



# InPharmation

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### Kellie Cooley

Kellie Cooley is originally from Baton Rouge, LA, where she attended Baton Rouge Magnet High School. Despite being raised in Baton Rouge, she considers New Orleans and Mississippi home as well due to having close family in both places. She is her parents' only child, though she has a very large extended family. Upon graduating from high school, she went to Xavier University of Louisiana for her undergraduate and pharmacy education. Kellie is passionate about a career in pharmacy, because it is a career that is centered around dedication to serving those in need and being an integral part of the healthcare team. Outside of pharmacy, she enjoys spending time with family and friends, watching football games (Geaux Saints!), creating artwork, traveling, and trying new recipes in the kitchen. One of her favorite meals is gumbo which would ideally be followed by "The Apple Pie A la Cold Stone" at Cold Stone Creamery on occasion. Outside of a career in pharmacy and being paid to travel around the world, her dream job would be to become a mixed media artist with several art exhibitions each year. The things that she values most in the world are having compassion for those around her and being centered around those that she loves most.

Now faith is the substance of things hoped for, the evidence of things not seen.

Hebrews 11: 1

## Meet the 2019-2020 Residents



(From left to right) Alexandra Grezaffi, Lynn Hoang, Kellie Cooley, Caroline Heider

### Alexandra Grezaffi

Alex was born and raised alongside her younger sister, Bailey, in Houma, LA. She completed her undergraduate studies at Nicholls State University and went on to complete pharmacy school at the University of Louisiana at Monroe. Alex's favorite part of being a pharmacist is having an active and impactful role in patient care, and having coworkers that make everyday a good day. If Alex hadn't pursued a career in pharmacy, she would create the job title 'Professional Sleeper' and participate in sleep studies to get paid for doing what she loves most. When Alex isn't working, she can usually be found sleeping, trying out restaurants around Baton Rouge, walking along the river downtown, or traveling home on her weekends off. In her free time, she likes to express herself creatively through makeup, crafts, and photography, and also enjoys traveling, hiking, and reading. If she won the lottery, she would immediately book a trip to backpack Europe, and probably pay off her student loans and car note. When asked, Alex expressed that her family and friends are what she values most in the world.

### Caroline Heider

Caroline grew up in Chattanooga, TN. She graduated from the University of Tennessee with a degree in Food Science in 2015, and moved to Memphis for pharmacy school at the University of Tennessee Health Sciences Center. After graduating in May 2019, Caroline moved here to Baton Rouge to begin her pharmacy residency. When she is not at work, you can probably find her laying down and watching Gilmore Girls or the Food network. She has an older brother who is a geologist in Nashville, TN. Her dad still lives in Chattanooga and her mom lives in Lynchburg, VA. Caroline's favorite part of being a pharmacist here and a pharmacy intern in school has always been the giggles that her coworkers provide. If she wasn't a pharmacist, her dream job would be working as Guy Fieri on his Food network show Diners, Drive-ins, and Dives. The first thing she would do if she won the lottery is buy a few Domino's pizza stores and a trip around the world.

### Lynn Hoang

Lynn was born and raised alongside her older brother and cousins who are basically her sisters in New Orleans, LA. Being motivated by wanting to do good in the world and help others; she completed her schooling at Xavier University of Louisiana College of Pharmacy. When she finds time, Lynn enjoys reading, experimenting in the kitchen (because the results are probably not considered cooking yet), and playing board games. Lately however, she succumbs to her Harry Potter obsession by playing the mobile game, "Harry Potter: Wizards Unite". If the world was perfect, she would be dipping Vietnamese spring rolls in peanut sauce and being paid to binge watch Netflix. Lynn wouldn't be seen without her cellphone and aims to one day travel around Asia trying all the best street food. And without question, she considers her family to be what she values most.

"Tough times do not last, but tough people like you do" - Dr. Patience Obih, Associate Professor of Pharmacology at XULA

- Additions
  - Cangrelor (Kengreal®)
  - Sodium Zirconium Cyclosilicate (Lokelma®)
  - Daunorubicin/Cytarabine (Vyxeos®)
  - Ceftolozane/Tazobactam (Zerbaxa®)
  - Ceftazidime/Avibactam (Avycaz®)
- Deletions
  - Nebivolol (Bystolic®)
    - Therapeutic Interchange to Atenolol
  - Promethazine (Phenergan®) Injectable

## Policy Changes

The dosing strategy for prothrombin complex concentrate (Kcentra®) has been updated for use of a fixed dose for warfarin-related acute life-threatening bleeding or if the anticoagulant is unknown.

- For patients ≤100 kg, 1500 units should be administered.
- For patients >100 kg, 2000 units should be administered.

## Drug Shortages

Listed below are level 4 critical drug shortages which are medications we are not able to maintain a 4 week supply.

- Epinephrine 1mg/10 mL syringes
- Dextrose 50% syringes/vials
- Heparin
  - 1,000 units/mL (1 mL, 10 mL, 30 mL)
  - 5,000 units/mL (1 mL)
  - 1,000 units/500 mL
  - 25,000 units/250 mL
- Immune Globulin
  - 1 gram
  - 2.5 gram
  - 5 gram
  - 10 gram
  - 20 gram
- Nicardipine 40 mg/200 mL premix
- Sodium Bicarbonate 8.4% 50 mEq/50 mL syringes

Please follow-up on biweekly emails from Brian for a complete list of critical drug shortages.

