



JFPS 2017

CELEBRATING JOINT FEDERAL PHARMACY
HEALTH CARE EXCELLENCE



Joint Federal Pharmacy Seminar ★ Orlando, FL ★ September 10–13, 2017

Call for Posters

Orlando, Florida
Rosen ShingleCreek Hotel
September 10–13, 2017

Deadline for Submissions:
March 30, 2017



American Pharmacists Association®
Improving medication use. Advancing patient care.

APhA

APhA is the official education provider and meeting manager of JFPS 2017.



About JFPS 2017

The Joint Federal Pharmacy Seminar (JFPS), is a national education-based conference for federal pharmacists and pharmacy technicians, developed by the American Pharmacists Association (APhA). The conference will be held September 10 – 13, 2017, at the Rosen Shingle Creek Hotel in Orlando, Florida. The 2017 theme is “Celebrating Joint Federal Pharmacy Health Care Excellence.”

Poster Abstracts

APhA is seeking abstracts for the poster program. The poster presentations should be on topics relevant to pharmacy practice and pharmacy-focused scientific research. Projects must address issues relevant to federal pharmacists and pharmacy technicians.

Presenters

Poster presenters must be pharmacists or pharmacy technicians who are:

- Uniformed members of the Public Health Service and Department of Defense
- Civilian pharmacists or technicians assigned to federal agencies
- Retired or reserve members of the Army, Navy, Air Force, Coast Guard and Public Health Service.

Any contribution from a pharmaceutical manufacturer needs to be noted in the poster submission along with the methodology used in the study and a statement attesting that they had no potential influence on outcomes.

Abstract Types

Prospective poster presenters are asked to submit abstracts in one of the categories listed below. These categories indicate the type of research or project conducted.

Categories

Contributed Research Papers—Papers submitted in this category present the findings of original research on issues relevant to practicing pharmacists and pharmacy technicians. **Research in this category must be completed at the time of abstract submission.**

Innovative Practice Reports—Practitioners who have implemented a new idea or strategy for the delivery of patient care or a creative application of existing techniques or services are encouraged to share their innovation with colleagues. This includes process improvement projects that show improved patient outcomes. Ideas and practices that are new to the region, system, or practice setting may be considered. Submission requires an abstract summarizing the innovation or process improvement. **Practices in this category must have been implemented and have outcomes ready to report by the time of the submission.**

Reports on Projects in Progress—Submissions in this category may be research papers or innovative practice reports. Investigators who submit abstracts in this category must be in the process of collecting data or implementing an innovative practice or process improvement, and **must have completed data or initial outcomes collection by JFPS 2017.** Submission requires an abstract summarizing the project plan. If your project includes research with patients, please remember that you will be required to have IRB approval for your research before it can be conducted or published.



Encore Presentations—Entries in this category must meet all submission and evaluation criteria for original papers, with the exception that the paper has been presented at a local, state, or national meeting within 12 months of the submission deadline. Submission requires the original presentation citation.

Topic Areas

Posters should be classified within one of these four topic areas:

- **Clinical Pharmacy**
- **Hospital Inpatient Services**
- **Pharmacy Operations**
- **Automation/Technology**

Poster Presentations

All accepted abstracts will be presented at JFPS 2017 as poster presentations. Posters will be displayed during the conference from Sunday evening, September 10, through Wednesday, September 13. Authors will be provided with an 8-foot (wide) × 4-foot (high) poster board. Authors will receive a confirmation e-mail indicating the precise set-up times, as well as information about the early morning “Meet the Researchers” sessions for which attendees may earn continuing pharmacy education (CPE) credit. Presenters are required to be available to discuss their poster at an assigned session.

As a resource for poster presenters in developing their presentations, please refer to the following JFPS 2010 presentation: “Tricks of the Trade for Successful Posters and Power Point Presentations,” which was presented by COL (Ret) Mike Heath and CAPT (Ret) Betsy Nolan. It is available at: <http://bit.ly/2kOZfvg>

Financial Disclosures

Financial disclosure statements for all poster authors will be collected during the online poster submission process, since accepted poster presenters are required to participate in an accredited CPE activity, “Meet the Researchers,” and this information is an ACPE requirement.

The Accreditation Council for Pharmacy Education (ACPE) Standards for Commercial Support require that all continuing pharmacy education providers “...be able to show that everyone [who is in a position to control the content of an education activity has disclosed to the provider [and therefore the participants] all relevant financial relationships with any commercial interest.” As defined by ACPE, “relevant financial relationships” are financial relationships in any amount occurring within the past 12 months that create a conflict of interest. A “commercial interest” is defined as any entity that produces, markets, resells, or distributes health care goods or services consumed by, or used on, patients. (Providers of clinical services directly to patients are not commercial interests.) Financial relationships are those in which the individual—or the individual’s spouse or partner—benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, or other financial benefit.



