

Pharmacist, Say What??

Let's set the scene. At a medical conference in January in Boca Raton, the palm trees outside the window were swaying gently in the breeze, easily seen from the conference room. Filled with about 150 practitioners from around the world, 95% were MDs; cardiologists, gastroenterologists, other specialists. 5% were pharmacists.

Despite the tempting view, the group was focused on the presenter sharing the latest in the innovative field of metabolic medicine. All of us were familiar with the topic and actively practicing in this area. The speaker divided the room into small groups of twenty to review patient histories and labs, then report back to the whole group on a treatment plan.

Fast forward ahead. The room gradually quiets as several of the small group representatives take the stage to share their plan. What a treat - one of the speakers is a pharmacist. I'm enjoying the vistas and the engaging topics, when the pharmacist begins his presentation in a matter-of-fact, non-jovial tone "You'll have to excuse me. I'm slow, because I'm only a pharmacist".

The sun seems to fade away and the ocean waves become still as I aim to grasp what was just said. Was he joking? No one laughed. I certainly didn't. And then I realized, he was serious. Just as distressing, few in the room seemed startled or fazed at all by the comment. Not knowing what to do, I manage to muster a faint "heyyyy!".

This series of events got me thinking about a pharmacist's self-image.

The Wikipedia definition says that self-image may consist of three types:

1. Self-image resulting from how the individual sees himself or herself.
2. Self-image resulting from how others see the individual.
3. Self-image resulting from how the individual perceives others see him or her.

But is the self-image represented by the pharmacist above due to how (1) he sees himself, (2) reinforcement from other practitioners or (3) paranoia about the long-standing stigma of the medical hierarchy? Or, does it even matter?

Although I hate to admit it, an episode of Millionaire Matchmaker recently featured a pharmacist as a key prospect for the 'millionaire'. When asked her job, she replied "I count pills". Even though this character was questionable from the start (have you seen the show?), I'm sadly confident that this is not the first time you've heard this response from a colleague.

Within our own profession, we may see disparity among hospital-community-industry or rural-urban settings, segregating ourselves without meaning to do so.

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It's also not uncommon for a pharmacist to refer to a doctor as 'the one in charge', but even that is evolving. Many provinces now support prescribing rights for pharmacists and a collaborative care setting. More pharmacists are taking on purely clinical roles. And other practices like ours even get referrals from multiple doctors throughout the province.

As pharmacists, we're all individuals with unique skills.

We're at various stages in our career. We have different clinical experiences and different practice environments. But it is these differences that allow us to share and learn from each other within our profession. Since every profession houses these components, these differences can actually unite us with colleagues in other disciplines as well.

Although it seems that at times we can be our own greatest enemy, we are collectively our greatest asset. When we band together, we strive for respect and recognition of the value any pharmacist provides. When we come together as pharmacists, we can celebrate our diverse skills while communicating a common message: the realization of our potential to impact patients' lives as a critical component of the health care team.

Let's use the Manitoba Pharmacy Conference to restore that sunrise and continue to bring the breeze back into the sails of the pharmacist profession.



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For complete details on the conference go to the CAPT website at www.capt.ca and click on the PDC tab.