



Washington Metropolitan Society of Health System Pharmacists Newsletter

December 2021
Volume 8

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Message from the WMSHP President

I hope you all had a great time with family and friends during the December holidays. Another year has flown by so fast. We are entering another phase of the COVID pandemic with an emergence of more transmittable Omicron variants in spite of expanded vaccinations and availability of booster doses to protect us. This has created renewed fear and stress for everyone, especially for those involved in healthcare settings. Pharmacy practitioners have positioned themselves in the front lines as vaccinators and as the go-to experts not only in vaccines but in a host of new drug products that treat COVID. It would have been unlikely for vaccinations to have proceeded as quickly as they did if it were not for community pharmacists taking on the role of vaccinations. Besides understanding the latest COVID treatments, members of the profession need to understand new treatments in areas like immune-based oncology, genomic testing in oncology, and new treatments for Hepatitis C.

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Member Spotlight

Frank Nice is a long time WMSHP member and supporter of the Society

Q. Frank, can you tell us how you first became interested in pharmacy and what your initial practice was like?

A. My mom had epilepsy and suffered from uncontrolled grand mal seizures. There was no diazepam back then, and twice she went into week-long comas. As a child, when she had violent seizures lasting up to an hour or more, I would literally crawl on top of my mom to keep her from falling off the bed and hurting herself. Many times, she would vomit and urinate, and I would clean her up after her seizure finally ended. Twice, when my mom took me outside, she collapsed on the street with blood flowing from her head after she fell. Finally, my dad took her to the University of Pennsylvania Hospital in Philadelphia to see what could be done for my mother. That was also my first trip to Philadelphia. The doctors prescribed two wonder drugs: diphenylhydantoin (now, phenytoin) and phenobarbital.

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Although, the two drugs kept my mother from future comas and lessened the frequency of her grand mal seizures, it wracked havoc on her body with hirsutism and gingival hyperplasia in addition to sedating her most of time when not having a seizure. Eventually, she had to be institutionalized.

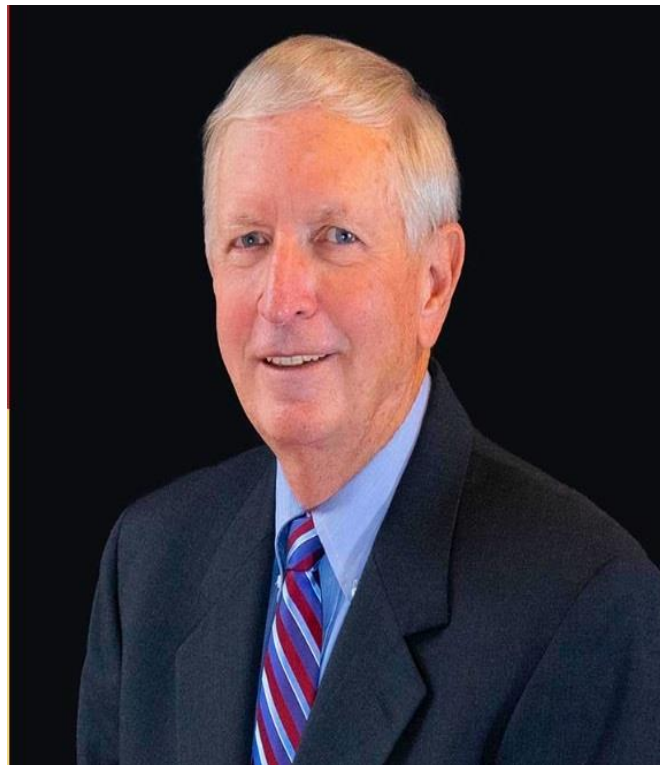
Since my mother was now on medication, being the oldest child, I would take her prescriptions to the community pharmacy to be filled. There was an alley behind the drug store with a back entrance to the pharmacy. On hot days (little or no AC back then!), the pharmacist would prop the back door open for fresh air. Being a very kind man, the pharmacist knew I used the alley as a shortcut to his store, so he let me into the store though the back door, which then led through the pharmacy itself before entering the front of the store (yes; I know, he would lose his license doing that now). As I passed through the pharmacy, my eyes would glaze over in wonder at seeing all the drugs and medications and pharmacy equipment. In addition, this man was making life possible for my mom.

