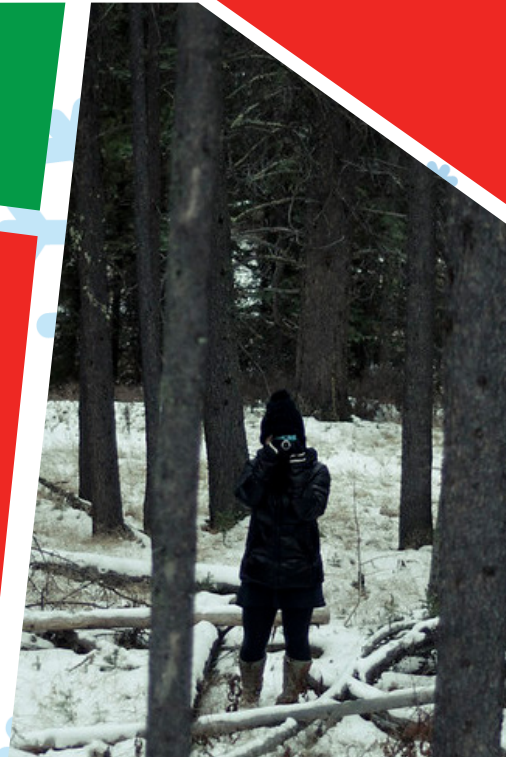


# *The Monograph*



*Featured in this issue:*

*Chocolate Chip  
Cookie Recipe*

*Rx-mas Activities*

*Family Health  
Team APPE  
Interview*

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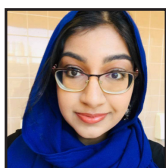
# The Monograph Team



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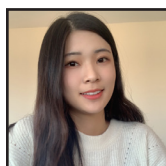
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## EDITORS' ADDRESS:

As we wind down the semester and the strange year that has been 2020, we present to you the holiday issue of The Monograph!

This issue features many ways in which you can spend your time during the upcoming holiday season, whether it be through COVID safe activities, trying new recipes, or just relaxing playing Genshin! Also included in this issue are many pharmacy related articles including the winners of the CAPSI competitions, student APPE experiences, working at a pharmacy performing COVID-19 testing, and many more.

We are also happy to present a new feature, *Pharmapride and Phriends*, where in each issue Pharmapride will address different questions submitted to them at their "Let's Talk" Submission Box. Be sure to give them a follow to see your questions in the next issue!

If all of these topics don't entice you to peruse the pages of The Monograph, we're also holding another scavenger hunt for this issue. Be sure to fill it out and submit your answers to get a UPS point as well as an entry to a raffle for 1 of 5 gift cards! Thank you to everyone who contributed this issue. Stay safe and enjoy your (at least six feet of) distance from school on your holidays following exams. We'll see you all in the new year.



*David Czosniak and Amar Deonandan*  
The Monograph Editors-in-Chief 2020-2021  
monograph@uoftpharmacy.com

# UPS Address



Hello Pharmacy and congratulations on surviving midterm season!

We've had an exciting semester so far from Orientation Week to our spooky Halloween Social to CAPSI competitions and everything in between. Most recently, we all took a much-needed break from the midterm grind to enjoy the incredible talent in our pharmacy community at Phollies. Shout-out to the amazing performers, MCs Rachel and Rafi, and Events Directors Aaron and Austin for putting together a phantastically virtual show this year!

We have also seen amazing contributions from our student leaders in the varying clubs and councils who have adapted to the virtual school year to offer numerous events to help us destress from academics and feel a little closer to our phamily during these times. Despite the challenges that this year brings, the amount of student involvement in our pharmacy community is outstanding and we look forward to seeing all the amazing initiatives coming this winter!

As the semester comes to an end and we enter final exam season, we want to remind you that you are not defined by your grades - be sure to eat, sleep, get some physical activity, and take care of yourself. Because right after exam season comes the holiday season!

Wishing you all the best for the upcoming exams and we hope you have a happy holiday season!

We look forward to seeing you again in January!



*Fabian Cretu and Samantha Cesario*  
UPS President and Vice President  
[ups@uoftpharmacy.com](mailto:ups@uoftpharmacy.com)





## CANADIAN ASSOCIATION OF PHARMACY STUDENTS AND INTERNS

### LOCAL COMPETITION WINNERS 2020



**Chelsea Alder**  
Pharmafacts 2T3 Winner



**Adam Brown**  
Pharmafacts 2T2 Winner



**Chelsea Cao**  
Pharmafacts 2T4 Winner



**Peter Zhang**  
SLC Winner



**Aline Huynh**  
PIC Winner



**Stephanie Lau**  
OTC Winner



**Laurel Liang**  
Pharmafacts 2T1 Winner

## CAPSI Corner

What an incredibly busy fall semester this has been! In October, we held our first CAPSI Race for Kids, a virtual race and fundraiser in support of Sunnybrook's Family Navigation Project, which aims to connect young people and their families who are struggling with mental illness and addiction to the help they need. Our team consisted of more than 75 UofT pharmacy faculty and students who were committed to raising money and racing for this great cause. Collectively, we covered over 750 km and raised over \$1500, and we could not be more proud of what our UofT pharmacy team has accomplished!

This November, CAPSI held our first virtual competition season! We want to extend a big thank you to everyone who participated in the competitions that took place throughout the month, which included the Student Literary Challenge, Patient Interview Competition, Over-the-Counter Competition, Guy Genest Award, and the Pharmafacts Bowl. This competition season was a huge success and it would not have been possible without the participation and engagement of all competitors. The CAPSI Council and judges were very impressed by the skills and talent demonstrated by all participants - it was definitely a rewarding experience for all!

We are excited to announce the winners of the Patient Interview Competition, Over-the-Counter, and Student Literary Challenge:

Patient Interview Competition - **Aline Huynh (2T1)**  
 Over-the-Counter Competition - **Stephanie Lau (2T2)**  
 Student Literary Challenge - **Peter Zhang (2T1)**

Peter will be representing Uof T in the National Student Literary Challenge Competition. Stay tuned for our announcement of the winner of the Guy Genest Passion for Pharmacy Award!

We excitedly welcomed the return of the Pharmafacts Bowl, our annual trivia-style competition, focused on clinical and practical pharmacy questions. In this nail-biting battle of the brains, one winner from each year was selected to win. This year's Pharmafacts Bowl winners are **Laurel Liang (2T1)**, **Adam Brown (2T2)**, **Chelsea Alder (2T3)**, and **Chelsea Cao (2T4)**.

Finally, we would like to recognize **Peter Zhang (2T1)**, who was announced as the CAPSI National Future of Pharmacy Excellence Award recipient for Summer 2020. This award was created to highlight the achievements of talented individuals in our national pharmacy student community. Peter was nominated by a peer who recognized his passionate student leadership efforts and commitment to furthering his peers' professional development. If you know a pharmacy student who is deserving of this award, be sure to keep up with CAPSI on social media to stay up-to-date on the announcement of the next round of applications for this trimesterly award.

Congratulations to all winners on your well-deserved victory. Again, thank you everyone for an amazing competition season!

♥ Your CAPSI Team

# Pharmacy Athletics

In the midst of midterms and a pandemic, pharmacy has been playing its heart out against tough teams in badminton, amazing race, spikeball, and more. Though our indoor sports have been put on a temporary hold, our teams outdoors have been doing well! Finishing off their season strong, Eddy Huang and Tommy Tran managed to pull off a series of super clean games earning them the Spikeball championship title. Congratulations boys! We would also like to give a special shout out to Christina Truong, Tiffany Song, and Lok Kan Lee, in coming so close to that intramural shirt in their Washertoss final.

Keep your eyes out for our Wellness Tracker health challenge, and be sure to keep active!