Authors who have no relevant financial relationships must state that they have nothing to disclose.

A financial disclosure statement must be included on all accepted and displayed posters.

Examples of a financial disclosure include:

1. [Insert poster author name(s)] declare(s) no conflicts of interest, real or apparent, and no financial interests in any company, product, or service mentioned in this poster, including grants, employment, gifts, stock holdings, and honoraria.
2. [Insert poster author name] declares that he/she owns stock in XYZ Corporation or participates in the Speakers Bureau for ABC Drug Company, and/or is employed at DEF company.

Submission Format

Abstracts for potential poster presentations must be submitted using the JFPS online submission system. To access the system, go to www.jfpsinfo.org and click on the “Call for Posters” link. You will be asked to log in using your pharmacist.com username and password.

Writing a Poster Abstract

An abstract is a summary of a completed project that offers a conclusion on the basis of results (see examples on page 7). Please observe the following criteria when writing a poster abstract.

- Abstracts are limited to **300 words** in length, must be in narrative form, and must include all of the following sections:
 - Objective
 - Methods (i.e., design, setting, patients/participants, data collection, analysis plan, or other appropriate qualitative methods)
 - Results (or preliminary results for Projects in Progress proposals)
 - Implications/conclusions (when applicable)
- **DO NOT include any identifying information such as authors’ names, affiliations, or site names in the abstract; this information will be obtained during the online abstract submission process. This facilitates the double-blinded review process.**
- The body of the abstract should begin with the study’s objective.
- The abstract should be clear, concise, and free of graphs, tables, and illustrations.
- Trademark symbols, subscripts, superscripts, and hyphenation should be avoided.
- Standard medical abbreviations may be used where appropriate, but spell out federal acronyms.
- The abstract must be free of grammatical and typographical errors.

Review Process & Criteria

All abstracts are subjected to double-blinded peer review. Each abstract will be evaluated according to the criteria listed below.



Contributed Research Paper Criteria

Relevance/Originality

- Relationship of topic to theoretical framework, previous research, or scientific literature is clearly described.
- Topic makes important contribution to pharmacy practice or theoretical basis of pharmaceutical sciences.

Research Questions/Objectives

- Clear statement of question(s) to be answered or objectives to be met by research.
- Methods (as applicable to the type of research presented).
- Study design.
- Measurement.
- Data collection process, sampling strategy, or sources of data.
- Data analysis clearly specified.

Results

- Findings are reported for each study objective or research question.

Implications/Conclusions

- Implications of findings for pharmacy practice, policy theory, or further research are discussed.
- Conclusions are appropriately stated based on results.

Innovative Practice Report Criteria

Relevance/Originality

- Topic is of vital concern to federal pharmacy professionals.
- Topic is original.

Objective(s) of Project

- Clear statement of question(s) to be answered or objectives to be met by implementation of innovation or process improvement project.

Methods

- Project design clearly stated and variables controlled.
- Practice description/setting stated.
- Patient population described.



- Data collection process explained.
- Data analysis procedures target project outcomes and support project objectives.

Results

- Findings are reported for each study objective or question.

Implications/Adaptability

- Implications of findings to pharmacy practice are stated.
- Innovation is adaptable to other practice sites/settings.

Reports on Projects in Progress

(can be either Contributed Research or Innovative Practice Report)

Relevance/Originality

- Title appropriate and describes project being presented.
- Makes important contribution to federal pharmacy practice.

Probability of Success

- Feasibility of project completion.

Methods

- Study design is appropriate to achieve the objectives.
- Methods are clearly described.
- Appropriate data collection process is described.
- Evaluation/analysis strategies are described.

Research Questions/Objectives

- Question(s) to be answered or objectives to be met are clearly stated.

Notification

Poster presenters will be notified of the status of their poster submission by e-mail; if a submitter's contact information changes after submission, please notify APhA staff member Pat Szybist at pszybist@aphanet.org or 202-429-7578.

All presenters of accepted posters must submit a PDF or PowerPoint file of the final poster by September 1, 2017. If a file is not received, then we will assume that you will not display at JFPS 2017 and a board will not be available.



Sample Abstracts

Contributed Research Paper

Title: ADHERENCE TO DAILY MIGRAINE PREVENTION IN THE MILITARY HEALTH SYSTEM

Objective: To describe the patterns and predictors of adherence to daily migraine prevention in the military health system.

Methods: The study employed a retrospective cohort design of administrative claims data to examine adherence among 1,144 new users of daily migraine prevention in the military health system. Adherence was measured as the proportion of days covered during the subsequent year following initiation of treatment. Patients were deemed adherent if they possessed enough medication to cover at least 80% of treatment days. The study also evaluated the factors associated with maintaining adherence to daily migraine prevention using multivariate logistic regression. Factors included both patient characteristics and the type of initial preventive medication prescribed.

