the vaccine is available to prevent illness.

Determining which vaccine product to use should be based on age, indication, and vaccine availability (see chart below). The new Flucelvax[®] (cell culture inactivated influenza vaccine, trivalent) and Flublok[®] (recombinant hemagglutinin influenza vaccine) vaccines, which are egg-free formulations, are now available for those who suffer from severe egg allergies and could not be vaccinated in past seasons. Unless an individual has a severe egg

allergy, a quadrivalent vaccine should be administered. Latex-free alternatives are also available for patients with severe latex contact allergies. Afluria[®], Fluzone[®], Fluzone[®] High-Dose, Fluzone[®] Intradermal, FluLaval[®], Flumist[®], and Flublok[®] do not contain natural latex in the stoppers and are safe to use on severely latex allergic patients. Individuals between the ages of 2 and 49 years of age without any chronic medical conditions or contraindications (e.g. pregnant or immunocompromised) should receive Flumist[®], which has shown better prolonged protection over time than the inactivated vaccine. Flumist[®] is typically available before the inactivated formulation, which allows for prompt intervention and provides herd immunity. The Advisory Committee on Immunization Practices (ACIP) recommends that children between 6 months and 8 years of age receive 2 initial doses of the influenza vaccine if not previously vaccinated, administered 4 weeks apart, followed by a single dose every flu season thereafter.

There are a few important changes to this year's seasonal influenza vaccination that all pharmacists need to know. The influenza vaccine is manufactured to protect against the 3 main strains of the virus that research has indicated will be the most likely to cause illness. Due to an increase in influenza B virus strain circulation, a fourth antigen has been added to a majority of vaccine presentations for this year to form a quadrivalent vaccine (A/California/7/2009 (H1N1), A(H3N2) like virus A/Victoria/361/2011, B/Massachusetts/2/2012-like virus + B/Brisbane/60/2008-like virus). In addition to the product change, there is also a change in the terms used to describe the vaccine which is outlined below.

Nomenclature Changes for the 2013-2014 Influenza Season:

IIV refers to the inactivated influenza vaccine, both egg-based and cell culture-based
Trivalent and quadrivalent vaccines are distinguished numerically (e.g. IIV3 or IIV4, respectively)
Cell culture-based vaccines, which are egg-free alternatives, are denoted by cc (e.g. ccIIV3)

IIV replaces the TIV abbreviation used in previous years

RIV refers to the recombinant hemagglutinin influenza vaccine (another **egg-free alternative**)

This is available as a trivalent formulation for the 2013-2014 influenza season

LAIV4 refers to the **live, attenuated influenza vaccine**, available as a quadrivalent formulation (as denoted by the trailing number)

For the most up to date vaccine information and continuing pharmacy education offering please visit:

Nevada State WebIZ: www.webiz.nv.gov

Immunize Nevada: <http://www.immunizenevada.org/>

Southern Nevada Immunization and Health Coalition (SNIHC): <http://snihc.org/>

The CDC recently launched a new website that aids patients in finding local immunization providers. Providers should re-register with the CDC as immunization administrators to optimize patient awareness. The CDC replaced www.flufinder.org with <http://flushot.healthmap.org>.

Every patient encounter is a potential missed opportunity to vaccinate. Annual flu vaccination is a perfect time to verify if a patient needs other recommended vaccines.

Continued on page 5

Influenza Vaccine Products for the 2013–2014 Influenza Season			
Trade Name (vaccine abbreviation)	Manufacturer	How Supplied	Age Group
Afluria® (IIV3)	CSL Biotherapeutics	Single and multi-dose	≥ 9 years
Fluarix® (IIV3)	GSK	Single-dose	≥ 3 years
Fluarix® (IIV4)			
FluLaval® (IIV3)	ID Biomedical Corp (GSK)	Multi-dose	≥ 18 years
FluMist® (LAIV4)	MedImmune	Nasal spray	2 – 49 years
Fluvirin® (IIV3)	Novartis	Single and multi-dose	≥ 4 years
Flucelvax® (ccIIV3)* EGG FREE		Single-dose	≥ 18 years
Flublok® (RIV3)* EGG FREE	Protein Sciences Corp.	Single-dose	18 – 49 years
Fluzone® (IIV3)	Sanofi Pasteur	Single and multi-dose	6 – 35 months
		Single and multi-dose	≥ 3 years
Fluzone® (IIV4)		Single-dose	6 – 35 months
		Single-dose	≥ 3 years
Fluzone® High-Dose (IIV3)		Single-dose	≥ 65 years
Fluzone® Intradermal (IIV3)		Single-dose	18 – 64 years

