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Shaukat Khanum Memorial Cancer Hospital & Research Centre

# Pharmacy Newsletter

**JCI Special Edition**

**Volume XV, Issue # 1, 2025**

***Issued By:***

**Drug Information Centre, SKMT**

## **P&TC Updates:**

Pharmacy & Therapeutics Committee (P&TC) has approved the following drug during 2025 at SKMCH&RC:

- **Diphtheria and Tetanus Toxoids, Acellular Pertussis, Hepatitis B (Recombinant), Poliovirus (Inactivated), and Hemophilus influenzae B Conjugate (Adsorbed) Vaccine Inj. 0.5ml:**  
Formulary restricted by service and will be only prescribed approval of ID consultant.



**We all have a role in reducing medication errors and harm - Get involved**

## The Joint Commission International (JCI) and the Pharmacy Commitment to Patient Safety

Patient safety lies at the heart of quality healthcare delivery, and in pharmacy practice, it is both a moral obligation and is professionally imperative. The Joint Commission International (JCI) plays a pivotal role in elevating safety standards across healthcare systems globally by establishing evidence-based accreditation benchmarks that guide institutions toward continuous quality improvement. For pharmacists, JCI standards emphasize safe medication management, risk reduction strategies, and robust communication within interprofessional teams. These principles directly support critical areas such as preventing medication errors, safeguarding high-alert medications, implementing sound labeling practices, and ensuring the five rights of medication administration—right patient, right drug, right dose, right route, and right time.

JCI's International Patient Safety Goals (IPSGs) serve as a structured framework for healthcare providers to systematically improve outcomes. From accurate patient identification and effective staff communication to infection prevention and medication safety, each goal reinforces a culture of accountability and vigilance. For pharmacy professionals, aligning with JCI means embedding patient safety into every layer of the medication use process—from procurement and storage to dispensing and monitoring. It also encourages active participation in adverse event reporting and root cause analysis, turning near misses into learning opportunities.

Moreover, JCI fosters a global language of safety and quality, enabling healthcare institutions in Pakistan and beyond to benchmark themselves against international best practices. For hospital pharmacists, this alignment is not just about compliance—it is about leading the charge toward safer, more reliable care. As the pharmacy profession evolves, embracing JCI's principles empowers pharmacists to become key players in advancing patient safety, enhancing outcomes, and building trust in healthcare systems.

### JCI 8th Edition: Advancing Global Standards in Patient Safety

Effective January 1, 2025, the **8th Edition of Joint Commission International (JCI) Hospital Standards** brings a renewed focus on patient-centered care, system resilience, and global health impact. With updates grounded in current healthcare realities, these standards further strengthen the role of pharmacy in promoting safety, quality, and innovation.

#### Key Updates Relevant to Pharmacy and Patient Safety:

- **New Patient Safety Chapter:** Emphasizes a non-punitive culture for reporting events and learning from errors.
- **Enhanced Medication Management:** Strengthens antimicrobial stewardship, medication recalls, and high-alert drug safety.
- **Healthcare Technology Standards:** Covers electronic health records, telehealth practices, and cybersecurity safeguards.
- **Workplace Safety Focus:** Includes staff well-being and protection from workplace violence.

- **Vulnerable Populations:** Expanded care standards for mental health, organ/tissue transplant, and other sensitive areas.
- **Global Health Impact:** Introduces sustainability measures in healthcare governance and resource use (compliance by Jan 2026).

Pharmacy teams must align their practices with these updated standards to drive excellence, ensure compliance, and lead in patient safety culture.

### JCI 8th Edition Update: Focus on MMU (Medication Management and Use)

The 8th Edition of JCI Accreditation Standards brings critical updates to the **MMU chapter**, reinforcing the pharmacy's pivotal role in safe, effective, and patient-centered medication use. Key enhancements include:

- **Stronger Antimicrobial Stewardship:** New expectations for active monitoring, restriction policies, and prescriber education to combat antimicrobial resistance.
- **Medication Recall Readiness:** Clearer protocols for tracing, notifying, and removing recalled medications from circulation—ensuring rapid and coordinated response.
- **Enhanced Oversight of High-Alert Medications:** Greater emphasis on risk mitigation strategies, including segregation, labeling, and double-check systems.
- **Patient Involvement in Medication Safety:** Promotes counseling and shared decision-making, empowering patients to be partners in their medication care.
- **Integration with Technology:** Encourages use of electronic prescribing, barcode verification, and automated systems for tracking and auditing medication use.
- **Staff Competency and Training:** New emphasis on ongoing assessment of pharmacy staff competency, especially regarding new medications and updated safety practices.

These updates call for pharmacy department to strengthen internal systems, enhance documentation, and build a culture of continuous improvement and safety.

# Patient Safety



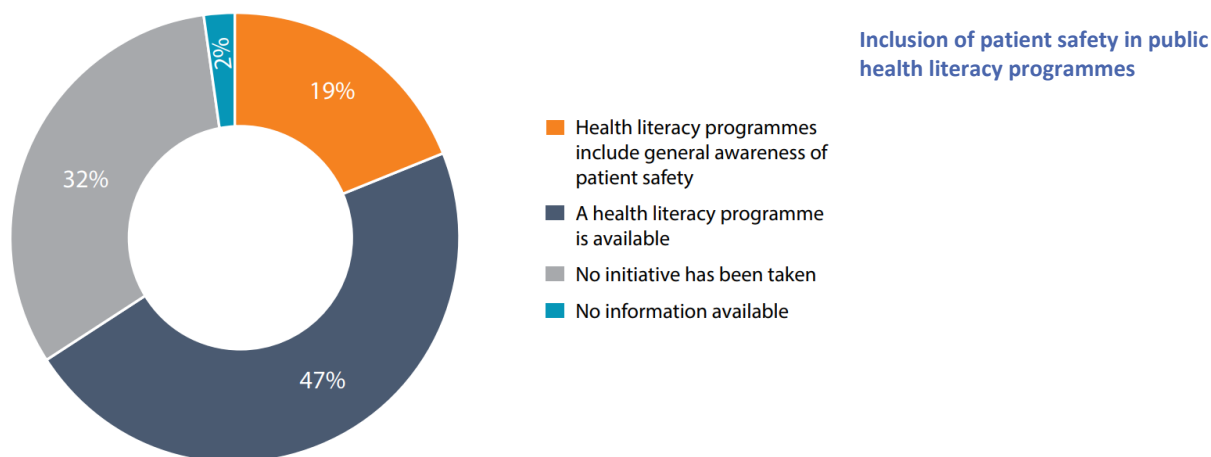
## Health Literacy: A Key Pillar in Enhancing Patient Safety

Improving patient safety begins with strengthening **health literacy**—the ability of individuals to access, understand, and use health information to make informed decisions. When patients are health-literate, they are better equipped to evaluate treatment options, prevent harm, and communicate effectively with healthcare providers.

