

OPTA Review

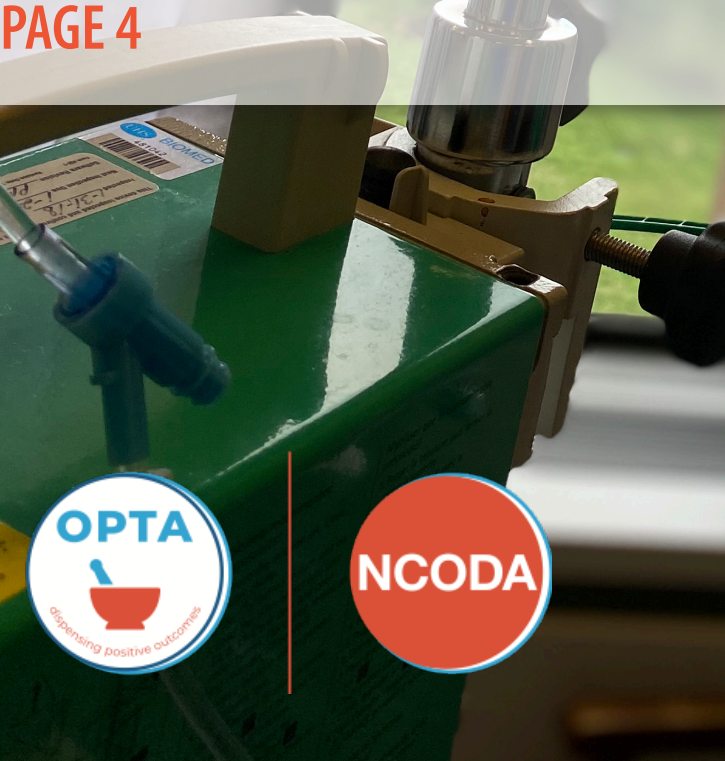
THE MONTHLY NEWSLETTER OF THE ONCOLOGY PHARMACY TECHNICIAN ASSOCIATION | MARCH 2022

TECHNICIAN IN FOCUS: SHEFENA GEBREMESKEL, CPHT FROM BOSTON MEDICAL CENTER SHARES HER "BEST PRACTICES" WITH OPTA

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NCODA RESOURCES: READ WHY THE PRACTICE SCREENING TOOLKITS WERE CREATED AND THE IMPORTANCE OF EARLY DETECTION

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Infusion room at Virginia Cancer Institute

WELCOME

SPRINGTIME IS COMING! ENCOURAGING WORDS TO EMBRACE SOMETHING NEW

BY VONDA MCCLENDON, CPhT

TEXAS ONCOLOGY

Hello everyone! Spring is right around the corner and that means a time of renewal and rejuvenation. For many, spring symbolizes a celebration of brighter and longer days on the horizon. Flowers begin to bloom, and animals awaken and the whole world seems to come to life again.

I'd like to encourage everyone to take this time to enjoy the moments spring will provide. Take a walk in the park, go to the zoo, or just standing in the good ol' sunshine can immediately elevate a person's mood and sense of wellbeing. It's wonderful to try something new. Speaking of new, getting involved with OPTA is a great way to put

your career on a new path. OPTA supports oncology pharmacy technicians and its goal to elevate our profession.

OPTA provides a wealth of opportunities to get involved, such as monthly meetings, hot topic discussions, networking, and continuing education. Each month OPTA highlights a Technician in Focus in the oncology pharmacy setting and this could be you! It's time to spring into a new direction. OPTA is for oncology pharmacy technicians by oncology pharmacy technicians!

For more information on how to get involved, please contact Taryn Newsome at Taryn.Newsome@ncoda.org

SCAN QR CODE FOR MORE INFORMATION



FEBRUARY OPTA MEETING RECAP

BY TARYN NEWSOME, CPhT

OPTA COORDINATOR | NCODA

WELCOME: OPTA's February meeting began with OPTA Leader Brandi Gudwien, CPhT reading the mission and vision statements as well as OPTA's primary goals. Then OPTA Coordinator, Taryn Newsome, CPhT welcomed all new members to the meeting and then shared NCODA and OPTA updates. Newsome reminded the OPTA members to mark their calendars for NCODA's International Monthly Webinar date and time. Newsome announced that registration for the 2022 NCODA Spring Forum would begin at the beginning of March and to be on the lookout for details.