## Spotlight Recent FDA Approval

### Lefamulin (Xenleta®)

Indication: Community-acquired bacterial pneumonia (Aug 2019)

## ISMP Targeted Medication Safety Best Practices for Hospitals

**Seek out and use information about medication safety risks and errors that have occurred in other organizations, and take action to prevent similar errors.**

- Appoint a healthcare professional to be responsible for oversight of this activity in the hospital
- Identify reputable resources to learn about risks and errors that can be prevented
- Establish a formal process for monthly review of medication risks and errors reported by other organizations, with an interdisciplinary committee responsible for medication safety
- The process should include:
  - Review of the hospital’s current medication use systems
  - Review of internal medication safety reports to determine potential problem areas that would allow similar risks or errors to occur within the hospital
- Determine appropriate action to be taken to minimize the risks of medication safety errors
- Document the decisions reached and gain approval for resources as necessary
- Share external risks and errors with all staff, along with any changes that will be made within the hospital to reduce their occurrence, and begin implementation
- Once implemented, monitor the actions selected to ensure they are still being implemented and are effective in risk reduction

### Rationale:

In order to prevent medication errors, it is important to learn from errors that have occurred either internally or externally, and to use this information to identify potential problem areas or practices to prevent similar occurrences. It has been shown that a medication error reported in one organization is also likely to occur at another. Seeking out internal and external sources of risks and errors, allows for the identification and evaluation of similar events within an institution that may otherwise go unnoticed. There is a natural human tendency to believe that errors that occur in other organizations will not occur within our own, which is why it is essential for leaders to convey the importance of external risks and errors to ensure vigilance and safe practices.

# Regulatory

## **FDA Medication Safety Alert (04/03/2019): E-cigarette: Safety Communication - Related to Seizures Report Following E-cigarette Use, Particularly in Youth and Young Adults**

### **FDA: MedWatch Safety for Human Medical Products**

- The FDA has become aware that some people who use e-cigarettes have experienced seizures with most reports involving youth or young adults users.
- Seizures or convulsions are known potential side effects of nicotine toxicity and have been reported in literature in relation to intentional or accidental swallowing of e-liquid.
- A recent increase in voluntary reports of adverse effects with tobacco products that mention seizures occurring with e-cigarette use (“vaping”) signal a potential emerging safety issue.
- Recommendations for Healthcare Professionals:
  - Ask patients about e-cigarette use (e.g. vaping), particularly when providing care following a seizure (i.e. brand, duration, and nature of the use)
  - Consider testing cotinine levels, a nicotine metabolite, in addition to the typical urine toxicology screening tests
  - Even in e-cigarette users, proceed with the usual work-up to identify or rule out other causes of seizures
  - Refer all users for tobacco cessation assistance
  - Healthcare professionals and consumers are encouraged to report adverse events or any problems related to these products to the Safety Reporting Portal (<https://www.safetyreporting.hhs.gov/SRP2/en/FpsrRoutingPage.aspx>)

## **USP General Chapter 800: Hazardous Drugs-Handling in Healthcare Settings**

Louisiana Board of Pharmacy (BOP) will delay the enforcement of the United States Pharmacopeial Convention (USP) General Chapter 800 until January 1, 2021. This chapter details standards for handling hazardous drugs in healthcare settings. This delay will allow time to implement new rules into existing pharmacies.

### **Act 426, Required Information for Certain Opioid Prescriptions**

Louisiana law regarding prescriptions for controlled substances specifies a seven day limit on first time opioid medications for adults with an acute condition in the outpatient setting or for minor patients at any time. Effective on August 1, 2019, Louisiana now requires that practitioners prescribing opioids must indicate that the quantity ordered is medically necessary when the prescribed quantity is greater than a seven day supply unless exceptions apply. These exceptions include when a prescriber determines that greater than a seven day supply is necessary to treat the patient’s acute medical condition, or if the opioid prescription is for chronic pain management, pain associated with a cancer diagnosis, or palliative care. This Act 426 amendment of paragraph 2 of subsection G of R.S. 40:978 will not affect prescriptions written prior to August 1, 2019, does not apply to inpatient orders or prescriptions, and does not apply to opioids for the treatment of substance abuse or opioid dependence. All non-exempt prescriptions issued after August 1, 2019 must indicate medical necessity if the prescribed quantity exceeds a seven day supply. The language to specify this is left to the discretion of the practitioner, but the words must reflect medically necessary quantity or exemption. Practitioners may use stamps or handwritten statements on the physical prescription, or pre-formatted statements on electronic prescriptions.

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## Reminders

### **Open Enrollment Nov 1st-30th**

Please renew your benefit elections before the end of the month.

### **Pharmacist License Renewal Nov 1st-Dec 31st**

The online renewal cycle for pharmacist to review their license begins on Nov 1st.

### **Upcoming Holidays/Notables Dates**

Thanksgiving—Nov 28

Midyear—Dec 7-12

Christmas—Dec 25