Now, for the end of the story. The above image never left my mind. One day, I was riding in my dad's coal truck (he would take me to work with him in his truck, especially during summer vacation), and my dad asked me what I planned to do when I went to college. I mentioned becoming a chemist, and he asked me if I ever thought about being a pharmacist. I never knew where that came from. It sounded like a great backup plan. Despite being first in my high school class, when I applied to Princeton to pursue chemistry, I was rejected. I had also applied to Temple University School of Pharmacy, and I was accepted. I ended up going back to Philadelphia to attend the first ever nationwide five-year pharmacy program. I also graduated first in my pharmacy class.

Q. You have written several books, some of which are strong references in their subject areas. Please give us an overview of each of your books and where they can be obtained? What is one book you would like to write if you could find the time?

A. I have written a total of six books so far, with two more currently under production at publishing companies. The books are:

Continued on right column of this page



Our member spotlight this issue is Frank Nice.

Books Frank Nice has written from left hand column

Haiti Beyond Belief

My memoirs describe my experiences that occurred on my mission trips to Haiti. Although my mission trips span over 25 years, I describe my experiences in such detail, that it is as if the mission trip occurred yesterday. You will find it bittersweet. All proceeds from the sale of this book are donated to my school and orphanage in Haiti.

Why Did God Seat Me Next To The Toilet?

On this earth, you may lose all that you have: family; friends, wealth, health, possessions, and dignity. The purpose of this book is to show that no matter how bad the evil and sin that confront us, we can rise above this and unbelievably, end up in Haiti.

Nonprescription Drugs for the Breastfeeding Mother (First and Second Editions with Third Edition in process)

This book is a must for all breastfeeding mothers and healthcare providers who work with them. Non-prescription medications are the most commonly used drugs by breastfeeding mothers. The book provides easy guidelines for making safe decisions about Over-the-Counter (OTC) medications, herbals, complementary medicines, and dietary supplements.

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Frank Nice interview from page 2

The Galactagogue Recipe Book

Galactagogues are medications and medicinals and foods that increase and maintain breastmilk supply. Along with my wife, Myung Hee, we pulled together over 200 recipes featuring major and minor galactagogues in this cookbook. We included dosage, uses, and cautions about each of the galactagogues.

Recreational Drugs and Drugs Used To Treat Addicted Mothers: Impact on Pregnancy and Breastfeeding

I and my co-authors, Amy Luo and Cheryl Harrow, have addressed the lack of information for those who deal with pregnant and nursing mothers with substance abuse issues. This book brings the medication expertise of pharmacists together with the expertise of experienced clinicians of other disciplines.

SOS Need Pierogi Desperately! The Coronavirus Snackdown Smackdown Lockdown (in process)

This book is predicated on my pharmacist's viewpoint and take on the current coronavirus pandemic as it explores a whole host of insights on why the world has been turned upside down. So why should everyone read this book, no matter where you are politically or medically? Because the world needs Pierogi and Polish Winged Hussars desperately! (PS: I am Polish)

Cuddled and Carried Karese'm epi Pote'm

I was the co-author of this book along with Dia Michels, Mike Speiser, Honore Jean Loujuin, and Pierre Alix Occide. It is a book in English and Haitian Creole for children about breastfeeding. I have underwritten all costs to have this book distributed to children in Haiti.

All of my books are available on Amazon, at <https://www.drniceproducts.com>, and/or through <https://www.prweb.com/releases>, and/or at <https://www.platypusmedia.com>

Ah, a book I would like to write if I had the time. In a way, I have thought about that, even before I wrote all the above books. I have thought about that because I discovered that there is always one more book I would like to write. It would not be about pharmacy, Haiti, breastfeeding, faith, or politics. It would not be non-fiction as all of my books have been. It would be a book on my two life fascinations: baseball and cats. It would be a book about a baseball player who had the innate abilities of a cat. At this point, just let your imagination run wild!

Q. For many years you served in the government. What were some of the highlights of that experience? Do you recommend this career choice for younger practitioners? How would you advise younger people to prepare for a government career?