Results: The number of new users adherent to daily migraine prevention declined swiftly, with only 50% of patients considered adherent after 3 months of treatment. This trend then stabilized, with 35% and 31% of participants maintaining adherence at 6 and 12 months, respectively. After controlling for other factors, age was the strongest predictor of treatment adherence. Characteristics of the initial preventive medication prescribed did not influence the likelihood that a patient would remain adherent to treatment.

Conclusions: The conclusion that two-thirds of all new users of migraine medications showed evidence of nonadherence within 6 months of initiating therapy suggests that adherence could be improved considerably. Pharmacists can play an important part in reversing this trend of nonadherence with regular patient education and careful monitoring after initiation of preventive treatment.

Courtesy of J. Devine, United States Air Force

Report on Project in Progress

Title: STUDY OF PATIENT SATISFACTION AND PERCEPTIONS OF THE PHYSICAL ENVIRONMENT IN A MILITARY OUTPATIENT PHARMACY WAITING ROOM

Objective: To determine which physical attributes or characteristics of a military outpatient pharmacy waiting room correlate with military beneficiaries' perceptions of waiting time and patient satisfaction.

Methods: A convenience sample of military health system beneficiaries obtaining a prescription at a military outpatient pharmacy will be selected at random to participate in the study. A pharmacy staff member or volunteer will ask beneficiaries while waiting for their prescription(s) to be processed. The questionnaire, designed by the investigators, contains 17 questions measuring demographic information, patient waiting experience, and preferences for physical attributes in a military pharmacy waiting room. The questionnaire has been pilot-tested and content validity has been assessed. Data collection will continue until 500 questionnaires are completed. Statistical analysis will be accomplished using SAS version 9.1.3 (SAS Institute, Cary, NC). Chi-square will be used to analyze the categorical differences by physical attribute and by patient category using an a priori significance level of 0.05. Additionally, descriptive statistics and correlation coefficients will be calculated for other study variables.

Results: NA (research in progress).

Conclusions: NA (research in progress).

Courtesy of R. Conrad and D. West, University of Arkansas for Medical Sciences

Innovative Practice Report

Title: TRANSFORMING TECHNICIANS' FUNCTIONS: IMPLEMENTATION OF A TECHNICIAN SCREENING PROCESS FOR MEDICATION REFILLS

Objective: To reduce the quantity of medication refill requests called into the Internal Medicine Clinic.

Methods: The Clinical Pharmacy Service identified a growing problem with the increasing numbers of call-in refill requests. Patients who had recent appointments were not having maintenance medications refilled. An experienced technician reviewed the prescription history of patients with upcoming appointments and identified maintenance medication with no remaining refills. If medication refills were needed, a copy of the current medication profile with recommendations and comments was given to the clinic to be furnished to the providers at the patient's appointment.

Results: This screening program identified adherence issues, duplication in therapy, medication errors, and recommendations for formulary changes and allowed providers a more effective review of maintenance medication issues. This mechanism enabled more appropriate consideration of refills and prompted the providers to discontinue any unneeded medications.

Conclusions: To date, the screening process has met with positive feedback from the providers and an increase of maintenance medications being refilled at appointments.

Courtesy of C. Stroll and M. Johnson, Evans Army Community Hospital



Poster Awards

To be eligible for the JFPS 2017 poster award program, the following requirements must be met:

- The poster must be accepted to the program.
- Presenters must submit a PDF or PowerPoint file of their poster by September 1, 2017.
- The poster must be displayed at JFPS 2017.

Award plaques will be presented for first place in each of the poster categories and overall best of seminar. Special recognition ribbons will be awarded to the highest scoring poster that did not win in its category. Posters are judged on Technical Merit (1–10), Originality (1–10), and Presentation (1–10) for a maximum possible score of 30.

Abstract Publication

Accepted abstracts will be e-published in the November/December 2017 issue of the *Journal of the American Pharmacists Association (JAPhA)* at www.japha.org. Only abstracts that were displayed at JFPS 2017 will be included. APhA holds the first right of refusal for material contained in abstracts when submitted for publication. Full manuscripts that expand on the abstracts should be submitted for publication in an APhA periodical, usually JAPhA. The Web site for manuscript submission is <https://mc.manuscriptcentral.com/japha>. Abstracts submitted as Encore presentations are not published in their entirety; for these abstracts, only the title, authors, and original citation will be published in *JAPhA*.

More Information

To submit a poster abstract, visit www.jfpsinfo.org and click on the “Call for Posters” link. If you have any questions, please contact Pat Szybist, APhA Senior Manager, Education at pszybist@aphanet.org or 202-429-7578.

Deadline for submissions: Thursday, March 30, 2017