In honor of National Cancer Prevention Month, Manny Alfonso, PharmD from Baptist Health South Florida presented on NCODA's Practice Screening Toolkits and the importance of why the toolkits were created (to read more go to page 4)

HOT TOPIC DISCUSSION: The conclusion of February's meeting began with the hot topic

discussion of REVLIMID® going generic. Led by Newsome, slides were shared that explained available doses in the U.S and Canada and the REMS® program. There is also a platform to help provide and assist prescribers and pharmacists with qualification requirements for patients called Reddy2Assist Platform®.

Throughout the discussion, we discussed how some practices have already started creating SOP's. Brandi Gudwien, CPhT brought up a good point during the discussion about pharmacy networks and which mail order pharmacies will have access to the generic drug.

A huge take-a-way from the discussion was to begin having conversations with the patients early. Patients are often leery of switching from brand to generic drugs especially if they are tolerating the medicine and their disease is under control. Rebecca Garland, RPhT from Florida Cancer Specialists stated that they have already begun having conversations with patients and informing them of change.

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DRUG UPDATE: SEE PAGE 5

OPTAReview

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OPTALeaders

- Linda Grimsley, CPhT
- Emily Zimdars, CPhT
- Brandi Gudwien, CPhT
- Teri Roberts, CPhT
- Sara Eisenhart, CPhT
- Vonda McClendon, CPhT
- Alicia Barnes, CPhT

OPTA Opportunities

MEETING PRESENTATIONS

OPTA members are invited to participate in monthly meetings by providing:

- Drug Updates
- Peer Presentations
- Technician / Practice in Focus

OTHER OPPORTUNITIES

- NCODA National Monthly Webinar
- NCODA Conferences/ Meetings

FOR MORE INFORMATION

Contact:

- Ginger.Blackmon@ncoda.org
- Taryn.Newsone@ncoda.org

OPTA Resources

NCODA DISCUSSION BOARD

<https://www.ncoda.org/discussion/pharm-tech/>

BASECAMP DOCUMENT STORAGE

<https://3.basecamp.com/3780922/reports/progress>

NCODA/OPTA WEBSITE

<https://www.ncoda.org/oncology-pharmacy-technician-association-opta/>

NEXT OPTA MEETING:

3 p.m. EST, Wednesday,
April 13th

Members will receive
a calendar invitation

TECHNICIAN IN FOCUS

SHEFENA GEBREMESKEL: POSITIVELY CONTRIBUTES QUALITY CARE TO HER PATIENTS

Name: Shefena Gebremeskel, CPhT

Practice: Boston Medical Center

How can OPTA or NCODA help you and your practice?

OPTA and NCODA empower us to take patient care to a higher level. OPTA helps keep me in alignment with current changes and updates for pharmacy technicians so I can help support my patients the best way possible. NCODA is a one-stop destination that helps me with new drug updates for oncology and a great networking opportunity with others in the hematology/oncology field.

Explain your current role at your practice: My role is very robust because my team and I help manage medication adherence and compliance. I also provide assistance to patients with high copays or who lack insurance coverage by finding copay assistance through available foundations or free drug programs.

What do you enjoy most about your current position? Working at Boston Medical Center allows me to positively contribute to the quality of care provided to our patients by assisting them with managing their care and making sure there are no issues with patients being able to get their treatments. I also enjoy learning something new every day because drugs and therapies are always changing.

What do your day-to-day responsibilities include?

I fill prescriptions for patients that are due for maintenance for oral chemo drugs and mail medications to patients that prefer not to come in for refills. I obtain prior authorizations for patients that are new starts or have expired PAs. I also enroll patients into patient assistance programs and manage their refills. I also assist patients



Shefena Gebremeskel

that come into the pharmacy to pick up medications.

Do you assume any specialized duties/responsibilities from time-to-time? Enroll new or existing patients into patient assistance programs because of copay or income issues.

Do you have any "best-practices" that you use at your practice that you would like to share with OPTA members? Our best practice is to always put the patient care first. Patient safety and an all-around passion for

understanding that the care they are receiving is essential to their well-being. Our motto at BMC is "Exceptional Care without Exception" so I truly believe my team embodies that because we make sure to give all our patients 100%.

What advice do you have for technicians who are new to oncology/hematology field? Every day that you work with an oncology/hematology patient, is another opportunity to make their lives better, which makes the job worthwhile. Be compassionate, simple kindness can help diffuse negative emotions your patients are dealing with.