Adapted from Immunization Action Coalition (IAC) Influenza Vaccine Products for the 2013–2014 Influenza Season Chart

HIV Update and Therapeutic Review—

“What’s the Latest and Greatest in HIV Treatment”

Written by: Ashley Trendler, Pharm.D Candidate and Christina M. Madison, Pharm.D., BCACP

The treatment of Human Immunodeficiency virus-1 (HIV-1) has drastically evolved in the past twenty years. Limited drug therapies with handfuls of pills taken multiple times a day have been left behind. Current guideline recommendations include multiple agents that can be given as a one pill once a day option, these are Atripla®, Complera®, and Stribild®. Having an HIV positive status is no longer a death sentence. The current recommendations by the Department of Health and Human Services (DHHS) for the treatment of adolescents and adults with HIV-1 include 4 regimens comprising of no less than 3 medications from the Nucleotide, Nucleoside, Non-Nucleoside Reverse Transcriptase, Integrase, and Protease Inhibitor Classes.

This past summer clinicians welcomed a new medication to battle HIV. Dolutegravir, trade name Tivicay® manufactured by GlaxoSmithKline (GSK), is in the integrase inhibitor class of therapy which adds to the two other agents, Stribild® (a combination product including other antiretroviral classes) and Isentress®. This new agent interferes with one of the enzymes necessary for HIV to multiply. Dolutegravir adds to the currently commercially available products and has an added benefit of once daily dosing. Current recommendation advocate for treatment as prevention of which earlier initiation of highly active anti-retroviral treatment (HAART) leads to better overall patient outcomes. The two most significant goals of therapy are to decrease the viral load to undetectable levels and increase of CD4 T-cell count above 200 cells/mm³ facilitating a decrease in morbidity and mortality.

This medication adds to the other HIV therapies that can be taken once daily which decreases the pill burden for our HIV infected patients. This medication alone is not a complete HAART regimen however; dolutegravir could be paired with Truvada® (emtricitabine/tenofovir) to fulfill current DHHS guidelines. One thing to look for in the future that makes dolutegravir further alluring is the possibility of combining it with Epzicom (Abacavir/Lamivudine) to make a tri-medication pill, this combination has completed bioequivalence testing and trials will follow. The Food and Drug Administration (FDA) has approved dolutegravir for treatment naïve patients and treatment experienced patients including those who have tried other integrase inhibitors in the class. An additional advantage is FDA approval was given in the pediatric patient population in children ages 12 years and older weighing ≥40kg but who have not been exposed to an integrase inhibitor regimen. During the course of the efficacy and safety phase 3 trials for treatment naïve patients, SPRING and SINGLE published in The Lancet, the adverse drug reactions in descending order of prevalence all being ≤3% were insomnia, headache, abdominal discomfort, fatigue and pruritus. During the SINGLE trial the dolutegravir regimen was superior to efavirenz regimen at 48 weeks in addition to the SPRING-2 trial being non-inferior to raltegravir. Patients with underlying hepatitis B or hepatitis C may be at increased risk for worsening or development of transaminase elevations with dolutegravir. Most other HIV medications currently on the market have a greater side effect profile and can be more difficult to tolerate leading to non-compliance. This makes Dolutegravir (Tivicay®) a viable option to both treatment naïve and treatment experienced patients.

NVSHP Student Corner

Student Perspective on ASHP Summer Meeting 2013

Written by: Keith Wellman, Pharm.D. Candidate, Class of 2015, Roseman University

Over the summer I was given the privilege to represent Roseman University's ASHP-SSP chapter at the 2013 ASHP Summer Meeting in Minneapolis, Minnesota. Before I dive into the crux of the meeting, I want to take a moment to discuss the impact of attending such a meeting can have on a future pharmacist's career. This meeting is a wonderful occasion for students from all over the country to develop professionally through networking, personal development, leadership and understanding the demand for leaders our profession requires. This is also an ideal time for students to ask any question they might have about residency, the future of pharmacy, and how to prepare for a career as a pharmacist. There are so many opportunities to meet experienced pharmacists. Once you introduce yourself as a student, they are most delighted to share whatever information they can about the profession and their experiences that brought them to where they are today.

Getting back to the meeting itself, the primary focus of the ASHP Summer Meeting is to provide continuing education courses and to discuss current issues facing our profession. ASHP's House of Delegates convened to vote on prospective policies ranging from rescheduling of hydrocodone to the role of residents and students in new practice models. Drug shortages and the pending compounding legislation (S.959) were discussed in detail and a town hall meeting was also conducted for members to share their experience and achievements with pursuing provider status. As the members spoke on behalf of their state's achievements in obtaining prescribing rights, I couldn't help but to feel excited about the potential our future holds. I also realized the task of advancing our profession will someday rest on our shoulders. I left the meeting with a sense of optimism, yet questioned how I could make an impact on the future of pharmacy.