Efforts to boost health literacy include the development of simplified educational materials, the use of plain language and visual aids, patient-focused training programs, and fostering a culture of engagement and empowerment. These initiatives not only build trust but also support safer, more participatory healthcare.

According to recent survey findings, **66% of countries** have implemented health literacy programs. However, only **19%** of these include components specifically aimed at patient safety. Alarming, just **6%** of respondents reported that skills to promote patient engagement are taught across all educational levels—from schools to universities.

This gap highlights an urgent need to embed patient safety awareness and engagement skills in public education systems, ensuring future generations are equipped to play an active role in their own care



**Every day thousands of patients suffer harm in health care**



Ref: Apfel F, Tsouros AD. Health literacy: the solid facts. Copenhagen: World Health Organization. 2013;15(1):3-26.

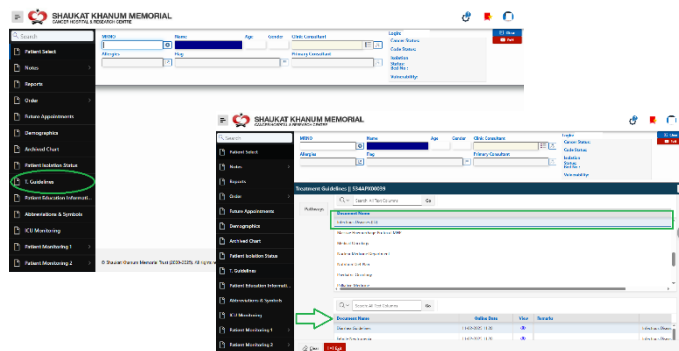
## Antimicrobial Stewardship at SKMT: Guideline Updates

As part of our ongoing commitment to patient safety and responsible antimicrobial use, we are pleased to announce the recent update of the **Infectious Diseases (ID) Guidelines** at Shaukat Khanum Memorial Hospital (SKMT). These revisions are a key milestone in strengthening our **Antimicrobial Stewardship Programme (ASP)**, designed to support evidence-based clinical decisions, minimize antimicrobial resistance, and ensure the most effective use of antibiotics.

The updated guidelines reflect current best practices and emerging resistance patterns, equipping clinicians and pharmacists with improved tools to select the right drug, dose, and duration. This initiative reinforces SKMT's leadership in promoting safe, effective, and sustainable antimicrobial therapy.

Updated Guidelines Include:

- **Febrile Neutropenia**
- **Surgical Antibiotic Prophylaxis**
- Diarrhea Management
- MRSA Decolonization Protocol
- Management of Dengue Fever
- Pneumonia
- Sepsis Bundle
- Skin and Soft Tissue Infections
- Upper Respiratory Tract Infections
- Urinary Tract Infections
- Rabies & tetanus prophylaxis
- Post expose prophylaxis in HIV



All updated guidelines are available on the Hospital Information System (HIS). To access them, please follow the path: Clinical Menu > T. Guidelines > Pathways > Infectious Diseases (ID)

We encourage all clinical staff to review the updated protocols to ensure alignment with current best practices. This is a step towards sustainability in promoting safe and effective antimicrobial use.





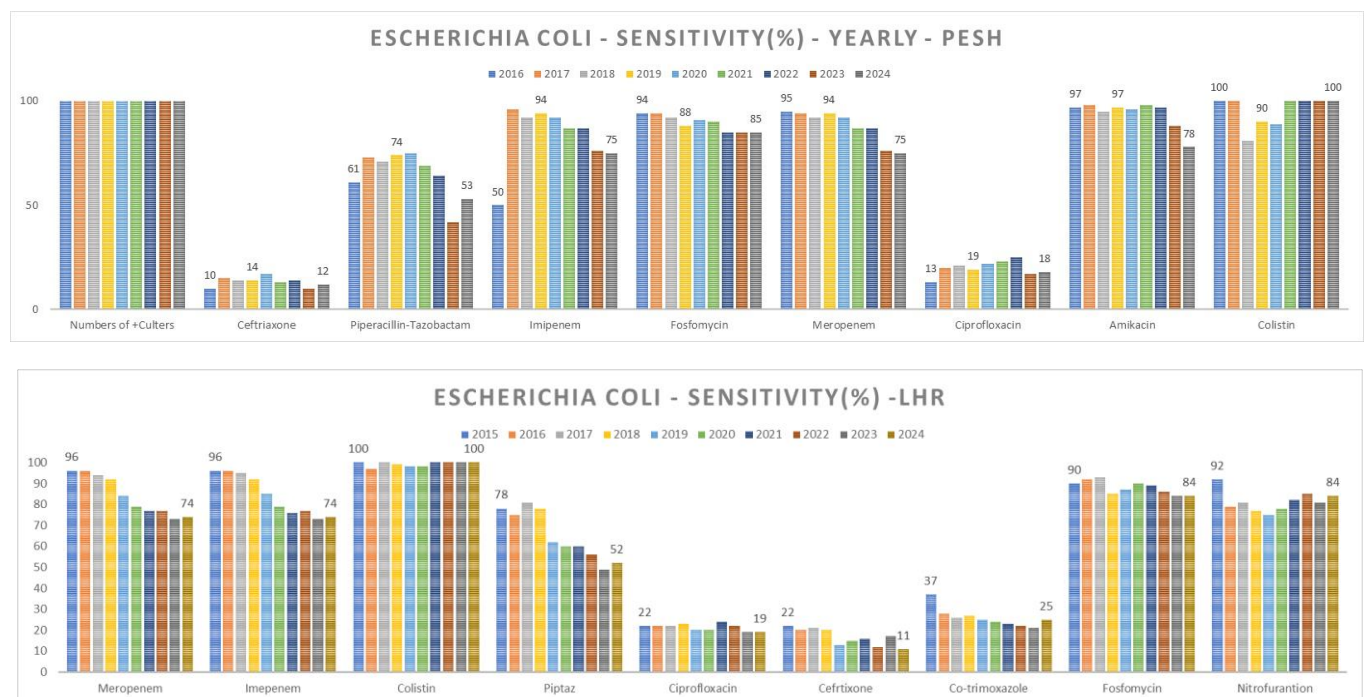
## Antibiogram Update: Quarterly Insights for Safer Prescribing