Drugs on Three,

*Jonathan Ko*  
Sr. Athletic Director  
*Cindy Tran*  
Jr. Athletic Director



**Be sure to check us out:**

Facebook: Pharmacy Athletics UofT

Instagram: @UPS Athletics

Email: upsathletics@uoftpharmacy.com



Spikeball Champions:  
Eddy Huang, 2T<sub>2</sub> (left),  
and Tommy Tran, 2T<sub>4</sub> (right)



# CSHP Interview with Lindsay Dryden

Interview conducted by Wei Wei  
CSHP UofT Communications Rep



In October, I had the wonderful opportunity to interview Lindsay Dryden over email. She is a graduate of our combined B.Sc.Pharm and PharmD program at UofT, a clinical pharmacist at St. Michael's Hospital, and a Co-Chair on the CSHP Ontario Branch Communications Committee. Let us hear her experiences and insights in clinical pharmacy and her advice for those of us aspiring to hospital practice!

## **Could you share with us your education and career background?**

I finished my undergrad at the University of Western Ontario in medical sciences. After that, I started in the B.Sc.Pharm program at UofT. In my fourth year, I enrolled in the PharmD program and graduated two years later. After graduating, I completed my hospital residency at St. Michael's Hospital. Since then I have had the opportunity to work in internal medicine, general surgery, vascular and cardiovascular surgery, cardiology, and now in the cardiovascular intensive care unit.

## **Why did you choose to practice pharmacy in a hospital, and what about it appealed to you?**

I love the role that the hospital pharmacist plays in the hospital setting. As the pharmacist, you are work-

ing with the prescribers and the care team in real time, to advocate for your patient. In addition to providing medication therapy management, the pharmacist is involved with education (both the patients and the health care team), project work, and various other activities.

## **Could you describe your main tasks and responsibilities as a clinical pharmacist at St. Michael's Hospital?**

My main day-to-day tasks include working up new patients as they come to the unit, validating medication orders, and rounding with the medical team. Other responsibilities include being one of the research pharmacists, being involved in education, and working on various projects as they come up.

## **What would you say is the biggest difference in terms of the style of direct patient care between hospital practice and community practice?**

I have only spent 1 APPE in community, and this was in an anticoagulation/ambulatory care setting. However I think the major differences are that i) in the hospital I work closely with the medical team, so discussing medications can occur in real time, and ii) I have access to labs, vitals, etc. that I assess before approving a medication.

“*Having done a residency I strongly advocate for doing a hospital residency, as this was a year that I learned tremendously not only about therapeutics but the role a pharmacist plays in the hospital*”

**What does a typical day of yours at work look like?**

My typical day starts by working up the newly admitted patients, then rounding with the medical team. On rounds, we will discuss the patient and I will bring up the drug therapy problems that I have identified. Once rounding is completed, I will answer questions that the medical team may have, and continue to assess all of the patients and their medication regimen. In addition to clinical work I will have time to work on various projects including formulary reviews, or protocol development. If I have a student with me, we will engage in patient care presentations and topic discussions.

**What would you say is the most challenging part about your job?**

There is no one thing that I find challenging. Each day presents a new set of challenges. One of the things I like best about my role is finding ways to overcome whatever challenge comes up.

**You are also a researcher at St. Michael's Research. What is your research area, and what made you become a researcher?**

In 2019, I started a research fellowship with the Inter-professional Practice Based Research (IPBR) and the Li Ka Shing Centre for Healthcare Analytics Research and Training (LKS-CHART). In this fellowship we are using analytics, and computer modeling to try and predict a patient's warfarin requirements post-cardiovascular surgery.

**You are also the Communications Committee Co-Chair at CSHP Ontario Branch. Why did you decide to become a CSHP member, and why did you join the Communications Committee?**

CSHP works tremendously hard to advocate for hospital pharmacists. In addition they provide lots of resources and education opportunities to encourage continued learning. I have always been a member of CSHP, but wanted a way to be even more involved and contribute to the profession. The communications committee had an opening so I jumped right in.

**What advice do you have for students who want to pursue pharmacy practice in hospital?**

While in school, get involved and take any opportunity that you find to further your knowledge, experience and skill. Having done a residency I strongly advocate for doing a hospital residency, as this was a year that I learned tremendously not only about therapeutics but the role a pharmacist plays in the hospital setting.





## Okay, Zoomer

### *Remote learning for pharmacy trainees in the COVID-19 era.*

By: Katarina Pessina, 2T3, and Julia Giannini, 2T3 (OPA Student Chapter 2020)



The novel coronavirus pandemic has placed unprecedented demands on health care professionals and unique challenges are emerging in all healthcare fields, including pharmacy. The risk of transmission from COVID-19 has necessitated a dramatic shift in how students are educated worldwide. Remote or online learning has progressed from a concept to the new norm in just under a year's time. In this review, we explore how the shift away from a traditional classroom teaching environment has affected current pharmacy students, with respect to both training and academic experiences.

In order to adequately assess how this remote learning has resonated with PharmD students at the Faculty, we disseminated a survey to poll 2T3s and 2T2s on their experiences thus far.

This year, PharmD students had to trade in the oh-so-familiar orange lecture hall seats of PB 150 for the at-home experience of Blackboard Collaborate. This has become our new, albeit virtual, classroom. As you are all familiar with, Bb Collaborate is a webinar platform designed for use in online teaching. The platform allows for both syn-

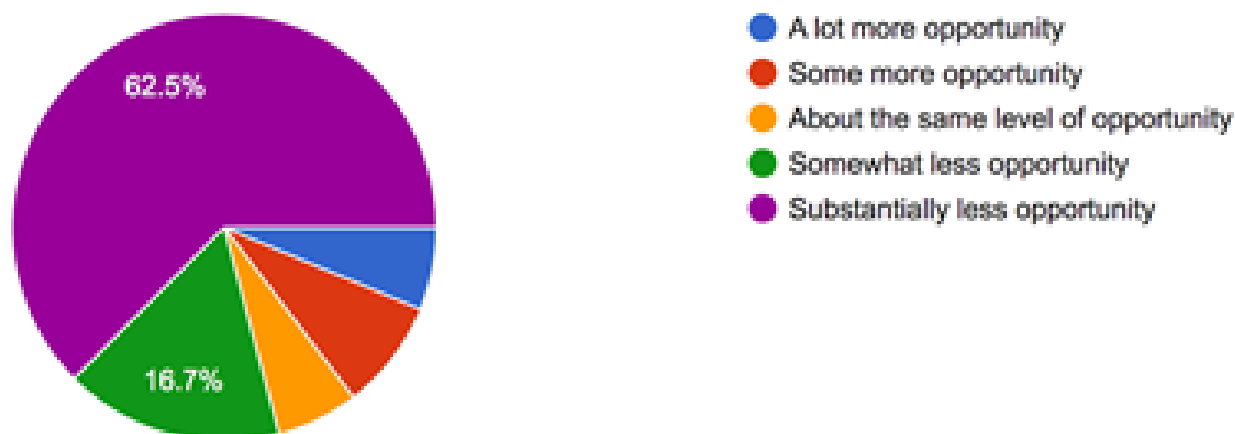
chronous and asynchronous lectures using live audio, video, chat, and recording functions.

The survey asked students to share their thoughts and experiences with virtual learning thus far. The first question we contemplated was whether the Blackboard Collaborate functions mentioned above can sufficiently replace the organic lectures, workshops, labs, and other interactions that take place in person. When asked how they feel about the amount of opportunities that Bb Collaborate allows for interaction and student engagement, as compared to traditional in-person teachings, an overwhelming majority of students (62.5%) reported that they feel they have 'substantially less opportunity' to do so.

We recognize that the notion of home life may differ drastically amongst our students. Some may have opted to either move back in with their families, while others may have decided to continue living on their own. As such, the environment that students study and work in may also vary substantially. Regardless, when asked the ease with which students find concentrating during

As compared to in person, how do you feel about the opportunities for interaction and student engagement?

48 responses



both synchronous and asynchronous lectures, we obtained a wide variety of responses. While some students reported that it was 'somewhat easier' to concentrate during online sessions (12.5%), over a third of students polled (37.5%) reported it to be 'somewhat more difficult'.