A. Yes, I served a total of 43 years with the federal government, including 30 years with the US Public Health Service (USPHS) including several years with the US Coast Guard. I spent many years with the NIH and the FDA. Serving at the NIH was especially rewarding as I spent many years serving as Assistant Director, Clinical Neurosciences Program, National Institute of Neurological Disorders and Stroke. A major component of the Program was the Epilepsy Branch, where I served as Chief Pharmacist. As Project Manager of clinical trials, I was able to participate in the development of new and novel drugs to treat epilepsy, one of the major advances since the use of phenobarbital and phenytoin began. It was bittersweet for me as it was too late to help my mother, but now many others would no longer suffer as she did.

I also served as Chief Operations Officer and Pharmacist with the PHS-1 Disaster Medical Assistance Team (DMAT), which was the prototype for all DMATs. I retired as CAPT/0-6 from the USPHS in 2002.

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Frank Nice interview from page 3

Serving with the USPHS provided opportunities to spend much of my career working with underserved communities in providing public health services; counselling Lactation Consultants, healthcare professionals, and breastfeeding families and communities on medication use during breastfeeding; and to establish a medical mission to Haiti that has now lasted for 25 years. I was also able to publish over 50 peer reviewed journal articles and book chapters on the use of prescription medications, recreational drugs, Over-the-Counter (OTC) products, and herbals during breastfeeding, in addition to articles and book chapters on the use of power, epilepsy, medical missions, and work characteristics of healthcare professionals.

I was able to travel to all 50 states because of varied duties as part of the USPHS. This gave me the opportunity to meet and work with, and most importantly, to mentor hundreds of younger practitioners. I continue to mentor young practitioners to this day, and this has given me a great deal of satisfaction as these pharmacists are the legacy for all that is good with the practice of pharmacy. Having said what I have said, it should be very obvious that I would recommend pharmacy and public health for a government career, as it the best possible of all worlds for pharmacists to give back to society because we are blessed to have the profession we practice.

I would offer the same advice to younger people preparing for a government career as for any other career in pharmacy. I am going to make you work to see what that advice is. Please watch the episode of “Pharmacy Beyond the Call of Duty” at: https://www.youtube.com/watch?v=Nn7CGE1_9jA&t=2s

(Hint: I have donated over \$700,000 of my lifetime pharmacist earnings to the people of Haiti)

Q. For many years you also have engaged in medical missions to Haiti. Please tell us about your past work and when you plan to go again?

A. Yes; I have spent 25 years serving in Haiti since I founded my medical mission. I have organized over 70 missions involving over 1,000 total team members to Haiti, and have been on the ground in Haiti 24 times. I founded and continue to support a school and orphanage with 550 students, including 50 live-in orphans. I currently support approximately 20 Haitian students who are able to go to college in Haiti for the first time ever for any Haitian high school graduates. In summary, these are the services we have been able to provide in Haiti:

- Primary Medical and Dental Care
- Medical, Hospital, and Pharmacy Referrals/Transportation
- Free Clinics
- Club Foot Program
- Medical Supplies
- Water Purification
- Coffee Production
- Education
 - Tuition
 - Uniforms/Clothing/Athletic Equipment
 - Classrooms and Supplies
 - Teachers’ Salaries
 - Feeding Programs
 - Health Programs
- Infrastructure Funding and Construction
- Haitian Pharmacist Support
- Haitian Nurses Support
- Clinic Staff Support
- Pharmacy School Support
- Nursing School Support
- Law School Support

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Frank Nice interview from page 4

Now, for the toughest question asked so far, “When do I plan to go back to Haiti?” As most of you know, Haiti has been the poorest country in the Western Hemisphere for a very long time. Currently, Haiti is undergoing some of its most deplorable and horrible and indescribable conditions ever. The country is a failed nation state that is now run by an illegitimate government and gangs of thugs. My students and orphans live in daily fear. My friends are holed up in their houses surrounded by gangsters. My college students are assaulted and molested as they try to attend classes. Again, most of you know about the missionaries that have been held hostage in Haiti. The only answer I can give to the question as to when I plan to go back to Haiti is, for the first time in my life, “I do not know.” I can no longer depend upon the strategies and plans and safeguards I used in the past to be reasonably safe and secure (totally safe and secure is never possible). I am thankful that I can still send donations to Haiti and get it to those in need without the gangs knowing about it—well, so far I have. Please check out <https://hehonline.org>

Q. After you retired from the government, you entered an entrepreneurial phase which continues to this day. Please give us some insights from the past and present and for the future of these endeavors?