At SKMCH&RC, the Antibiogram Report is reviewed quarterly to provide up-to-date insights on local antimicrobial resistance patterns. This essential tool guides clinicians and pharmacists in selecting effective empiric antibiotic therapy while supporting antimicrobial stewardship efforts.

Key Updates Include:

- Current susceptibility trends for priority pathogens
- Data-driven guidance for ICU, oncology, and high-risk areas
- Reinforcement of responsible antibiotic use aligned with JCI standards

Jointly developed by the Pharmacy and Microbiology Departments, the antibiogram ensures data-driven decision-making and safer, targeted prescribing.



### Takeaway:

Use the quarterly antibiogram to stay aligned with best practices in antimicrobial therapy and improve patient outcomes.

## ASP Monitoring Tools in Action

At SKMCH&RC, Antimicrobial Stewardship is supported by key monitoring tools:

- DDD (Defined Daily Dose) – Tracks antibiotic consumption trends
- DOT (Days of Therapy) – Measures actual patient antibiotic exposure
- DUR (Drug Utilization Review) – Assesses appropriateness of antibiotic use



These tools help optimize therapy, reduce resistance, and support data-driven interventions in line with ASP and JCI standards.

## Medication Reconciliation: A Critical Safety Check at Every Transition

Medication reconciliation is a structured process that ensures accuracy and continuity in a patient's medication regimen during every transition within the healthcare system—whether at admission, transfer, change in care level, or discharge. It involves systematically comparing the patient's current medications with new orders to identify and resolve discrepancies such as omissions, duplications, incorrect dosages, or potential drug interactions.

Aligned with **Joint Commission guidelines**, this practice is a vital component of patient safety, helping to reduce medication errors and improve therapeutic outcomes. Incorporating medication reconciliation at all key points of care ensures a safer, more coordinated treatment journey for every patient.

The accuracy of medication orders is critically dependent on a thorough and precise **medication reconciliation** process. By ensuring accurate medication histories at each transition of care, reconciliation plays a direct role in enhancing **patient safety** and minimizing the risk of readmissions or therapeutic failures.

A robust reconciliation process:

- **Prevents duplication and harmful drug interactions**
- **Maintains continuity of chronic therapies**
- **Supports informed and safe clinical decision-making**



As a best practice aligned with JCI standards, accurate reconciliation is not just a clinical task—it is a patient safety imperative that strengthens the quality of care across the healthcare continuum.

At SKMCH&RC, this is embedded into our HIS (Hospital Information System) workflow and actively practiced at multiple patient care junctures, including:

- Registration
- Admission/readmission
- Clinic & chemo bay
- Change in unit, level of care, or healthcare provider
- Discharge

Medication orders are instructions written by a licensed healthcare provider for the administration of drugs. These include specific details such as:

- Drug name
- Dose
- Route of administration
- Frequency
- Duration
- Indication

### Pharmacists: Stewards of Medication Safety

At **SKMCH&RC**, pharmacists play a pivotal role in ensuring accurate medication reconciliation and safe transitions of care. Their efforts are focused across three key domains:

- **Clinical Oversight** - Resolve discrepancies between home and hospital medications. Verify and document Patient's Own Medications (POMs).
- **System Integration** - Lead policy development for reconciliation, Embed documentation in the Hospital Information System.
- **Education & Engagement** - Train staff on reconciliation practices. Educate patients on medication use at discharge

Through these actions, pharmacists strengthen patient safety and uphold the integrity of medication management.



## Radiopharmaceuticals at SKMCH&RC: Precision, Safety, and JCI Alignment

Radiopharmaceuticals are a distinct class of medications that combine radioactive isotopes with pharmaceutical agents to diagnose and treat various diseases—most notably in oncology, cardiology, and neurology. Administered in small, controlled doses, they enable precise imaging and targeted therapy, aiding in early diagnosis, staging, and personalized treatment.

At **SKMCH&RC**, these agents are integral to advanced nuclear medicine services such as PET-CT, SPECT, and targeted radionuclide therapy. Their use demands meticulous preparation, interdisciplinary coordination, and strict adherence to safety protocols.

In alignment with **Joint Commission International (JCI)** standards, our radiopharmaceutical processes emphasize medication safety, staff competency, and radiation risk management.

### Key Safety Practices Include:

- **Written Procedures:** Preparation and dispensing follow established protocols aligned with clinical and regulatory standards.
- **Qualified Personnel:** Handled by trained pharmacists, nuclear medicine technologists, or physicians.
- **Controlled Environment:** Sterile, well-lit facilities designed to reduce contamination risks.
- **Secure Storage and Transport:** Maintains drug stability and radioactivity until administration.
- **Clear Labeling:** Each dose is labeled with the drug name, dosage, expiration date, and radiation warning symbol.

Through these measures, SKMCH&RC ensures the highest standards in nuclear medicine—promoting patient safety, operational excellence, and full JCI compliance.





## BUD vs. Expiry: JCI-Compliant Practices in Sterile Compounding

In sterile compounding, assigning a **Beyond-Use Date (BUD)** is critical for patient safety. Unlike manufacturer expiration dates, the BUD—required under **USP <797>** and emphasized by **JCI standards**—is determined by compounding personnel based on sterility, stability, and storage conditions.