Results of the other survey questions are also summarized here. Regarding the level of knowledge obtained from online courses, results were evenly split between 'about the same level of knowledge' and 'somewhat less knowledge'. Concerning communication with professors, there was a relatively even split amongst responses, enforcing the notion that students learn from a wide variety of modalities. When asked about independent vs group work, an overwhelming majority (66.7%) of students felt online learning facilitates independent work over group work, with 18.8% feeling as though it did not facilitate either type of work. 33% of respondents felt it was 'substantially more difficult' to manage time with online, however the results were similarly split.

Finally, when asked if they would prefer to go back to an in person traditional classroom or remain online for the remainder of their studies, the majority of respondents (58.3%), said they would prefer to return to in person, 25% would rather remain online, and 16.7% had no preference. Although the majority chose to go back to in person, the results were quite interesting, as it was noted in the comment responses that some respondents who had previously voted against online learning in the earlier questions had opted to choose to remain online despite these challenges. One student who answered this way stated that, "I do not mind online learning, but I

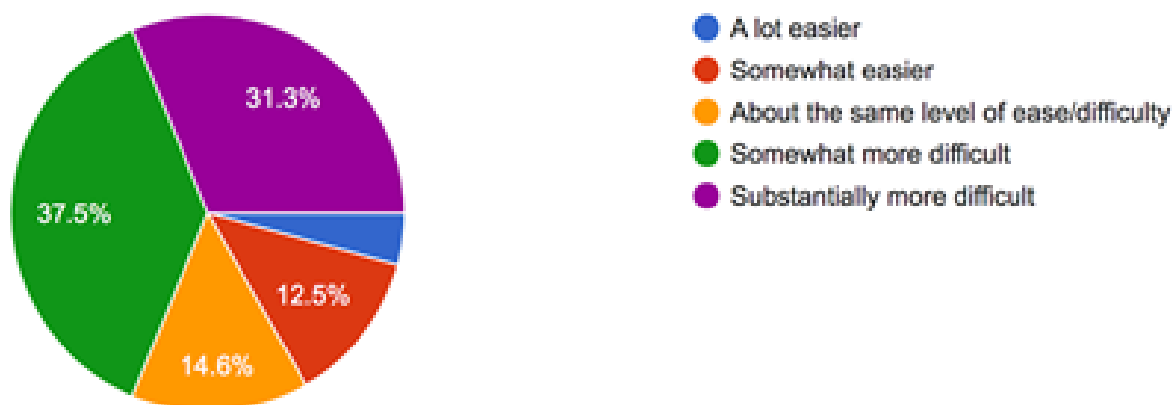
feel extremely overwhelmed compared to when classes were in person because of the lack of organization and the constant dumpage of more and more asynchronous content that we have to go and do on our own." Some students stated that they find there to be substantially less opportunities to interact with friends, which has made their experience less enjoyable. In contrast, another student wrote, "I love it, it makes my days so much more flexible!" and "I've found it to be a lot easier to balance part time work with the online learning schedule. Recorded lectures have allowed for a lot more flexibility and the ability to review certain parts of lectures." This variation between answers highlights that there are both benefits and drawbacks of online learning for most students, and one must weigh the benefits of convenience and schedule flexibility with the disadvantages of limited student engagement, organization, ability to concentrate, and facilitation of group work.

Other comments of note revolved around the technical issues associated with Blackboard Collaborate, as well as the lack of prioritization for student mental health and wellbeing. One student expressed feelings of "increased stress and anxiety, and no time for personal care." Finally, many students expressed concerns relating to asynchronous lectures specifically. Despite the fact that these lectures allow for time flexibility, many felt that their presence adds substantially more content to the course than usual as they can be included over and above the usual time slot for a class, increasing the number of readings and lectures to get through.

The mixed nature of results indicates a vast difference in opinion and preference amongst PharmD students.

### As compared to in person, how easy do you find it to concentrate during online lectures?

48 responses





This leaves us to consider: how do we continue to advance in the program with distance learning? Is it possible that prior to this shift, we were underutilizing virtual learning? Should the next generation of pharmacists continue to receive education virtually, or should we move back to traditional models? Is there a better platform than Blackboard Collaborate that can be utilized? At this time, it is hard to give a clear answer to these questions.

Short term solutions require pharmacists and teaching staff to continue to come up with innovative solutions to uphold remote teaching and learning, including adequate assessment and examination tools.

In the future, we anticipate a blended approach – a hybrid model of virtual and in-person curriculums. Some students expressed suggestions for post-pandemic learning such as having in person learning where lectures are also recorded and posted online for students to look at after classes are done, or if they missed a particular lecture. This would help students learn at their own pace, maintain the flexible and convenient aspect of online learning, while being able to get the in-class experience and engagement many of us crave.

Thank you to all 48 survey participants for their shared thoughts and experiences!



# Pharmapride and Phriends



Hello all! Pharmapride here with your first Monograph update on answers to questions we have received in our anonymous Let's Talk submission box! Don't know what that is? It's a virtual box that you can submit any questions regarding LGBTQ+ BIPOC topics, sexuality, attraction, etc here! And the best thing about this is that it is all completely anonymous! As a group, Pharmapride will do our best to answer all these questions respectfully and/or provide resources to point you in the right direction to help you with all of your questions.

Heard enough about the box and want to submit your own questions to be answered? Check out this link: <http://freesuggestionbox.com/pub/gsurzwy>.

Now let's get to the questions we've decided to highlight for this issue:

**Q: How do I know what pronoun to use for a person? I am unsure.**

**Pharmapride:** This is a great question, and I am happy you asked! Gender is diverse and complex! While many of us identify with either the pronouns he/him or she/her, gender does not exist as a binary. There are many people within our Toronto communi-

ty and throughout the world who identify with neither the pronouns he/him or she/her and many more who identify with both! Therefore, it is impossible to assume someone's gender based on their outer appearance or sex. This is why the best way to know someone's gender is to ask them! A common question to ask is "which pronouns do you prefer?". By asking this question, you are avoiding misgendering an individual and normalizing the idea that gender shouldn't be assumed to be binary. If you have not had the time to ask an individual their preferred pronouns, using a gender-neutral pronoun like "they/them" is recommended.

As an aside, there may be times in life when you forget to ask these questions and misgender an individual. Mistakes happen! In these instances, a genuine apology is a good place to start as misgendering can be hurtful to an individual. However, try not to dwell on the mistake as this may make the individual more uncomfortable. Just focus your efforts in the future on correcting the mistake and giving the individual the respect they deserve!

### **Q: Why do HIV infections remain so high?**

**Pharmapride:** Thank you for your thoughtful question. We know that despite availability of pre-exposure prophylaxis (PrEP) and effective antiretrovirals (ART), there remains a significant incidence of HIV especially among the marginalized, minorities, and LGBTQ+ populations globally. But the reasons why we continue to see HIV transmission is multifactorial.

Truvada is robustly effective as prophylactic treatment for those who are HIV-negative to prevent contraction of HIV—this is what we call PrEP. However, without insurance, generic Truvada costs about CAD\$250 monthly which clearly is not sustainable for everyone. Also, the actual treatment of HIV can cost CAD\$1500 monthly with no insurance or support. These people have to sometimes resort to cheaper, but older, less tolerable, and less effective antiretroviral therapy, or not use medications at all. Thus, prevention and treatment tend to be unfortunately reserved for the wealthier or the insured, which again leaves many people disadvantaged. As Canadians, we are lucky and privileged to have access to the medications we need, including those for effective treatment of HIV, but this is not the case for many. But as pharmacists, we certainly have a role in

discussing the availability of such options as we identify higher-risk patients, and improving access to medications.

Another reason for rising cases of HIV infections—which is more subtle but still a very powerful factor—is the persistent stigma that society still holds towards people living with HIV. Today, we know that on effective treatment, people living with HIV cannot transmit the virus; in other words, "undetectable = untransmittable". Despite the science, people continue to view them as "dirty and untouchable". Some are denied jobs, relationships, and are assaulted once their status is known. Because of this intense stigma, people would prefer to not get tested as they would rather not know. This leads to non-treatment, which leads to transmission that would otherwise not happen on effective medication—and that's only if they can afford it or are insured. We need to work on eradicating archaic views on HIV and STDs and improve access to testing to help stop HIV transmission.

