HB 1950 – RELATING TO THE PRACTICE OF PHARMACY

Chair Mizuno, Vice Chair Kobayashi, and members of the committee:

My name is Carolyn Ma, and I am a registered pharmacist and the Dean for the UH Hilo Daniel K. Inouye College of Pharmacy (DKICP). The college fully supports this bill that will expand certain areas of pharmacy practice for registered pharmacists.

Pharmacists are considered the drug therapy experts among health care professions. Training of pharmacists includes foundational sciences (2-4 years) with advanced professional years of study (4 years) that include extensive training in pharmacology, medicinal chemistry, disease pathophysiology and drug therapeutics. In relation to HB 1950, the DKICP curriculum certifies, via the American Pharmacists Association (APHA), training in immunization administration (first year) and smoking cessation (2nd year). Students are expected to apply these skills in their experiential rotation courses throughout the rest of their training and also in numerous community health screening events. Courses in toxicology, pain management, opioid abuse syndrome, contraception, reproductive pharmacology and women’s health, and pediatrics are taught in the 3rd professional year. Education provided throughout the four-year professional curriculum also focuses on medication assessment and therapeutic recommendations via related laboratory tests and subjective/objective findings related to disease and drug therapy. All U.S. accredited (ACPE) colleges of pharmacy offer similar curriculums.

Successful completion of the curriculum results awarding of the terminal degree, the Doctor of Pharmacy (PharmD) and hence eligibility to sit for the national pharmacy licensing exam (NABPLEX). Successful passing score of the NABPLEX, allows an individual to practice as a Registered Pharmacist (RPh), a profession that is regulated by the Dept. of Commerce and Consumer Affairs (DCCA) through a state Board of Pharmacy.

In addition, many pharmacy school graduates will continue on to post-graduate residency programs for further clinical training in general pharmacy practice as well as in specialty areas that include but are not limited to ambulatory care, community
pharmacy, oncology, nutrition, nuclear medicine, psychiatry and mental health, and critical care medicine. Specialty practice pharmacists may also be board certified by the Board of Pharmacy Specialties, an autonomous division of the APHA. This extensive education fully supports the additions outlined in the bill in Hawai‘i Revised Statutes (HRS) 461 and allows for pharmacists to practice more fully to their education and training.

Pharmacists are the most accessible community health care professionals and work with health care colleagues in a number of different practice areas such as in acute care hospitals, ambulatory care clinics and long term care facilities. Health care colleagues such as physicians, nurses, psychologists, naturopaths, dieticians, public health professionals rely on pharmacists as a vital source of drug therapy expertise and as partners in providing safe, effective and cost efficient drug therapy management for best practice patient care.

Thank you for the opportunity to testify on behalf of HB 1950.