The BUD starts from the time of preparation and must reflect the **shorter of the chemical stability or sterility limit**. Factors such as aseptic technique, ingredient type, container integrity, and storage environment must be considered.

It's important to **differentiate BUD from hang time**: BUD relates to how long a product can be stored before use, while hang time refers to how long it can be infused. Confusing the two may lead to unsafe practices.

### Key Reminder:

Default infusion durations (like 24 hours) may be extended if supported by product data and institutional policy—always ensure alignment with safety standards.



### Takeaway:

Assigning accurate BUDs and distinguishing them from hang time are essential steps in maintaining sterile product safety and JCI compliance. For guidance, consult your pharmacy department.

## Safe Drug Administration: A Cornerstone of Patient Safety

Safe drug administration is fundamental to delivering high-quality, error-free patient care. Aligned with Joint Commission International (JCI) standards, every step in the medication administration process must be deliberate, verified, and patient-centered.

### Core Safety Principles:

- The “Five Rights”: Right patient, right drug, right dose, right route, right time
- Double-Check High-Alert Medications: Including chemotherapy, insulin, anticoagulants, and electrolytes
- Barcode Medication Administration (BCMA): Enhances accuracy and traceability
- Clear Communication: Avoid abbreviations that can be misread
- Patient Identification: Always verify using two identifiers (e.g., name and MR number)
- Documentation: Record administration in real-time to maintain continuity and accountability

JCI emphasizes that medication administration is not just a task—it is a clinical responsibility requiring vigilance, critical thinking, and interprofessional coordination.

### Safe Drug Administration: JCI-Based Best Practices

At SKMCH&RC, medication administration is a critical step in patient care, guided by **Joint Commission International (JCI)** standards to ensure safety, accuracy, and accountability.

### Before Administration, Always:

- Verify **patient identity** using two identifiers.
- Ensure the **medication matches the order** (right drug, dose, time, frequency, and route).

- **Inspect visually** for particulates, discoloration, or damage.
- Confirm the **medication has not expired** and **no contraindications exist**.
- Administer at the **prescribed time and by the correct route**.
- **Discuss any concerns** with the prescribing physician or care team before proceeding.

#### **Additional Safety Measures:**

- Document each dose in the medical record immediately.
- **Inform patients or families** about potential side effects before starting new medications and give them the opportunity to ask questions—document this education.
- For **radioactive pharmaceuticals**, verify the dose is within 20% of the prescribed amount or falls within the prescribed range.

#### **Takeaway:**

Every dose matters. Safe administration protects patients, reduces errors, and upholds the integrity of care delivery. Let's remain committed to administering medications safely—every patient, every time.

*Handle With Care: Safe Drug Administration Made Simple!*

### **Self-Administration of Medications: Not Permitted at SKMCH&RC**

In alignment with Joint Commission International (JCI) standards, hospitals must have defined policies governing the self-administration of medications by patients or their families. These policies include assessing patient competence, providing education, and documenting each step in the medical record.

However, at Shaukat Khanum Memorial Cancer Hospital & Research Centre (SKMCH&RC), self-administration of medications is not permitted. All medications—including those brought from home (Patient own medications)—are handled and administered strictly by authorized clinical staff to ensure patient safety, accuracy, and compliance with institutional protocols.

This policy:

- Minimizes risk of dosing errors and drug interactions
- Ensures full clinical oversight and documentation
- Reinforces safety and accountability in medication use

Patients and families are encouraged to share complete medication histories, but the preparation, storage, and administration of all drugs remain the responsibility of trained healthcare professionals at SKMCH&RC.

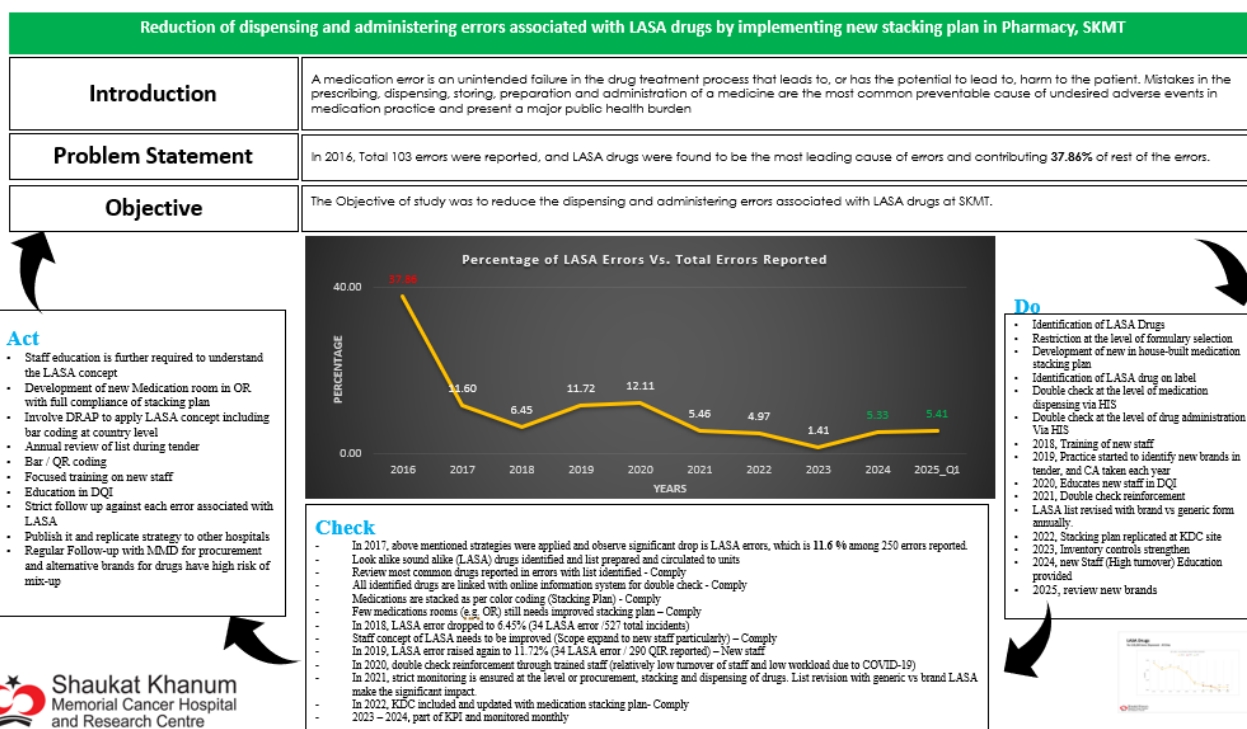


## Medication Safety Initiatives at SKMCH&RC

As part of our commitment to patient safety, SKMCH&RC continues to implement targeted medication safety projects focusing on high-risk areas:

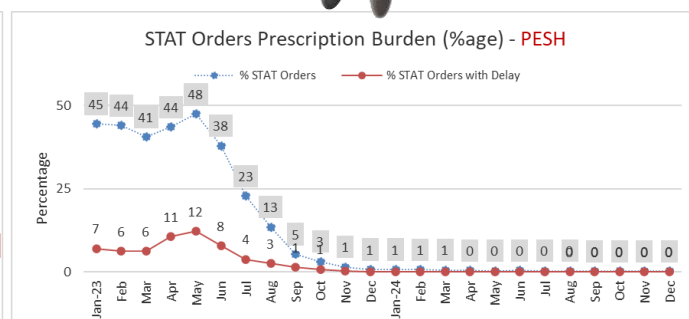
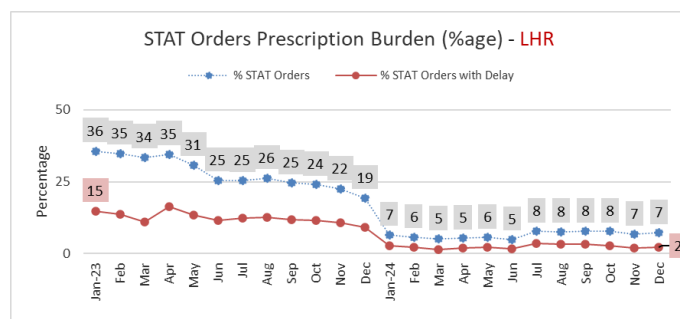
### 1. LASA (Look-Alike Sound-Alike) Medications

- Standardized labelling and storage
- Tall-man lettering and color-coded alerts
- Staff education to minimize selection errors



### 2. STAT Medications Management

- Streamlined workflows for timely dispensing and administration
- Prioritized processing in the pharmacy system
- Real-time tracking and documentation



These initiatives align with JCI safety goals and strengthen our safe medication use practices across all care settings.

## Medication Monitoring & Pharmacy Interventions: Supporting Safer Care at SKMCH&RC

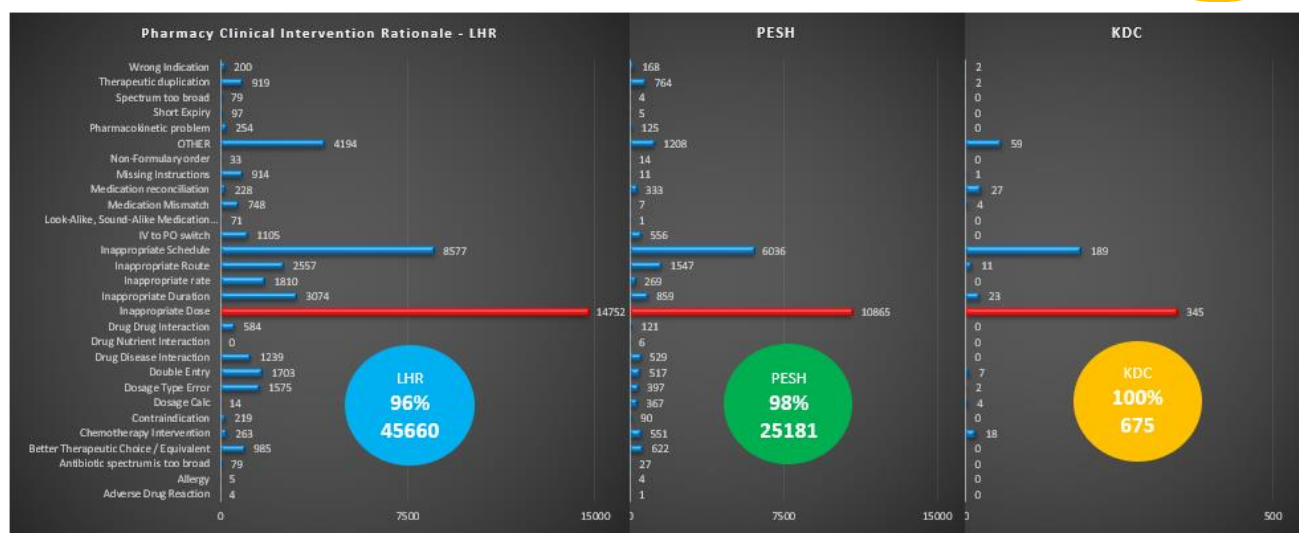
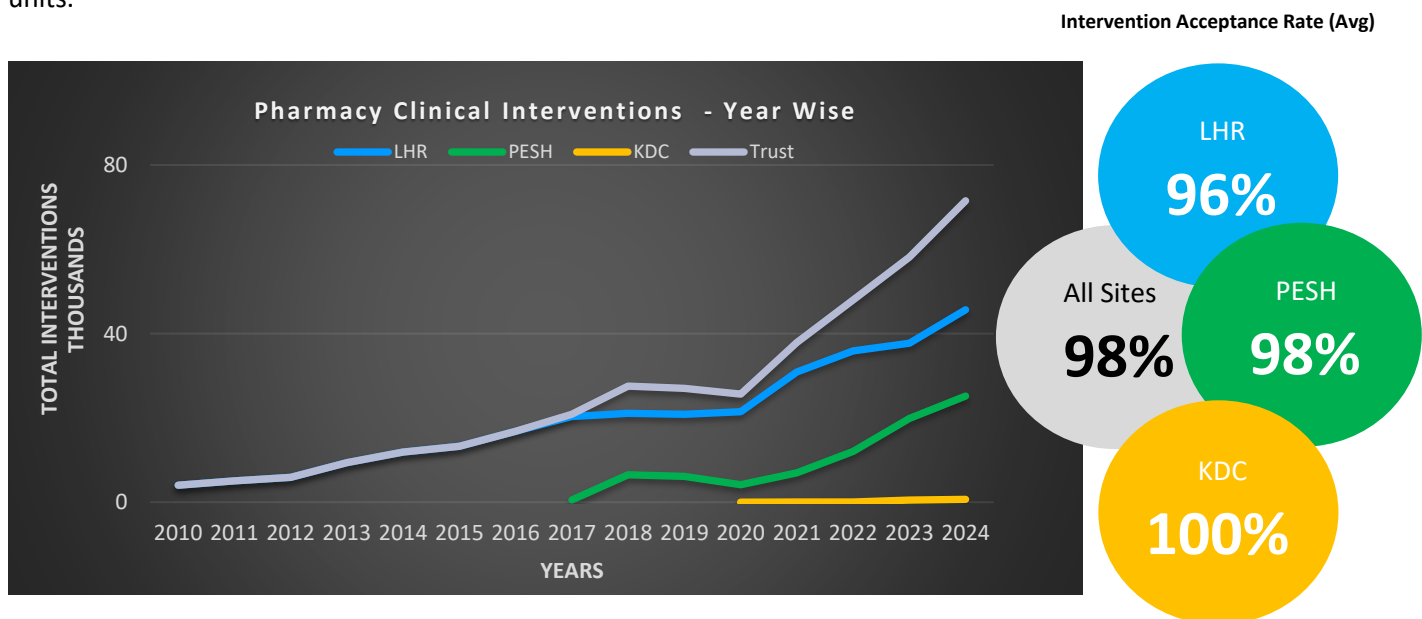
At SKMCH&RC, continuous **medication monitoring** and proactive **clinical pharmacy interventions** are central to improving therapeutic outcomes and reducing medication-related risks. In line with **Joint Commission International (JCI)** standards, pharmacists play a key role in identifying, preventing, and resolving drug therapy problems across all stages of patient care.