A. After which retirement—USPHS, Civil Service, NIH, FDA? My friends have told me that I am always retiring. Well, after my last real retirement from the government, I have indeed entered an entrepreneurial phase. I am now Owner and President of Nice Breastfeeding LLC and Co-Owner and President of Dr. Nice Products LLC. I continue to provide breastfeeding consultations, presentations, books, and other services through Nice Breastfeeding LLC. During a major part of my “retirement”, I was able to formulate, develop, and manufacture a unique moisturizing gel for the prevention and treatment of raw, sore, cracked, chafed, painful nipples, which is one of the three major reasons why women discontinue breastfeeding. The moisturizing gel has the unique property of turning into a liquid when refrigerated and back to a breathable, non-toxic, new skin-type gel covering at body or room temperature. In liquid form, the cooling gel can fill in the nipple cracks and hold moisture in the cracks to help with the healing process when it solidifies. A very low concentration of peppermint oil aids in the cooling relief of pain process, in addition to being antibacterial and antifungal to help prevent infection. You can check out the gel in the current November/December issue of the WMSHP Newsletter.

This summary covers the past and present endeavors of this project, to which I devoted most of my blood, sweat, tears, and equity to. What does the future hold?

I have been working on this project for approximately ten years now always feeling that the present year would be the year the product breaks out and goes huge. It is somewhat like Haiti where you always hurry up and then wait, and then the obstacles come out of nowhere when you least expect them. I will not even begin to describe those obstacles, but I am sure most small business owners know them well. Our future endeavors at the stage of initial marketing are to compete against the established and powerful lanolin (our main competitor) industry and stay alive. If we successfully overcome, then we have multiple cross-over uses for the gel. Please check out our progress at: <https://www.drniceproducts.com>

Q. You recently filed to run for Legislative District 19 Delegate in Montgomery County in 2022. Please describe the responsibilities of this office? What motivated you to become involved in politics? How do you plan to have a positive impact? How can people support your run for office?

A. The Maryland House of Delegates is the lower house of the Maryland General Assembly, the state legislature of the U.S. State of Maryland. Three delegates are elected from each district, though some districts are divided into sub-districts. Delegates are not term-limited. The General Assembly is Maryland's legislative body and directly represents the electorate. Maryland has 47 districts represented by 47 Senators and 141 Delegates. The powers and functions of the Maryland House of Delegates are outlined in the Maryland Constitution.

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From Frank Nice interview page 5

Along with the State Senate, the House has the power to approve laws, establish executive departments, levy taxes, and propose state constitutional amendments. I would be representing one of the eight legislative districts in Montgomery County, MD, namely Legislative District 19. That may change after the new redistricting plan is finally approved.

Two things motivated me to become involved in politics at this point in my career, one personal and one political. When one serves as a public servant for 43 years and when one goes to Haiti on medical missions, it is hard to now sit back in my retired life and not continue to serve my community and my nation. I was encouraged by an organization that encourages former public servants, and especially former military people, to use all of their experience to continue to serve. That provided the impetus to begin thinking seriously to run for an elected office. Having also been a family and healthcare activist for most of my life, I had come to realize that the family is our nation's, our state's, and Montgomery County's most valuable resource. Yet, families are not being given the dignity and respect by politicians far removed from the lives and experiences of ordinary citizens and families. Many even promote anti-family policies. Political leaders needed to keep families strong by supporting family-friendly policies. That would now be my mission as a public servant. That was the tipping point that motivated me to finally run.

To have a positive impact is to remain a common sense, down-to-earth person when I am elected. Too many politicians, who were once ordinary people like us, once elected, seem to become someone else. As an aside, I am too old to have any need to be powerful or famous or rich just because I get elected. I have been an on-the-ground family and healthcare activist most of my life, and that will not change. As a political leader, instead of telling families what is best for them, I will support them with the family-friendly policies they desire for their families. I have many ideas in mind, but parents and family leaders decide what is best for their families, not me. As a pharmacist, I will also promote family-friendly pharmacy policies. In summary, we will build stronger and healthier communities by voluntarily sharing our values and not allowing our communities to be divided by race or color. We will build on our common values based on faith, community, and family.