As we look into this issue further, we find that the reasons for continued HIV transmission become complex. There is still a lot of work to do around the world if we wish to stop HIV, and as future pharmacists, there is a lot of opportunity for us in this field!

**We look forward to answering more of your questions in Pharmapride and Phriends in upcoming issues of The Monograph, so be on the lookout!**

**- Pharmapride**



# My APPE Rotation in NICU: How it Changed my Perspective on Hospital Pharmacy

*Shelby Yiu, 271*

After finishing a non-direct patient care rotation in August I was terrified of going to my first hospital rotation. Originally, my first hospital rotation was going to be in Block 3 at the Toronto Grace Health Centre in rehabilitation, but due to COVID it was canceled. Up to this point all my pharmacy experience had only been in community and I was hard set on being a community pharmacist when I graduated. After hearing my placement would be in the NICU (neonatal intensive care unit), I was already intimidated. I was being sent to a niche area where I knew nothing. My knowledge of the field was a blank slate.

The first day I drove and arrived 50 minutes early to my new APPE block at Sunnybrook. I had never driven in Toronto, and I have a habit of getting lost. The first day was an orientation. I had thoroughly regretted my choice of wearing new work shoes that had a slight heel. After our lunch I went with another APPE student, Dylan up the elevators to meet our new preceptor. We drew to see who got which preceptor. I drew Julie's name and Dylan drew Carla's name. We had a short orientation of the unit and were able to go home.

The second day was my real test. We had general rounds at 8 am in the morning and then bedside rounds at 9:30 am. This was also the day my preceptor assigned me to care for one baby. This baby was a complicated case. They had respiratory failure and were unresponsive to treatment. They were now on powerful corticosteroids, antibiotics and required a blood transfusion. That day I had stayed past my shift for 2 hours.

I will admit I struggled a lot in my rotation for the first two weeks. Every day I was studying a few hours outside

of my rotation to learn about NICU. I was particularly stressed and was questioning my own capabilities as a pharmacist. I was worried about any mistake I would make that could impact any child for the rest of their lives. I was fortunate enough to have great support from all the pharmacists in our unit, Julie, Carla, Dolores, and Jo who graciously took the time to mentor me in various topics. I also owe a thanks to Dylan for helping me study, talking over different subjects with me, and having it so my rotation was not so boring.

I'll admit I cried a few times while doing my rotation in NICU. I cried when I worried for a baby who had to be sent to Sick Kids after being diagnosed with neonatal necrotizing enterocolitis, when one baby was taken off life support and we were just providing comfort care, and when one baby was going to be adopted out. I had some nights I couldn't sleep because I worried about the babies. By the end of my rotation I was taking care of about 20 babies in my unit, talking to parents, and was the person who represented the pharmacy during bedside rounds. I was fortunate to have my preceptor Julie, who pushed me to learn more and be more confident. She was tough, honest, and caring and I appreciated when she gave me constructive criticism.





What I learned at my rotation will be valuable for the rest of my career moving forward. I learned to have some more confidence in my abilities. I learned the importance and role we as pharmacists have in the health of our patients. My interprofessional team was welcoming and helped me learn. They showed me respect and valued my opinion as a pharmacist. I learned how to think critically in a field where there are no clear answers.

I came into this rotation believing I would never like working in a hospital, that I would never be a hospital

pharmacist. I feared I was not good enough, that I was destined to fail. I left with new knowledge and skills as a pharmacist. I left with an understanding of how I can help patients in my role as a pharmacist. When I finished my rotation my preceptor and I had a chat about the possibility of residency which I would have never considered before. I finished my rotation about 2 weeks before residency applications finished, and I did not want to rush a decision. I still do not know if I want to do a residency, but it is now on my mind for next year. This rotation was the one I feared the most, but turned into my favourite rotation.





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## SNAPPY APPE INTERVIEWS

# Charlotte Boone

*Interviewer: Hebah Arabi, 271 Monograph Rep*



In our last issue, I wrote a survival guide which included tips that helped me survive my fourth year community advanced pharmacy practice (APPE) rotations. In this issue, I'm happy to present the debut of a series called, Snappy Appe Interviews, where I interview our beloved and hard working fourth year APPE students! I spoke to Charlotte Boone on her experience in a family health team! Charlotte started her undergrad at McGill University before coming to The Leslie Dan Faculty of Pharmacy. She loves cooking, hiking and playing trivia. Her therapeutic interests lie in psychiatry and oncology.

**Hebah:** Hi Charlotte, welcome to Snappy Appe Interviews! I am happy to interview you today on your experiences as an APPE student in a family health team. Let's start with some fun questions...to get to know you better! What's something I would have never guessed about you?

**Charlotte:** I thought wolves were fictional until about 5 years ago. I thought they were like unicorns. I had never seen a wolf, and thought they were in all the fairy tales. I've been teased relentlessly about this but I stand by my conviction that there was no reason to believe they were really out there.

**Hebah:** That's hilarious and I'm so glad I asked! If you met a genie that granted you one wish, what would it be and why?

**Charlotte:** Accessible, publically funded, mental health and addiction support for everyone, everywhere. This would ease the burden on countless systems, and probably fix a lot of the world's problems. Not to mention improving quality of life.

**Hebah:** That's a great answer and it would benefit many people in our society. Let's jump into your APPE rotations. For our younger students that are not familiar with the fourth year APPE rotations, can you explain what are DPC rotations and what kinds are out there?

**Charlotte:** Direct patient care rotations include any placement where you'll be impacting patient care decisions in real-time. Especially during the pandemic, the 'direct' part can be a bit of a misnomer. You won't always be interacting face-to-face with a patient, but you'll be part of a clinical team who is providing care to patients. This includes community pharmacy, hospital and ambulatory (outpatient) placements.

**Hebah:** Where did you complete your direct patient care rotation?

**Charlotte:** My current DPC rotation is at a Family Health Team. Specifically, I'm at Sumac Creek Health Centre. This Family Health Team is under the "Unity Health" umbrella along with St. Michael's Hospital.

**Hebah:** Was it an in-person or online rotation and for how long?

**Charlotte:** It's an in-person placement. My preceptor (Jon Hunchuck) has been very supportive with offering the accommodation of working from home, if I prefer. However, I have loved getting out of the house every day and being with the team in person. This placement is 5 weeks.

**Hebah:** Can you briefly explain what led you to choose a family health team (FHT) rotation?

**Charlotte:** My biggest reason for trying a Family Health Team was to step out of my comfort zone and practice in an area I'd never tried before. I was also attracted to the collaborative aspect of having so many healthcare providers practicing together.

Having experienced the role, I think other students should choose a FHT for the vast array of clinical topics that it can expose you to. At a FHT, you get the chance to work up a wide breadth of disease states, some of which you haven't reviewed in years.

**Hebah:** Can you explain what your role was at the FHT as an APPE student?

**Charlotte:** Principally, Jon delegates referrals to me. Referrals are mostly from MDs or nurses. These include specific questions related to drug therapy, or overall medication reviews. After gathering all required information from the chart and other sources, I use the pharmaceutical care process to work up the problem(s). After discussing the case with Jon, I add my documentation to the patient chart (usually as a DAP note). Sometimes I phone the patient to discuss the plan, but this isn't always warranted.

**Hebah:** What does the day in the life of a pharmacist look like at the FHT? Is it a 9-5 job?

**Charlotte:** More or less, yes. However, Jon has many roles including coordinating courses with the faculty so his daily structure is a bit more diffused. As an APPE student, I arrive at 8 and leave around 4. There are usually areas I read up on after work or on weekends to try and get the most out of the placement.