### Key Responsibilities of Clinical Pharmacists:

- Monitor patient response to therapy and lab values
- Adjust dosing in renal/hepatic impairment or based on therapeutic drug levels
- Identify potential drug interactions, duplications, or contraindications
- Recommend safer alternatives, dosage adjustments, or route modifications
- Document interventions in the patient's medical record and communicate with the care team

These interventions are **evidence-based, patient-specific**, and aimed at optimizing efficacy while minimizing harm. JCI emphasizes the need for medication monitoring systems that are integrated, timely, and collaborative—ensuring accountability and continuity of care.

**Impact at SKMCH&RC:** Pharmacy-led clinical interventions have significantly improved prescribing practices, reduced adverse events, and supported safer, individualized treatment plans across oncology and general care units.





## Adverse Drug Reaction (ADR) Monitoring: Enhancing Patient Safety at SKMCH&RC

At SKMCH&RC, Adverse Drug Reaction (ADR) monitoring is a vital part of our medication safety strategy and is fully aligned with Joint Commission International (JCI) standards. Early detection, prompt reporting, and active follow-up of ADRs help safeguard patients and improve overall quality of care.

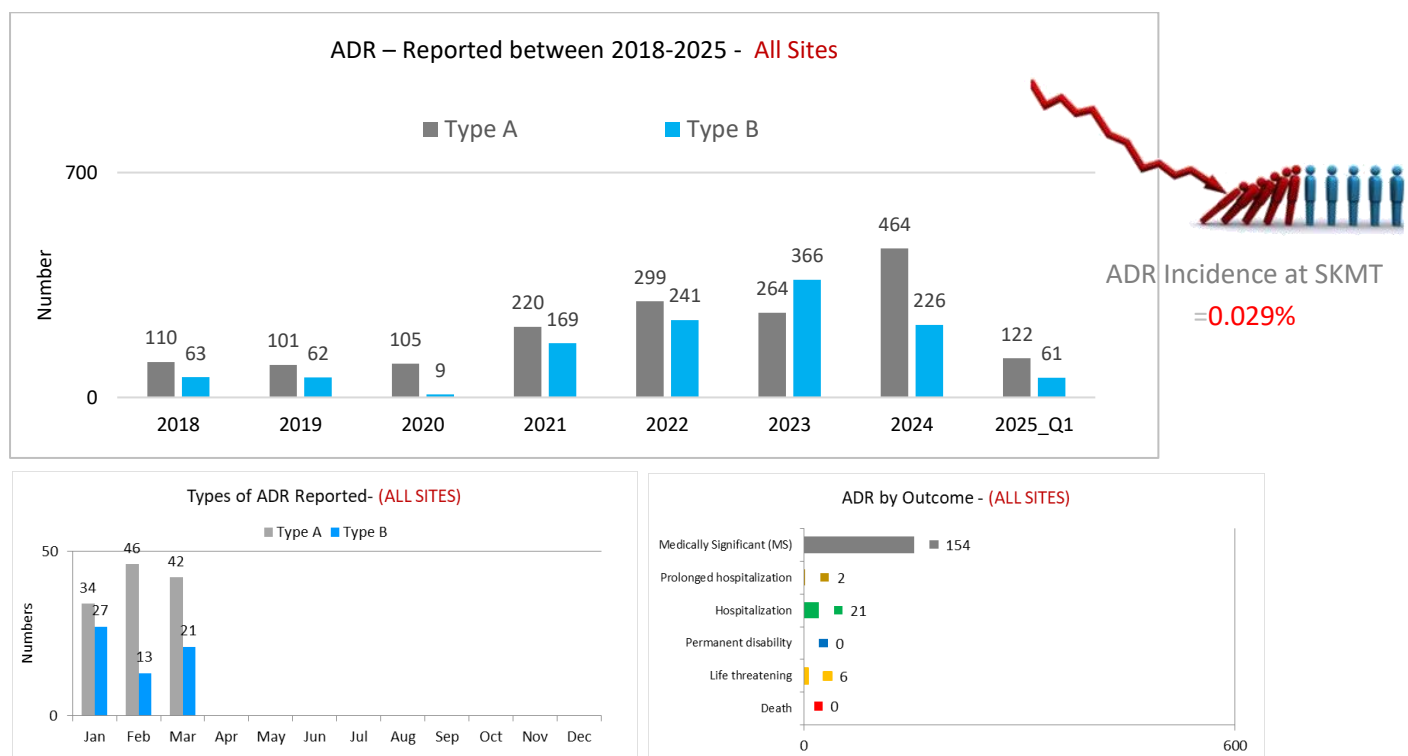
Our ADR Monitoring Process Includes:

- Systematic identification and reporting of suspected ADRs by all healthcare staff
- Pharmacist-led evaluation, documentation, and causality assessment
- Timely communication with prescribers and care teams for action
- Periodic trend analysis to identify high-risk drugs and vulnerable populations
- Education and feedback to clinical teams to prevent recurrence

JCI requires hospitals to establish a structured medication monitoring system that includes ADR reporting, investigation, and follow-through. Each ADR report is analyzed for contributing factors and is used to drive quality improvement.

At SKMCH&RC, pharmacy-led ADR surveillance has helped:

- Dedicated pharmacovigilance (PV) committee to update P&TC, which strengthen PV.
- Detect and manage serious drug reactions
- Conducts a root cause analysis of data when adverse drug event patterns or undesirable trends occur.
- Promote safe prescribing habits and informed clinical decisions



### Takeaway:

ADR monitoring is not just a compliance requirement—it's a shared commitment to safer, smarter patient care.

## Medication Errors & Near Misses: A Learning Culture at SKMCH&RC

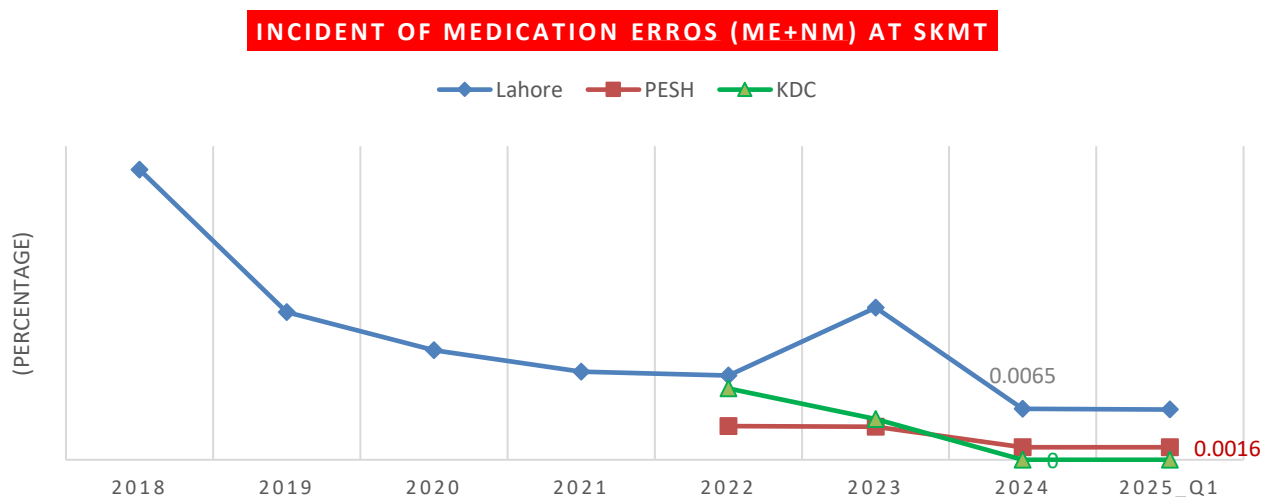
At SKMCH&RC, we are committed to a non-punitive, system-based approach to managing medication errors and near misses, fully aligned with Joint Commission International (JCI) standards.

The hospital adopts standardized definitions and has established written procedures for:

- Identifying and reporting medication errors and near misses
- Investigating incidents, developing action plans, and tracking follow-up
- Assigning accountability for review and resolution
- Performing root cause analysis when patterns or high-risk trends are detected

All reports are tracked and analysed to detect recurring issues and to drive continuous improvements in medication safety. These insights inform process changes, staff training, and policy updates to prevent recurrence.

At SKMCH&RC, every near miss is viewed as an opportunity to strengthen systems, protect patients, and foster a culture of safety and transparency.



### Takeaway:

Medication safety is everyone's responsibility. Report. Learn. Improve.



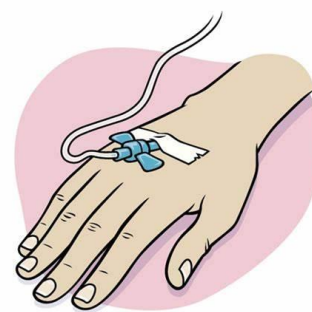
## Extravasation: Preventing Tissue Injury Through Safe Medication Practices

Extravasation refers to the accidental leakage of a vesicant or irritant medication from a vein into surrounding tissue during intravenous (IV) administration. This can result in pain, inflammation, tissue necrosis, or long-term damage if not recognized and managed promptly.

High-risk medications include chemotherapy agents (e.g., anthracyclines, vinca alkaloids), hyperosmolar solutions, and certain antibiotics or electrolytes.

At SKMCH&RC, prevention and early detection are key priorities. Safe administration practices are reinforced through:

- Proper vein selection and secure IV access
- Frequent monitoring during infusion
- Immediate response protocols for suspected extravasation
- Staff training on identification and first-aid management
- Clear labeling and handling of high-risk agents by pharmacy teams



Pharmacy's Role:

- Flagging vesicants and irritants on labels
- Providing antidotes or supportive agents (e.g., hyaluronidase, dexrazoxane)
- Educating clinical staff on dilution, infusion rates, and risk mitigation

### Takeaway:

Extravasation is preventable. Vigilance, communication, and adherence to safety protocols can protect patients from serious harm.