People can support me of course by voting for me in the primary election on June 28, 2022 and the General Election on November 8, 2022, or by early voting, if you live in LD 19. My reach, once I am elected, will extend to the whole state of Maryland and will involve pharmacy, of course. Everyone who believes in me and my message can donate at my campaign website, Citizens for Frank Nice at: drfranknicefordelegate.com

If you are unable to vote for me or to donate to my campaign, please let others, especially fellow pharmacists and healthcare providers, know about my candidacy.

Q. Many of our members know you. Please tell us something that many may not know? This might be hobbies, sports, or other non-pharmacy pursuits?

A. I intimated the answer to this question previously on my comments about my books. It is about sports and specifically, about baseball.

I know none of my friends, or anyone that "knows" me, knows that when I graduated from high school, I was 5'5" tall and weighed 95 pounds. Everyone who knows me now, knows that I am 6'2" tall and weigh 180 pounds. How in the world did that ever happen?

I became a baseball fanatic, for whatever reason, at approximately the age of six. Despite my size, I played Little League baseball for three years and high school baseball for three more years.

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Interview with Frank Nice from page 6

Well, in high school, it was more sitting on the bench than actually playing because of my size, aka, lack of size. I also tried one year of wrestling in high school at the lowest weight class but did not like getting “beat up” all the time. Because I was able to stay on the baseball team for all three years of high school, I was awarded a Letter in Baseball (you know, that big fuzzy Letter (“P” in my case for Plymouth High School) plastered on a big sweater bearing the school colors. I was also the number one student throughout high school. At commencement, as my name was announced as the “athlete” with a Letter and with the highest academic average, I gasped along with the rest of the audience, including the three-year All Star 6’8” basketball center with the second highest academic average, who was already getting up to get the award.

I kept growing until 25 years of age when I topped out at 6’2” weighing 150 pounds. Later in life, when I would meet up with all those star athletes who mocked and ridiculed me as an athlete, and when I would once again compete against them in sports, I would dominate them. To this day, at age 76, I play over 100 games of softball a year and hit the ball further, run faster, and field better than most of the guys still in their fifties. Oh, that also includes the 96-year-old guy who still plays, but only as a catcher, who stormed Normandy Beach. I do still have a ways to catch up to him.



Howard University takes the initiative for the groundworks of in-demand cloud careers **By Bryan Mildort**

There has been an ongoing series of expansions from Howard into the in-demand careers of cloud computing, one of the expansions most notably being the [recent partnership with Amazon Web Services](#) for the creation of a master’s program in data science. It is imperative that pharmacy practice remains prominent within science, technology, engineering and mathematics (STEM) career fields amidst our current technology-oriented culture, and the technology Mecca certainly has intentions of empowering students to take the initiative.

The college of pharmacy is currently conducting research ventures focused on the strategic implementation of cloud computing projects into the upcoming data science curriculums within the university. Students have been educated and engaged in the meticulous provisions of data imputation for artificially intelligent frameworks such as healthcare bots. Amid machine and deep learning concepts for pharmacies, students are also developing exciting pipeline projects that will introduce the automatic verification of certain tasks related to medication orders, including the counting of pills and the differentiation of dosage forms.

Dr. Simon Wang, Ph.D., Associate Professor of Medicinal Chemistry, Department of Pharmaceutical Sciences, is fully supportive of the endeavors after receiving a research grant from AAVnerGen Inc., a US biotech company specialized in adeno-associated virus (AAV) gene therapy, for the coordination of AI based deep learning tools.

“The current fields of data science and cloud computing are booming, and we want to take full advantage here at our college. These are exciting times and wonderful opportunities that we are taking part in,” said Dr. Wang. The grant is in the total amount of \$200,000 spanning four (4) years and will be used to help coordinate the efforts.

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Howard is acting as one of latest examples of Historically Black and College Universities (HBCU) engagement with large tech organizations. Partnerships with external organizations will undoubtedly form a significant component of company learning and development strategies as employers seek to improve diversity and equity within their workforces.



WMSHP Recent Live Seminars

By Dr. Dhakrit “Jesse” Rungkitwattanakul PharmD WMSHP President Elect

Shortly after COVID started WMSHP moved to an all-virtual format for our educational seminars. This worked out well and it is likely that no matter what happens in the future many of our events will be virtual.

WMSHP has started to explore live events. All participants must be vaccinated to participate. Masks must be worn except when eating and drinking.