**Hebah:** Who do pharmacists collaborate with?

**Charlotte:** I was blown away when I learned of all the professionals working within this FHT. There is a dietician, nurses, a chiropractor, physiotherapists, physicians, chiropodists, a social worker, an addictions counsellor, and more. The individuals I have collaborated with most often are the physicians.

**Hebah:** What project(s) were you involved in, if any?

**Charlotte:** There haven't been any projects per se. I am working on a presentation to the team regarding appropriate targets in the primary prevention of cardiovascular disease.

**Hebah:** Awesome, and what was the greatest lesson you learned from your placement?

**Charlotte:** I've learned a lot about how a pharmacist can shape their own role and contribute enormously to patient care. It would be very acceptable for a pharmacist to simply answer all of the referred questions. However, Jon has been a strong proponent of practicing to our full scope. I've learned to use the referrals as a jumping off point to monitor a patient's other chronic conditions or holistically work them up.

**Hebah:** Any advice for students about to complete their DPC rotations or for our younger students?

**Charlotte:** Track your learning! I wish I had started organizing better, earlier on in my placements. It's one thing to complete assigned readings, take notes, prepare summaries and review trials throughout the placements. However, ensuring an organized approach but with new learning can work wonders for quick references. For example, I've been adding pertinent guideline review notes within my OneNote course notebooks. It helps keep all learning organized and easily accessible.

**Hebah:** Where are you headed next for your rotations?

**Charlotte:** I'm on a study block next. After 6 consecutive placements which began right after exams, I'm looking forward to slowing down for a few weeks.

**Hebah:** Awesome, a well deserved break! Do you have a clearer picture of where you would like to be after graduating or are you undecided?

**Charlotte:** I've always been interested in a hospital residency. Borne from my last two placements is a renewed ambition to pursue this. I'm hoping to either complete a residency next year, or gain experience in a hospital setting and apply again for the next cycle. It has been very rewarding to apply the PharmD curriculum to patient cases.

**Hebah:** And lastly, a pressing question on everybody's mind: Team SpongeBob or Patrick? Why?

**Charlotte:** Neither! Team Sandy! A scientist and innovator who built a sustainable underwater habitat. We love to see it.

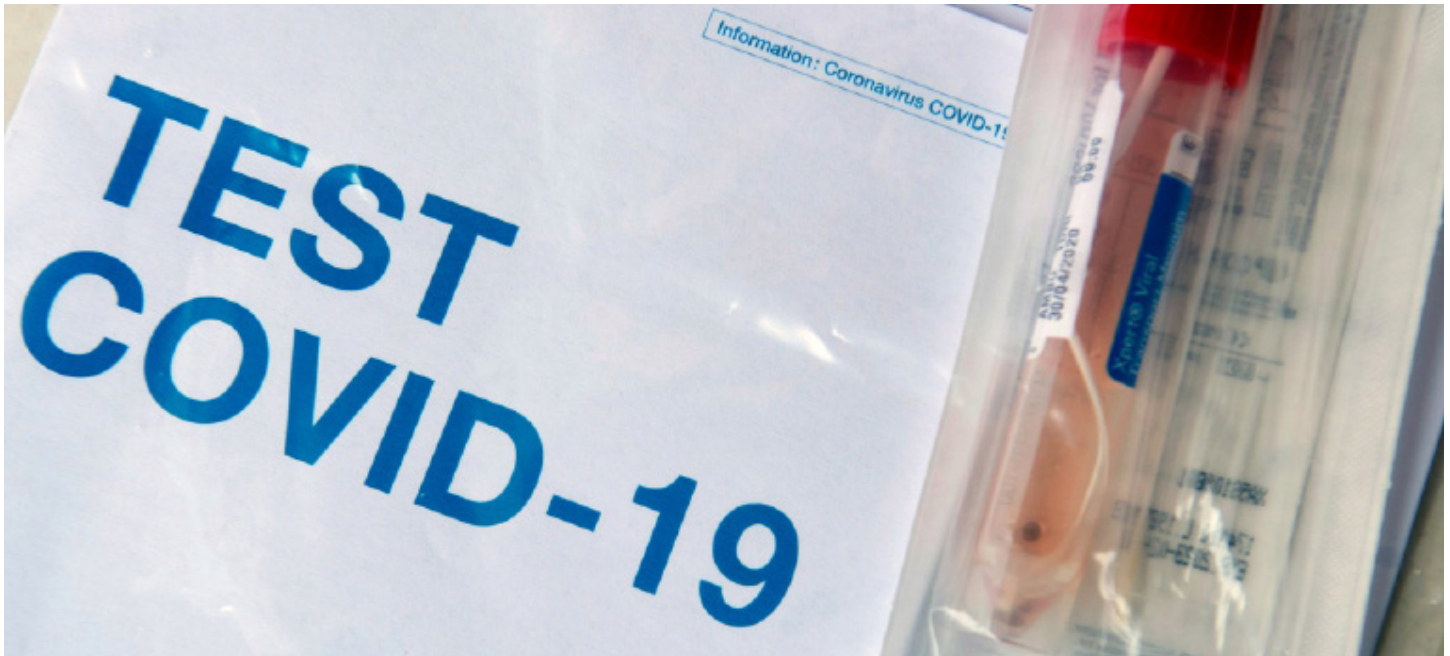
**Hebah:** Wow, I will have to agree on that one! Girl power! A huge thank you to Charlotte Boone for sharing her experiences and advice on her family health team rotation! I wish you the very best on your journey in pursuing a career in hospital pharmacy!



# Reflections on the COVID-19 Testing in Pharmacies in Ontario

William Nguyen, 2T1

2020-2021 Academic Board Member



On Friday September 26th 2020, selected pharmacies in Ontario began offering free COVID-19 testing which was announced by the Ontario government as an initiative to alleviate a backlog of tests from the testing centers in hospitals.

On paper, COVID-19 testing in pharmacies may seem like a solution to alleviate the backlog of tests and the long lineups that plagued COVID-19 testing centers back in September [1]. However, it has not resolved the systemic barriers that the hardest-hit neighbourhoods have in accessing tests, nor has it been implemented properly. Slightly more than a month since the program was rolled out, testing capacity has remained below maximum capacity [1]. This is due to changes in testing criteria enacted by the government of Ontario such as mandating that only people who are asymptomatic and are listed under the following groups as eligible for testing in pharmacies: [2]

- Travelling internationally
- Visitor or working in long term care homes
- International student who passed their 14 day quarantine period
- Indigenous descent (First Nations, Métis, or Inuit)
- Farm workers
- People working in congregate settings (e.g. prisons, homeless shelters)

These changes in the testing criteria have been the source of frustration for many patients due to unclear messaging from the government. While the program has successfully decreased the number of unnecessary tests (mostly in the well-off, white population, lowest drop is among racial minorities) [1], it still leaves several people that should be tested unable to be, which hampers efforts to track COVID-19 in the community [3]. Most notably, workplace-related COVID-19 cases are not eligible to be tested in pharmacies and need to go to the assessment centers by appointment. For example, many cases of COVID-19 can be traced back to workplaces in Peel Region where many people work in jobs (e.g. transportation, logistics, front-line workers in restaurants) who do not have the luxury to work from home, necessitating them to go to assessment centers which may be not accessible for everyone [1]. As well, many of the hardest-hit neighbourhoods, which are predominantly people of colour, have one of the lowest test rates per capita due to accessibility issues caused by moving the testing centers to an appointment based system (e.g. inconvenient location of testing centers, language barriers, long line ups) [1][4]. Therefore, expanding the testing to pharmacies still leaves out a large number of people who would benefit from testing for COVID-19 and aid in contact tracing and data that public health officials can use to formulate government policies to combat COVID-19. Ideally, the government



should support marginalized communities by making the assessment centers become walk in for certain days to target workplace related COVID-19 outbreaks and provide more support for pop-up testing efforts. Simply shifting more work to pharmacies has not resolved the systematic issues that marginalized communities faced.