## Sharing Is Caring

### 3rd International Medication Safety Symposium – SKMCH&RC

The Department of Pharmaceutical Services at Shaukat Khanum Memorial Trust (SKMT) proudly hosted the 3rd International Medication Safety Symposium on January 11, 2025, at SKMCH&RC, Peshawar—a landmark event themed “*The Power of Learning Together.*”

This high-impact symposium brought together global leaders, healthcare professionals, and medication safety experts to explore cutting-edge practices, implementation science, and risk assessment strategies in the pursuit of safer medication use.

Key highlights included:

- Insightful sessions on global medication safety trends
- Real-world applications of safety assessment methods
- The first-ever IPPR Residents Meet & Greet in Pakistan, fostering cross-institutional collaboration

The event served as a powerful platform to exchange ideas, share learning, and reinforce the collective commitment to medication safety across disciplines and borders.



## Recognition for Excellence in Pharmacy Leadership

We are proud to announce that Mr. Omar Akhlaq Bhutta, Director of Pharmacy at Shaukat Khanum Memorial Trust (SKMT), has been honored with the Recognition Award by the University of the Punjab.

This prestigious award acknowledges his 25 years of dedicated service and exceptional contributions to the advancement of hospital pharmacy practice in Pakistan. Mr. Bhutta's leadership, vision, and unwavering commitment have significantly shaped the profession, setting new benchmarks in patient safety, clinical excellence, and healthcare innovation.

SKMT celebrates this remarkable achievement and extends heartfelt congratulations on this well-deserved recognition.




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*"The harbinger of pharmacy leaders"*

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## Pharmacist Alliance for Continued Excellence (PACE) Summit 2025

### Keynote Recognition for Pharmacy Leadership

We are delighted to share that Mr. Omar Akhlaq Bhutta, Director of Pharmacy at SKMT, was honored as the keynote speaker at the prestigious PACE 2025 Summit.

Delivering a powerful address on *“Interprofessional Synergy: A Paradigm Shift in Reducing Hospital Mortality and Morbidity,”* Mr. Bhutta emphasized the transformative impact of collaborative healthcare models in improving patient outcomes. His session drew a distinguished audience of pharmacy professionals from across the country and sparked vibrant discussions on integrating interprofessional strategies into routine clinical practice.

Mr. Bhutta’s through leadership continues to inspire and elevate pharmacy-led initiatives across the healthcare spectrum, reinforcing SKMT’s commitment to excellence and innovation.



### Championing Interprofessional Collaboration

Mr. Omar Akhlaq Bhutta, Director of Pharmacy at SKMT, served as a panelist at the HCIC Conference 2025 hosted by UMT, where he shared insights on Interprofessional Education (IPE) in healthcare.

He emphasized IPE’s role in strengthening teamwork, enhancing communication, and improving patient outcomes. His perspective inspired healthcare leaders to adopt collaborative approaches for delivering safer, more effective care.



### 21st IPCE: Shaping the Future of Pharmacy

The 21st International Pharmacy Conference & Exhibition (IPCE), held in Lahore from Dec 29, 2024 to Jan 1, 2025, focused on *“Empowering Future Generations of Pharmacists.”*

SKMT’s Department of Pharmaceutical Services led a specialized workshop on hospital pharmacy practice, conducted by Mr. Omar Akhlaq Bhutta. The session highlighted key innovations, challenges, and best practices, reinforcing SKMT’s role in advancing clinical pharmacy in Pakistan.



## Pharmacist Achievements at SKMCH&RC

SKMCH&RC pharmacists continue to excel in clinical innovation, safety leadership, and national recognition—driving progress in patient-centered care.

### International Certification Achievement

We proudly congratulate **Ms. Saleha Nadeem**, Clinical Pharmacist at SKMCH&RC, Lahore, on successfully earning the ASHP Compounded Sterile Preparations Certificate—a prestigious recognition by the American Society of Health-System Pharmacists (ASHP).

This certification reflects her commitment to excellence in sterile compounding and adherence to the highest international standards in pharmacy practice.



### International Certification Achievement

Congratulations to **Mr. Irfan Raza**, Assistant Manager Clinical Pharmacy at SKMCH&RC, Lahore, for successfully completing the ASHP Pediatrics Professional Certificate—awarded by the American Society of Health-System Pharmacists (ASHP).



### Poster Presentation Award – HCIC Conference 2025

Congratulations to **Mr. Adeel Siddiqui**, Assistant Manager Pharmacy, and Ms. Saba Ashraf for winning 3rd Prize in the poster competition at the HCIC Conference 2025, hosted by UMT.

Their poster, titled *“Assessment of Knowledge, Attitude, and Practices Regarding Storage and Disposal of Unused and Expired Medicines Among Community Pharmacists,”* addressed key gaps in pharmaceutical waste management and emphasized opportunities for improvement in community pharmacy practices.

This recognition reflects SKMCH&RC’s ongoing commitment to advancing pharmacy-led research and environmental responsibility.



### Pharmacist Publications and Recognition

We are pleased to share that pharmacists at SKMT have recently contributed to several notable international publications, reflecting the department’s commitment to advancing pharmacy practice through research and scholarship.

Mr. Omar Akhlaq Bhutta, Director of Pharmacy, SKMT, was acknowledged by the ASHP Midyear Clinical Meeting & Exhibition 2024 as a reviewer for session proposals, posters, and case studies. His contribution was recognized in the American Journal of Health-System Pharmacy (AJHP), Volume 81, Issue 20, October 2024.



2024 ASHP Midyear Clinical Meeting & Exhibition			
SESSION PROPOSAL, POSTER, AND MANAGEMENT CASE STUDY REVIEWERS		Acknowledgments	
Megan Adelman	Stephen Davis	Linda Gordon	Indrani Kar
Glen Albracht	Joseph DeAssis	Allison Gorseth	Michael Kendrach
Mark Albright	Audra DeChristopher	Rena Gosser	Andrew Kessell
Jeffrey Anderson	Brian Dee	Robert Granko	Patricia Kienle
Scott Anderson	Jeremy DeGrado	Alexander Gray	Karen Kier
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Charity Anicete-Pena	Travis Dick	Melissa Gregorio	Amy knoblock
Kali Autrey	Bethany DiPaula	Ben Gross	Joanne Kowiatek
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