On November 9th, 2021, WMSHP was sponsored by Sanofi Aventis on an educational session on the updates in the treatment of atrial fibrillation (AF). This was held at La Ferme Restaurant in Chevy Chase Maryland. Lana Konigsburg PharmD, Senior Medical Science Liaison shared her

experience in managing patients with atrial fibrillation based on the new findings from the European Heart Rhythm Association (EHRA). Traditionally, patients with new onset AF could opt to receive either “rhythm” or “rate” control therapy (one is cardioversion and treatment with antiarrhythmic drugs to maintain sinus rhythm, and the other is the use of rate-controlling drugs, allowing atrial fibrillation to persist). However, a landmark trial “AFFIRM,” which was published in 2002, concluded that management of AF with the rhythm-control strategy offers no survival advantage over the rate-control strategy, which moreover may have lower risk of adverse drug effects. In addition, the “EAST-AFNET” study, or Early Rhythm-Control Therapy in Patients with Atrial Fibrillation, was recently published in the New England Journal of Medicine in October 2020. Because small trials have suggested that AF ablation may improve left ventricular function and may reduce the risk of adverse outcomes in patients with AF and heart failure and some reports had indicated low rates of stroke and death associated with rhythm-control therapy, including atrial fibrillation ablation, the investigators examined the outcomes of early rhythm control including atrial fibrillation ablation and survival benefit and the study randomized patients to either receive early rhythm control or usual care. Interestingly, the group found that early rhythm-control therapy was associated with a lower risk of adverse cardiovascular outcomes in comparison to usual care among patients with early atrial fibrillation and cardiovascular conditions. The full article can be found on this link:

<https://www.nejm.org/doi/full/10.1056/NEJMoa2019422>. WMSHP sincerely thanks Sanofi Aventis and Lana Konigsburg for their continual support!



Lana Konigsburg, PharmD Sanofi Aventis
Dhakrit "Jesse" Rungkitwattanakul PharmD
WMSHP President Elect



Vaiyapuri Subramaniam, Babak Sabouri, John
Quinn, Lana Konigsburg, Jesse Rungkitwattanakul



Evelyne Edwards and former WMSHP President Mike
Edwards



Dinner at La Ferme in Chevy Chase

One December 14, 2021, Dr. Ferdaus Hassan, PhD, Medical Science Liaison at Sanofi Pasteur gave a lecture entitled “: Respiratory Syncytial Virus (RSV): Burden of Disease in All Infants and Potential Prevention Strategies”. Topics presented included the disease burden caused by RSV in all infants, the economic burden of RSV in the US health care systems, prevention strategies, health disparities and access to therapies. The presentation by Dr. Hassan was especially useful especially in light of the upcoming respiratory season in mind; the topic was of great interest to the members. The Society thanks Dr. Hassan and Sanofi Pasteur for this informative topical lecture.



Dr. Hassan accepting a WMSHP award from current WMSHP President Ramalingam with former WMSHP President Subramaniam and WMSHP President Elect Rungkitwattanakul



Theresa Chan, Meenakshi Shelat, Tiffany Tseng, Jesse Rungkitwattanakul, Michelle Eby, Ashok Ramalingam, Vaiyapuri Subramaniam, John Quinn, Babak Sabouri



Tiffany Tseng, PharmD WMSHP Newsletter Editor



Salad and Appetizers at Season 52 in Rockville

The Society will continue to evaluate virtual vs physical for future seminars.