At the same time, if testing needs to be expanded in pharmacies, safety and adequate remuneration (we are putting ourselves at risk due to our exposure to the public in a similar manner to grocery workers and other frontline workers) are needed given that pharmacists must juggle between administering flu shots, testing for COVID-19, and performing the clinical aspects that pharmacists do. Currently, pharmacies are being remunerated for performing the COVID-19 testing by the government, not the pharmacist itself. In addition, working in the pharmacy has brought a lot of challenges brought by the introduction of COVID-19 testing. The number of phone calls ringing with people desperate to receive the test is unfathomable in which performing the assessment over the phone means less time working in the dispensary. Most patients are okay but there are a few that can either ask numerous questions or insult you over the phone because of factors beyond one's control (e.g. test results). It is common for all members of the pharmacy staff to be engaged on the phone performing the COVID-19 assessment, and hence it is common to see prescriptions being filled late due to a large volume of work. This also adds more stress both to the pharmacist and to patients who can become frustrated over their prescriptions being filled late. Unfortunately, there has been no support from the government to aid

us, or deal with the increased stress of workload, and instead, pharmacists are being blamed for overbooking patients for flu shots with no appreciation for performing the COVID-19 testing the government adamantly promoted. While it is important to increase accessibility to COVID-19 testing, working conditions matter; poor morale and stressed pharmacy workers means that a higher chance of errors on your prescription, a frustrated population, and reduced trust in the healthcare system that hampers our efforts in combating COVID-19. The last thing we need is blaming healthcare providers for someone else's mistake. Think twice before adding in more work that currently does not target most of the population where COVID-19 is rampant.

#### References:

- [1]<https://www.theglobeandmail.com/canada/article-covid-19-testing-numbers-plunge-below-maximum-capacity-in-ontario/> (COVID-19 testing numbers plunge below maximum capacity in Ontario)
- [2]<https://www.cbc.ca/news/canada/toronto/covid-19-testing-ontario-1.5737683> (Confused about COVID-19 testing guidelines? Find out if you should get tested)
- [3]<https://ottawacitizen.com/news/local-news/confusion-rules-as-covid-19-testing-at-pharmacies-in-ottawa-begins> (Confusion rules as COVID-19 testing at pharmacies in Ottawa begins)
- [4]<https://www.cbc.ca/news/canada/toronto/toronto-covid-northwest-rexdale-etobicoke-1.5792518> (Trust, support are missing ingredients in curbing COVID-19 in Toronto's hardest-hit areas, experts say)



# CLUBS CORNER: HEALTHCARE KEYNOTES

Brandon Handfield and Parth Shah, 2T3

At HCK, we offer students unique opportunities to interact and learn from those with crucial experience in the world of pharmacy. Sessions often focus on tips and tricks to solidify your approach to interviews, refine your resume, and overall improve your verbal and non-verbal communication skills. Each meeting also incorporates an activity period where attendees are encouraged to participate in a range of exercises aimed at further developing their communication abilities.

For Meeting #1, UofT Pharmacy's very own Jesse Ropat and Dylan Bedi provided their two cents on what it takes to make contacts and navigate through the workplace. We also followed up with an activity period called Professional Speed-Dating to work on our public speaking skills! Here, participants would interact one-on-one, and later present their partner to the rest of the attendees. As seen by the group's heartwarming smiles, the event was a blast!

*A few things that distinguish Healthcare Keynotes (HCK) from other clubs would be our signature gang signs, our commitment to improve you professionally, and the quality of our outstanding guests!*

For Meeting #2, we brought in our renowned guest speaker Moataz Daoud! Being a highly successful PharmD student in the field of industry pharmacy, he opened the floor for participants to ask anything they wanted to a potential future employer. Moataz was able to provide straightforward and honest advice; in other words, he kept it real. He also gave participants advice on what he looks for in new graduates when recruiting. Finally, Moataz shared meaningful and insightful comments on skills that helped him get to his position as Lead Medical Advisor at Sanofi Genzyme.



During his question period, participants were so responsive, we decided it would be more beneficial to the meeting to skip the activity period and lengthen his interactive question period instead!

With our next meeting's keynote speaker being Monica Gautam, on Wednesday November 18th, learned how to make a good impression during interviews! In future meetings, participants should definitely expect several activities to improve their public speaking skills such as elevator pitches, quick quips, and mini-debates! We look forward to seeing you there!





# Clubs Corner

## Influenza Immunizations in Times of COVID-19



*Arnold Ruste, EVOLVE Social Representative*

Ontario's Ministry of Health released a fall preparedness plan, known formally as the *Keeping Ontarians Safe: Preparing for Future Waves of COVID-19* for the challenges of this year's fall season, which includes:

- Maintaining public health measures
- Identifying, managing and preventing outbreaks quickly
- Reducing health service backlogs safely
- Preparing for any surges in COVID-19 cases
- Recruiting, retaining, training and supporting health care workers, while also continuing to engage families and caregivers
- **Implementing the largest flu immunization campaign in Ontario's history**

This year, Ontario determined its need for the vaccine to be approximately 5.1 million doses, over 700,000 more doses than the estimated vaccine usage last year. This includes 1.3 million high-dose vaccines for Ontario seniors, especially those with pre-existing health conditions. Since that original order, the province increased the amount by an additional 350,000 doses, bringing the total to roughly 5.45 million doses.

At the time of writing, the province has already received and distributed 920,000 doses to around 3,200 participating pharmacies (about 200 more pharmacies than last year), on top of the amounts allocated to public health units, physicians' offices that are still open, long-term care homes, retirement homes, homes of congregate care, hospitals, and community health centres.

For the past month, pharmacies have been reporting

a lack of availability of influenza vaccines for reorder that has proven extremely stressful for both patients and pharmacies. This is largely due to the demand for influenza vaccines at pharmacies rising around 500% from 2019, according to Justin Bates, CEO of the Ontario Pharmacists Association. It has become very important during a pandemic to protect one's self and others from getting sick. Ontarians are taking the initiative to get the influenza vaccine this year as it is the number one line of defence against contracting the flu.

The current issue is not that there is a shortage of the vaccine, but that vaccine shipments from manufacturers are being phased in over several months. The vaccines are produced in batches, and supply will continue to become available throughout the flu season. As a result, Ontario Public Health has not received its next shipment of vaccines from their manufacturers for distribution to pharmacies.

Currently, pharmacies approved by the Universal Influenza Immunization Program may administer the publicly funded influenza vaccine to eligible people five years of age and older who live, work, or go to school in Ontario. The government has announced a desire to allow pharmacists to administer the influenza vaccine to children as young as 2 years of age. The Ontario College of Pharmacists' proposal for this expanded scope is currently under review by the Ministry of Health.

For the first time in Ontario's history, the government has improved access by allocating high-dose influenza vaccines for seniors to pharmacies. Individuals aged 65 years and older are eligible to receive a quadrivalent vaccine or the Fluzone High-Dose trivalent vaccine.

As the fall season, flu season, and second wave loom over the province, pharmacies are undoubtedly playing a significant role in the Ontario government's fall preparedness plan to protect Ontarians this year from the flu and COVID-19. Moving forward, we hope there is a continued dialogue between our regulatory body and associations and the government to improve access and re-distribute additional vaccine supply currently available in the province to pharmacies. We hope to work towards increasing allocation of future shipments of vaccines to pharmacies in response to the unprecedented public demand.

## CLUBS' CORNER - COMPPS

# *The Skin Care Routine Bloggers Never Told Us About*

By: Safana Elsays, 2T4

Skincare and dermatology products are often viewed as a saturated market, yet as a consumer I often find myself stumbling across the same “big three” ingredients in almost every product: hyaluronic acid, benzoyl peroxide and salicylic acid. All of which never served my sensitive, rosacea-loving and acne prone skin. Frustrated with an obscene amount of products yielding the same results, I found myself seeking customized skin care from my local compounding pharmacy.