NCODA'S PRACTICE SCREENING TOOLKITS: A RESOURCE CREATED TO RAISE EARLY DETECTION AWARENESS

BY MANNY ALFONSO, PharmD

BABTIST HEALTH SOUTH FLORIDA

My name is Manny Alfonso, Pharm.D. Currently, I am a first year pharmacy resident at Baptist Hospital of Miami (BHM) and I have committed to a second year of pharmacy residency training to specialize in oncology at the Miami Cancer Institute at BHM. During my fourth year of pharmacy school, I held the position as the Vice President of Community Service for the NCODA Professional Student Organization (PSO) and was one of the National Executive Board (NEB) members.

During this time, I had the opportunity to work with various student chapters across the nation to support NCODA's patient-centered initiatives. One of our most meaningful initiatives was creating the Cancer Screening Toolkits as a resource for patients and other stakeholders to utilize. Between all NEB members, we worked extensively with the PSO at the national level to develop a brochure-style handout tailored to patients. As we all know, many life-threatening cancers may be curable if detected

at an early stage.

The objective of the Screening Toolkits is to raise awareness on the importance of early detection by educating patients on when to consider screening for the top five cancer types: breast, colon, lung, prostate, and skin cancers. Essentially, the toolkits consist of easy to follow, comprehensive double-sided handouts. These handouts encompass facts on the cancer type, recommendations for who should receive screening, signs and symptoms of the disease, common risk factors, and ways to help with prevention. They are available on the NCODA's website and providers can easily print them and distribute to patients!

To access NCODA's Practice Screening Toolkits please visit the NCODA website at [NCODA.org](https://www.ncoda.org)

Lung Cancer Screening

Colon Cancer Screening

Breast Cancer Screening

Skin Cancer Screening

Prostate Cancer Screening



DRUG UPDATE

TIXAGEVIMAB & CILGAVIMAB: COVID PROPHYLAXIS TREATMENT IN ONCOLOGY PATIENTS

BY PRIYANK SHAH, PharmD
THE UNIVERSITY OF CHICAGO MEDICINE

The landscape for the treatment of SARS-CoV-2 (COVID-19) has exponentially grown from the first identified case in 2019. As treatments improved and adapted to the multiple mutations of COVID-19, vaccines have made it possible to reduce the mortality and hospitalizations. Yet, for the patients with multiple comorbidities, including immunocompromising diseases, tixagevimab and cilgavimab (Evusheld™) is an added measure to protect against infection. Evusheld™ is made up of two human anti-SARS-CoV-2 antibodies that were derived from the convalescent plasma of previously infected individuals. These two antibodies work synergistically to help neutralize COVID-19 from infecting the host. Evusheld is dosed as 300 mg of tixagevimab and 300 mg

of cilgavimab injected intramuscularly as two separate, consecutive injections. Patients that receive this medication should be monitored for 30 minutes post injections for any signs and symptoms of hypersensitivity. Commonly reported side effects include headache, fatigue, and cough. Patients with clinically significant bleeding disorders and cardiovascular diseases must take caution when receiving this medication. This precaution is due to a potential increased risk of myocardial infarctions that have been reported during clinical trials. While Evusheld™ does supply prophylactic protection against COVID-19, it not a substitution for the vaccine and administration of the COVID-19 vaccination is recommended prior to receiving Evusheld™. the solutions to the problem that were presented.

Use in Oncology Patients

Tackle

- Trial met primary endpoint of decreasing the risk of developing severe COVID19 or death by 50 percent compared to placebo
- Reduced the risk of developing severe COVID19 up to 67% if given in less than 5 days from developing symptoms

Prevent

- Long term prophylaxis
- Reducing symptomatic COVID19 by 77%
- Long term follow-up showing potential extended efficacy post 6-month trial data
- Patients included in the trial had immunosuppressive disease or taking immunosuppressive medications, diabetes, severe obesity or cardiac disease, chronic obstructive pulmonary disease, chronic kidney, and chronic liver disease.

Using EVUSHELD

● ○ ○ Administration

- Two IM injections (given at the same visit, one injection in each gluteal muscle)
- 150mg (1.5mL) tixagevimab x1 IM
- 150mg (1.5mL) cilgavimab x1 IM

● ● ○ Monitor

any adverse events for 60 minutes post dose

● ● ● Efficacy

87% relative reduction in hospitalization or death at Day 28

● ● ● ● Adverse Drug Events:

- Headache, fatigue, hypersensitivity reaction, serious cardiac event