University of Maryland Pharmacy School of Pharmacy Clinical Roundtable

By Dr. Vaiyapuri Subramaniam, PharmD, MS, FASHP, FCP, FASCP, FFIP

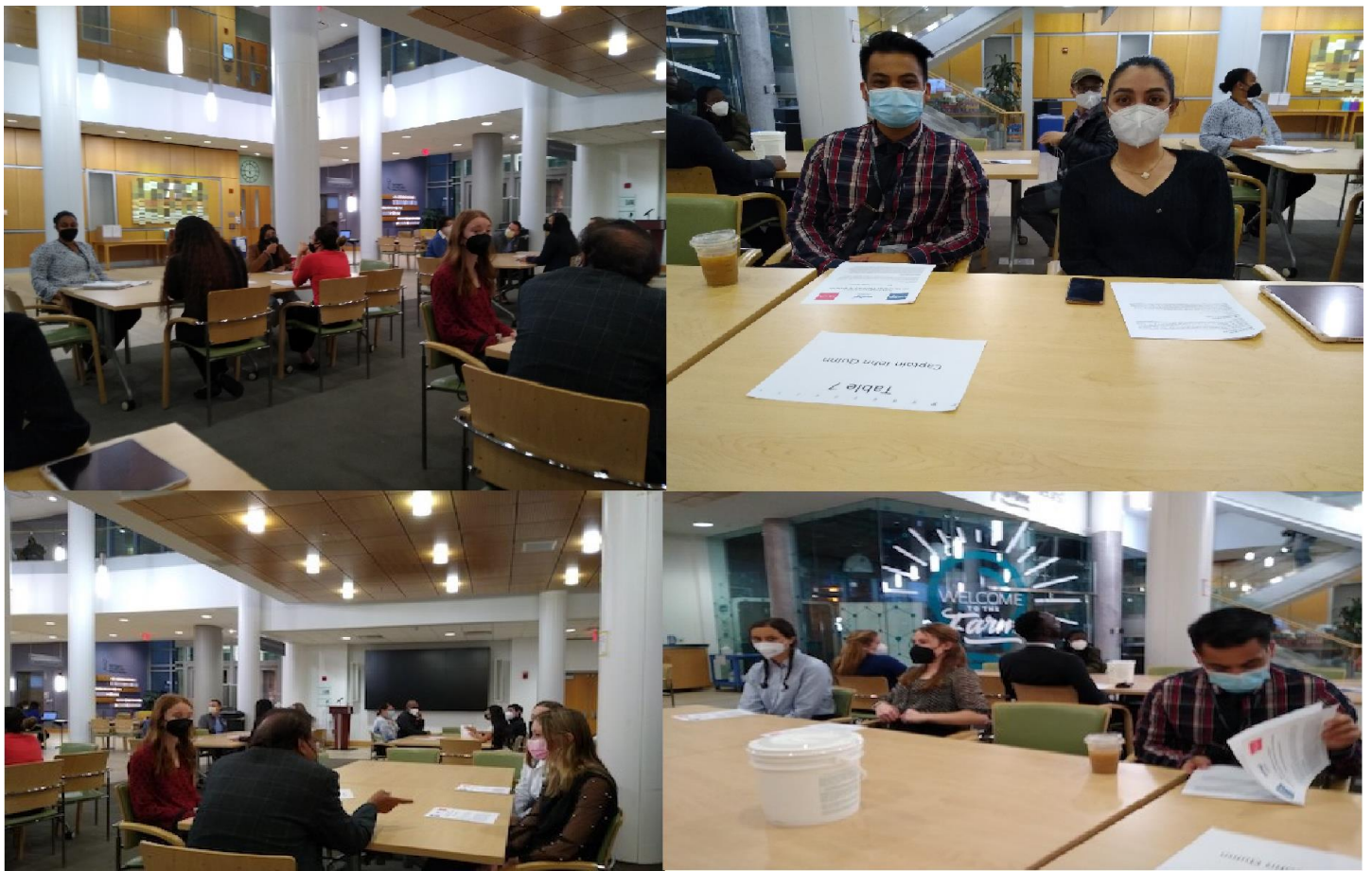
On November 18, 2021, the University of Maryland School of Pharmacy invited WMSHP Immediate Past President Dr. Vaiyapuri Subramaniam and WMSHP Senior Board Member CAPT. John Quinn to their Student Society of Health System Pharmacists (SSHP) and Clinical Pharmacy Roundtable session at the University's Baltimore Campus.

Throughout their professional pharmacy education, students are exposed to clinicians, hospital specialists, community-based pharmacists, and pharmacy academic leaders. Our profession as pharmacists continues to grow to a larger universe of specialties. This Roundtable program helps pharmacy students to communicate and interact with a multidisciplinary group of Pharmacist Practitioner faculty who have career experiences that are outside what the students may encounter during their pharmacy curriculum, experiential training, and internships.