After meeting with my dermatologist, I discussed with him the variety of products that I have used. His immediate response was that compounding should help eliminate the adverse effects I'd been experiencing. He prescribed a compounded moisturizer with azelaic acid and niacinamide. The moisturizer was not infused with oils which congested my skin or hyaluronic acid which was flaring my rosacea. Additionally, the compounding pharmacist managed to adjust the concentrations and dosage to ensure my skin was not irritated.

While my skin care routine was optimal for me, I couldn't help but wonder why the compounded product was more effective than commercial products I had tried before. Cosmetic products tend to contain multiple ingredients, but they might not all serve a patient's unique skin care needs. A compounding pharmacy can prepare a custom product with ingredients added or removed to suit the patient's skin. For example, excipients or fillers with unintended activity in commercial products can irritate the skin, but compounding pharmacies can make a special product without these irritating ingredients. Thus, the effectiveness of my skin care product was maximized and its side effects were reduced when I could get it compounded specifically for my skin.

In addition, commercial cosmetics are oftentimes marketed as a collection of different products that can make your skin care routine tedious and lengthy. Compound-



ing pharmacists can use their scientific knowledge to create an individualized topical treatment and combine multiple ingredients to reduce the number of products in one's skin care regimen. For example, retinol and vitamin E can be added to a daily moisturizer, eliminating the need for an additional serum product.

Compounded dermatological medications are not limited to moisturizers; compounding pharmacists can also strip away dead skin with chemical peels, address discoloration and hyperpigmentation with bleaching creams, reduce wrinkles with estradiols, and reduce inflammation by using anti-inflammatories. Compounding pharmacists have a unique skillset to solve a variety of unique dermatological conditions or circumstances that patients frequently face.

### Sources:

<https://burtsrx.com/bio-identical-hormone-replacement-bhrt/>

<https://burtsrx.com/custom-makeup-compounding-pharmacist/>

<https://burtsrx.com/benefits-compounded-dermatology-medication/>

# GENSHIN IMPACT REVIEW

Danya Nguyen, 2T3



If you enjoyed open-world games RPG games such as Zelda or Mabinogi, you will love this one and it's Free to Play! This Genshin Impact, a game recently released by miHoYo that lets you explore across its massive world with plenty of items to collect, puzzles to complete and hidden chests to find. The story quests are there to guide you, but it's not necessary to follow it if you want to go venture off somewhere instead. Once you reach Adventure Level 16, you'll be able to join your friend's world and play together with them which is super helpful if you are stuck on a particular puzzle or can't seem to beat that one boss!

Bridge" on YouTube). These characters can control one of seven nature elements which can be upgraded into sophisticated combat mechanics when the player mixes elemental reactions to deal large amounts of damage to the enemy. You may obtain other characters via their wishing system, a Gacha game for those who are familiar with other anime-style character obtaining games. The wish is basically like a draw where you may get crazy weapons or a new character, not going to lie this part is super addicting and super exciting to look forward to.

Although the game recently launched, and there is a lot of content that has not yet been released, and there is still a lot to do! So, if you are bored during class, or if you want to take a (long) break while studying try Genshin Impact out!



You start off the game with your main character, the "traveler" and immediately meet a super cheeky side kick. Along your adventure, you will encounter other colourful characters and they join your team which allows you to explore parts of the world that were not accessible to you before (Search up "Poor Man's Ice





# Rx-Mas Activities – Version 2020

*Sally Jeon, 2T4 Monograph Rep*

As we all try to hassle through our academics, we are now approaching the end of this online term, and the end of 2020. Regardless of how different this year was, Christmas pleasantly awaits to give us a nice warm wrap up. So far, Christmas has been a holiday full of lights and full of people. However, in 2020, the pandemic holds us back from physical interaction, so we must do it safely. Here are various ways to continue the Christmas spirit while keeping safe and staying socially distanced.

## *Drive-Through Drive-In Events*

If you're really sick of staying indoors, there's the option to feel the Christmas spirit in your car with various Christmas drive-through events. To name a few, there are OPG Winter Festival of Lights at Niagara Falls, Santa Claus Parade in Richmond Hill, and Bluffs Winter Wonderland in Scarborough. In fact, the Journey into Enchantment in Markham aims to raise 100k for the SickKids Foundation. Other regions such as London, Ottawa, Brampton, Vaughan, Mississauga, Kitchener, St. Marys, Pickering, and more hold beautiful drive-thru events as well. Check out this link to find out more: <https://www.todocanada.ca/drive-through-and-drive-in-events-and-activities-in-ontario/>



## *Secret Santa*

Who doesn't love surprise gifts? Try Secret Santa version 2020. Gather your family or friends and begin by getting on a group call. Then, use an online random draw to assign each other's names and addresses. Order the gifts online to have it delivered to your recipient's address before Christmas. On Christmas, get together virtually and unbox each gift to share the delightful Christmas surprise.

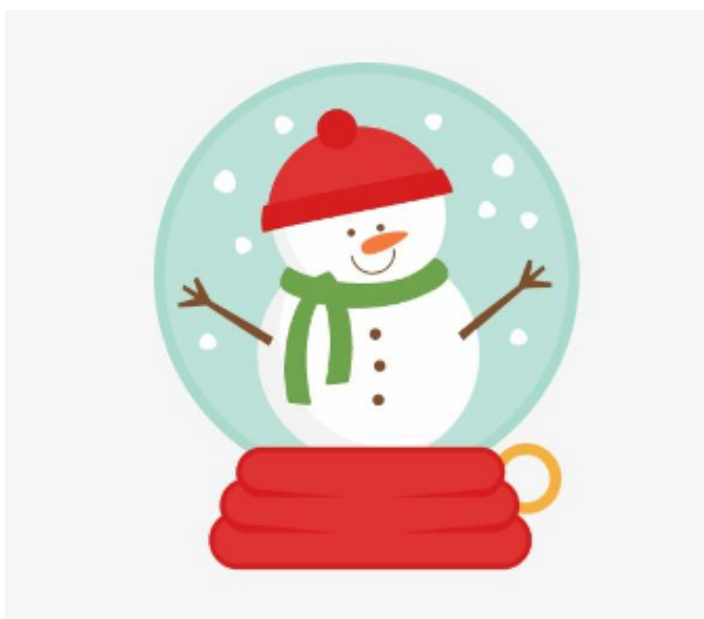


## *Winter movie marathon*

Set a day, set a time, and grab some snacks to binge watch some of your favourite holiday movies! You've



worked hard throughout the term, so allow your brain rest with some lively holiday movies. Bring back the childhood nostalgia or try out some of these classic goodies if you haven't yet; *Home Alone* (1990), *Serendipity* (2001), Tim Burton's *The Nightmare Before Christmas* (1993), *New Year's Eve* (2011).



## DIY Decorations

Decorate your house with DIY Christmas items. craft your own garland for your wall or tree. Simply use a long string and evenly tie on any decorations you'd like



(it can even be dried orange slices or cinnamon sticks!) Hang the string ornament made in your own taste on a wall or a tree! Also, craft your own snow globes. All you need is to put water and glitter into an empty jar, and close the lid with a figure or your choice inside.

## Creative Christmas Goods

If you like to play with food, this is your time to be creative! You just need icing, colourful candy, and the ingredients to make your baked goods. Bake some of your favourite cookies, cake, or pie. (You can even just go off of box cake or Pillsbury cookie doughs!) Then, decorate them to make Christmas cookies or cake using the colourful icing and candies.



Here were some suggestions to enjoy Christmas while accommodating to the changing era. Try some of these suggestions as a new addition to your Christmas activities! While doing so, keep in mind to stay safe and healthy!

*Happy Rx-Mas*



# *"Doing Nothing Often Leads to the Very Best of Something"*

The story of Christopher Robin

A movie review

By: Shaista Malik, 2T2 Monograph Rep



Deep in the hundred-acre woods, young Christopher Robin spends his days playing with his friends, always coming to their rescue, whether stuck in a tight jam or saving them from the terrifying Heffalump. As Pooh asks Christopher what his favourite thing to do is, Christopher replies, *"What I like doing best is nothing"* - a subtle hint at the human nature of contentment in the present, something inherently present in younger souls.