Since then, the Roseman University's student ASHP chapter has been hard at work preparing for the 2013-2014 academic year. This is just the beginning of the year and we are already making great progress. Under the direction of Mark Decerbo PharmD, Roseanne Visconti PharmD, and Nestle Austero (ASHP-SSP chapter President), we have been working diligently to provide ways to educate our student members about the current issues facing our profession. Roseman's ASHP-SSP chapter officers recently met with a staff member from Senator Harry Reid's office to raise awareness about the impact pharmacists can have in a collaborative practice agreement and what prescribing rights would mean for the health care industry. We also plan to host our first ever "Mock Trial" and Policy Awareness event to be held later in the year. This event will provide a great way for students to experience the policy making process and also raise awareness about issues that affect patients and pharmacists. Earlier I had asked, "What could I do as a student to make an impact on our future as a health care professional?" The tasks are as simple as becoming more involved in your state chapter, attending national and state ASHP meetings and taking advantage of the town hall meetings, the continuing education courses, and the networking events. I believe the biggest impact you can make may just be the simplest; make it a personal goal to tell your friends, your family members, and your patients how much you care about their health and the value a drug expert can add to their overall well-being.

Meeting Senator Reed's Healthcare Representative: Lianne Costillo

Written by: Keith Wellman and Nestle Austero, Pharm.D. Candidates, Class of 2015, Roseman University

As student pharmacists and members of Student Alliance, we are encouraged to voice our opinions and let people of influence know our needs as pharmacists and what we want to see for our profession in the future. Currently, Student Alliance wants to let the community know that the role of a pharmacist can contribute to positive outcomes in patients' overall wellbeing. We're easily accessible, knowledgeable, and trustworthy. We feel that we can play a larger role in healthcare by achieving provider status. The first step in doing this—as student pharmacists—is contacting our state senators. Recently, Roseman University's Student Alliance's Board of Officers arranged a conference and had the opportunity to meet with Nevada's State Senator Reed's healthcare representative, Lianne Costillo. There is a lot going on in Washington DC healthcare-wise right now, but Lianne still made time to meet with us. We were happy, but at the same time disheartened, by the fact that she did not know much about the pharmacists' request to want provider status. This was seen as a chance to educate our politicians and make our voice heard in Washington. There are many other policies that we as Student Alliance wanted presented or adjusted so that APhA, ASHP, AMA and many other healthcare organizations can have a united front to better seek change and results. We hope to see Lianne again at our Mock Trial event where we will practice presenting a policy adjustment and seeing what issues come up and can get resolved.



Pictured: Members of the Student Alliance board discussing with Costillo.

NVSHP Student Corner

ASHP Clinical Skills Competition 2013

In October, student of Roseman University participated in the 2013 ASHP Clinical Skills Competition. A winning team of two pharmacy students , Carly Heyrend and Michael Reeder are advancing to represent Roseman against one team from each College of Pharmacy in the U.S. at the National Clinical Skills Competition Finals this December at the ASHP Annual Midyear Meeting in Orlando, Fl. Carly and Michael received complimentary meeting registration courtesy of ASHP. NVSHP wants to congratulate Carly and Michael on all of their hardwork at both the local and national competitions!

Student Alliance Health Fair Updates

Student Alliance is a joint ASHP/APhA student organization at Roseman University. Student Alliance is the recognized student chapter of ASHP, Members of Student Alliance are also members of NVHSP and some students serve on our Board of Directors or participate on one of our standing committees.

Since August 2013, Student Alliance has participated in 19 health fairs across the Valley including Pahrump, Laughlin and Mesquite. At these health fairs, 569 patient health care screenings and had 906 patients that received health and wellness and/or clinical services.

Student Alliance is always looking for pharmacists who are willing to donate some of their time to help out supervising our students at these health fairs. If you are interested in donating your time, please contact Mark Decerbo, mdecerbo@roseman.edu, Roseann Visconti, rvisconti@roseman.edu for more information.



Student Scholarship Award

Each year NVSHP awards its student members with scholarship awards. Please be on the look out in the new year for an e-mail containing all the information needed to be considered for on the Student Scholarship Awards.

NVSHP wants to wish all of its members Happy Holidays.

We look forward to exciting new things to come in the New Year!



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 and Legislation. If you are interested in becoming more involved, please email us at nvshp@nvshp.org.