The Roundtable session was organized to have each pharmacist practitioner faculty member sit at tables with a small number of students who rotate every 10 minutes to another table with a different pharmacist practitioner faculty. Each student individually shares with the group what their career goals are and how they hope to achieve them after they graduate from pharmacy school. Each pharmacist practitioner faculty member gives an overview of their professional background and experience and how they reached their career goals or disciplines that also includes their encouraging input from the students of their career goals. After the Roundtable sessions were completed, all the students had the opportunity to meet with each of the pharmacist practitioner faculty.

The student coordinators of the SSHP/Clinical Pharmacy Roundtable are to be commended for the session's organization and efficiency. It was also interesting to note that the event was fully and systematically run by pharmacy students and we did not see any of the University of Maryland School of Pharmacy faculty members present at the roundtable rotations. This is a testament to the professionalism and organizational ability that we noted in the students.

Various WMSHP members have participated in these SSHP roundtable events in the past and we hope to continue to support the University of Maryland School of Pharmacy at Baltimore in this opportunity which provides a useful and practical training program for pharmacy students.





Presidents message from page 1

Professional societies like WMSHP play a key role in keeping members of the profession up to date with the latest information tailored for their specific healthcare role. These societies have had to quickly change from physical social contact get-togethers to cyber non-contact get-togethers as keeping front-line practitioners safe is of paramount importance. Many professions have found that they can work from home far more efficiently than they thought was possible. Working from home may not apply to all pharmacists who still need to be physically present at the hospital or at the local community pharmacy to care for patients.

WMSHP leaders acted quickly and moved society business to a virtual format at the beginning of COVID, partnering with pharma companies who adopted tools they had originally created for internal communications. The Society also started to use their own subscribed Zoom virtual platforms for seminars and regular board meetings. Dr. Dhakrit “Jesse” Rungkitwattanukul, last year’s President-Elect and this coming year’s President, successfully conducted a 4-hour Saturday virtual CE seminar in Fall 2021.

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Presidents message from page 13

In this issue we have a great article from WMSHP member Frank Nice. Please also read our article from our academic partner, Howard University, on advanced research they are conducting with adapting data science techniques to the Pharmacy profession. WMSHP was also represented at a recent University of Maryland School of Pharmacy Career roundtable event. We also have an article and photographs from two recent live WMSHP seminars.

We have many plans for the new year 2022. On January 27th, we will have a virtual ACPE CE seminar and the installation of newly elected WMSHP Officers. We will continue to work to update the WMSHP constitution and bylaws. I have been honored, humbled and excited to be Your society President and I look forward to continuing to support the Society as Dr. Rungkitwattanakul starts his tenure as President for 2022. I hope you will join us in the next year as we strive to serve You and the Pharmacy Profession. Thank You!

Ashok Ramalingam, RPh, MS, PhD, DPharm, CPPS
President, Washington Metropolitan Society of Health-System Pharmacists.

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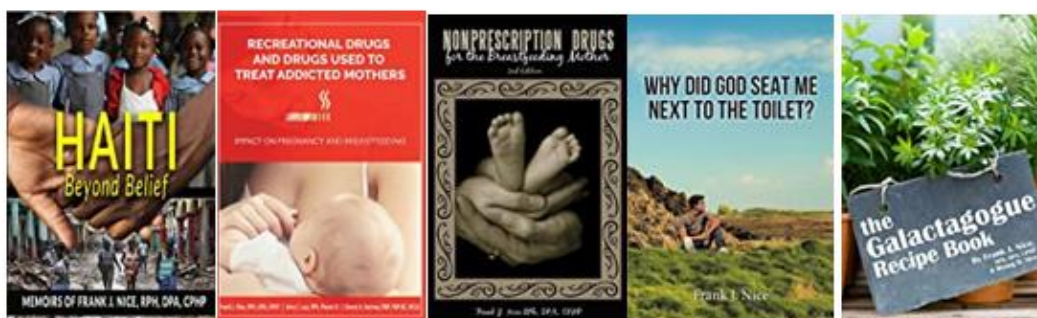


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DR. NICE'S BOOKS



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Advertising Opportunities

The WMSHP newsletter will start accepting half page advertisements as part of the newsletter.

For small businesses and hospitals, the rate will be \$20 a month or \$100 a year. For drug companies and larger medical related businesses, the rate will be \$30 a month or \$200 a year

Advertisements must be emailed to webwmshp@gmail.com by the 15th of the month to be included in the next newsletter. Both print images are acceptable.