

Montana PharmAssist Program
and
The University of Montana Skaggs School of Pharmacy
PRESENT

MONTANA PHARMASSIST TRAINING PROGRAM
“For Pharmacists”

June 24, 2007
Kalispell B.P.O.E. #725
37 1st Street West
Kalispell MT 59901
(across from the mall)

August 19, 2007
Benefis West Campus
Lewis and Clark Room
500 15th Ave South
Great Falls MT 59405

October 14, 2007
The University of Montana
Skaggs Building 114
32 Campus Drive
Missoula MT 59812

ABSTRACT

The Montana PharmAssist Program is a state-run program administered by the Department of Public Health and Human Services (DPHHS), which will provide Montana residents an opportunity to meet with a pharmacist for a review of their medications and health history. This workshop will train interested pharmacists to participate as reviewers for the Montana PharmAssist Program. Topics will include communication with patients and healthcare providers, an overview of common chronic diseases (cardiovascular diseases, respiratory diseases, diabetes), an overview of diseases and issues common to geriatric patients, discussion of case examples, and development and documentation of patient care plans.

LEARNING OBJECTIVES

At completion of this program, participants should be able to:

- 1) List three communication skills that improve the interpersonal relationship between the pharmacist and patient to improve pharmaceutical care outcomes.
- 2) Identify effective methods for communicating your recommendation for solving a patient-specific medication-related problem to a physician.
- 3) Given a brief patient history and medication list, identify cardiovascular-related problems and generate recommendations.
- 4) Recommend a plan for patient antihypertensive or heart failure medication regimens aimed at improving adherence and outcomes.
- 5) List at least four parameters a pharmacist can monitor for patients with diabetes.
- 6) Given a brief patient history and medication list, identify diabetes-related problems and generate recommendations.
- 7) Given a brief patient history and medication list, identify problems related to respiratory function and generate recommendations.
- 8) Recommend strategies for patient management of respiratory medications and symptom control.
- 9) Given a brief patient history and medication regimen, identify appropriate drug therapy for a geriatric patient.
- 10) Identify methods to improve efficacy, manage adverse reactions and improve adherence to a multi-drug regimen for a geriatric patient.

In addition, practitioners will work through a series of case studies to simulate clinical situations and clinical decision-making.

FACULTY

Rose Macklin, PharmD, BCPS, Clinical Associate Professor, UM Skaggs School of Pharmacy
Kendra Keeley, PharmD, Assistant Professor, UM Skaggs School of Pharmacy
Gayle Cochran, PharmD, Professor, UM Skaggs School of Pharmacy
Vince Colucci, PharmD, BCPS, Assistant Professor, UM Skaggs School of Pharmacy
Carla Cobb, PharmD, BCPP, Deering Clinic, Billings, MT

REGISTRATION AND COURSE FEE: Pre-registration is required (see reverse). There is no charge for this course. Lunch is included.

SCHEDULE:		10-10:10 am	Break	2:10-2:20 pm	Break
7:30 am	Continental breakfast	10:10-11:10 am	Cardiovascular Diseases	2:20-3:20 pm	Geriatric Issues
8:00-8:30 am	Program registration and pre-test		Vince Colucci		Gayle Hudgins
8:30-9:00 am	Montana PharmAssist Program	11:10 –12:10 pm	COPD and Asthma	3:20-3:50 pm	Montana Pharm-Assist Q&A Session
9:00 -10:00 am	Communication Skills Carla Cobb	12:10—1:10 pm	Lunch	3:50-4:15 pm	Closure/evaluations
		1:10-2:10 pm	Diabetes Mellitus Rose Macklin		



The University of Montana Skaggs School of Pharmacy is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education. This program has been approved for 6.0 hours (0.6 CEU) under the assigned universal program number 035-999-07-004-L01. Successful participants must attend the entire program and complete a program evaluation form. Statements of credit will be mailed to participants who satisfy these requirements, within three weeks after the program.

Montana PharmAssist Program Training Registration Form

This continuing education program will be provided free of charge to pharmacists interested in participating in the Montana PharmAssist Program. By registering and attending the training, you will become certified to provide medication reviews for eligible patients. Please fill out the form below and fax to The University of Montana Skaggs School of Pharmacy Continuing Professional Education Programs office.

Program Attending

Kalispell (6/24/2007) *or* Great Falls (8/19/2007) *or* Missoula (10/24/07)

Name (please print) _____

Address _____

E-mail _____

Home Phone _____ Work Phone _____

Fax _____

Pharmacists must have a license in good standing to practice pharmacy in Montana and must maintain professional liability insurance to participate in the Montana PharmAssist Program.

Below is a list of criteria required to participate in the Montana PharmAssist Program. Please indicate that you have met the criteria by checking each box.

- I have a license in a good standing to practice pharmacy in Montana.
- I have professional liability insurance.
- I agree to provide pharmacist review services to eligible patients as outlined in the Montana PharmAssist Program materials.
- I agree to participate in the evaluation activities as outlined in the Montana PharmAssist Program materials.

I, the undersigned, hereby certify that the above statements are true.

(Signature)

(Date)

Please fax signed form to: **ACPE Program Assistant, 406-243-4353**

Please e-mail any questions to:
pharmacy.ce@umontana.edu
or call 406-243-2453