Christopher Robin is a 2018 fantasy comedy-drama and a coming of age film which shows the progression of Christopher throughout his life which eventually leads to him finding a balance between his former imaginative self and his future working self.

At the end of his first phase of life, the story shows Christopher as he walks with Pooh and he tells him, *"I'm not going to do nothing anymore"*. This point in the film resonates with the human experience, as all children one day come to a point where they leave their enchanted friends of childhood and enter into a new era. Christopher marches forth in the pursuit of growing up and in becoming an adult, forgets the part of his life meant to enjoy the simple pleasures of the present.

Time passes, an older Christopher Robin finds a drawing of his friends in the hundred-acre woods, reflecting on warm memories of his childhood past. He folds the

drawing quickly as his father calls for him to hurry for his first day of boarding school. As Christopher Robin leaves his childhood behind, he is forced to focus on school with his playful memories of the past slowly becoming distant fragments of his imagination.

Perhaps this points towards a certain unifying moment in human life, in which we go outside to play with our friends one last time and with that we progress into a state which we feel is the next level; becoming a 'mature' adult.

One day he receives the tragic news of his father's death and has to become the man of the house at a very young age. As seasons pass by, we find Pooh Bear waiting for Christopher Robin to come back and play, but his wait is to no avail as years pass by with no return of Christopher to the hundred-acre woods. Life becomes busy for Christopher as he soon gets married and expects his first child. Christopher is cast off to war and later comes home to his wife and daughter Madeline.

Upon his return back, he becomes invested in his work and begins to deny any form of fun and play. To him, work is all about cutting costs and increasing profits as the director of efficiency at Winslow Luggage, a struggling company operating in postwar London. Christopher spends his time working continuously to find ways to increase profits. We find that he has lost his connec-



tion to life, his wife and even his daughter. Life becomes too serious for play and it seems he has no time for fun, at all. He adopts his bosses' model, "*Nothing comes from Nothing*". Christopher has become a workaholic in an endless pursuit of a never-ending goal.

The story then takes the perspective of Pooh bear as he wakes up to find all his friends have been kidnapped by the Heffalump's and Woozle's, an imaginary group of monsters. Pooh is in need of Christopher's help. He decides to go look for Christopher and upon reunion with the once fun-loving boy, he finds that Christopher is in a hurry to send him to the forest so that he can go back to work. Christopher has lost the spirit of play as he tells Pooh, "*There's more to life than balloons and honey*".

In his attempts to return Pooh, Christopher is reunited with his other friends from the hundred-acre woods including Tigger, Piglet and Eeyore. However, they are left in disbelief and do not recognize Christopher, claiming him to be a Heffalump. In attempts to defy these beliefs of his friends, Christopher pretends to defeat the Heffalump. In this rejuvenation of his spirit of play, Christopher realizes, "*I'm not who I used to be. I'm lost*". Pooh replies "*You need to remember who you are*" as Pooh strives to remind Christopher who he used to be. He tries to remind him of his long-lost theory of nothingness: "*People say nothing is impossible, but I do the nothing every day*".

In the morning as Christopher wakes up in the hundred-acre woods, he rushes to leave for his work. Pooh later finds out that Tigger has replaced Christopher's important papers. Pooh, Tigger, Piglet, Eeyore and Madeline whom they meet in the way strive to return these papers as they journey to Sussex. Christopher soon realizes at his business presentation that his briefcase contains nothing but items from the hundred-acre woods that Tigger has packed including Eeyore's detached tail. However, what was most important is that Christopher and his wife Evelyn find their missing daughter who they soon reunite with along with the hundred-acre woods friends. However, as Madeline trips on the stairs, all of Christopher's papers are blown into the wind, saving all but one.

With the events unfolded before you, it's probably clear that Christopher is not in a good situation to present an upcoming business plan and has to improvise. With only one paper saved, Christopher's eyes light up as he

thinks of a new plan. He proposes to reduce prices of luggage so it could be bought by everyday people and have employees go on paid leave, making them new customers of the company when they go on vacation. The head of the company agrees to this plan.

At the end, Christopher embarks on something very important, which is simply to do nothing. We find that he decides to have a picnic with his family and childhood friends at the hundred-acre woods.

The moral of this film shows that momentary points of doing 'nothing' often lead to the very best of something. It is testament to a state of rest, and how it contributes to better work life, and efficiency in daily life. It is only when Christopher is pretend-playing and fighting with the Heffalump that he is rejuvenated with a child-like spirit of wonder and play that allows him to come up with a business resolution. He realizes the importance of doing nothing and taking a break to relax with friends and family. As Pooh tells Christopher, "*There's always time for a smackerel of wonder*".

In *high stress* situations we often face as **pharmacy students** with the challenging curriculum that is placed upon us, it is more important than ever to do nothing once in a while. It may seem counterintuitive to do nothing when you have so much to do, however, doing nothing indeed leads to the very best of something as it refreshes your mind, allowing you to concentrate, focus and perform better in your studies.

What does doing nothing truly look like? It means taking breaks during study sessions to do something relaxing. It means taking time to see and talk to your friends and family, and partaking in meaningful activities.



# Life After Pharmacy School:

By Andrew Tu, 2T2

*Life after graduation.*  
This is something that almost every student will think about at some point over the course of their education. Pharmacy students are no exception to this. I have often wondered and asked myself what direction my life will take after I graduate with a PharmD degree. Some questions I have asked myself include: “Will I end up working in a community, hospital, or industry setting?”, “Which city or province am I going to end up working in?”, and “How much money will I make after graduation?”

One question that I have never asked myself until recently is “When will I become a pharmacist after graduating from pharmacy school?” Before coming into pharmacy school, I was quite familiar with the saturated job market. I had spoken to pharmacists in practice who discouraged me from following in their footsteps and read online forums filled with negativity about the profession. Throughout my pharmacy school journey, I was not surprised at all compared to some of my peers whenever someone would mention the reality of the job market. I was convinced that if I got involved with as many opportunities as I could, worked in pharmacy, and networked hard, I could at least have a chance

The post outlined the current situation that Ontario pharmacy graduates from this year are facing with getting licensed. In previous years, pharmacy students would take their licensing exams before graduation, and most of them would become licensed pharmacists within 1 month after getting their pharmacy degrees. Due to the COVID-19 pandemic, licensing exams this year have been postponed and there are not enough seats to accommodate all the new graduating students at once.

This means that pharmacy graduates this year will be taking their exams at different times. The earliest time any Ontario graduate this year will become licensed is January 2021, more than 6 months after graduation. Most of these graduates have student loans which have already started accumulating interest. If they decide to work in a pharmacy setting before becoming licensed, they



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*One question that I have never asked myself until recently is “When will I become a pharmacist after graduating from pharmacy school?”*

at survival after graduation. Recently however, I came across a post on social media made by a recent Ontario pharmacy graduate, and it was quite concerning to me.

will do so as interns. They are expected to work with the full scope of a licensed pharmacist and some grads are doing this for minimum wage.

# A New Normal

Although this situation does not directly affect me right now, it makes me wonder: Will this be the new normal after graduation? Will my classmates and I have to wait at least 6 months after graduation before we can become licensed pharmacists?

These are unprecedented times, and nobody is to be blamed for the current situation. However, it is important to raise awareness regarding this situation and to have discussions. This is the start to making change, and I do think that change is needed. The social media post mentioned earlier spread very quickly, and pharmacy students like myself as well as practicing pharmacists became aware of the current situation that new graduates are facing. Some shared the information and voiced their concerns publicly. Clearly this was an issue that was not okay with many people in pharmacy.

Other healthcare professional graduates this year have either been granted conditional licensure or are being compensated properly for practicing with their full professional scope. Pharmacy is an essential service, and it is especially important during these times with COVID testing being done at some pharmacies. Yet pharmacy graduates are not considered essential enough to be granted conditional licensure and some are working for minimum wage as unlicensed pharmacists. This brings up another issue that has bothered me for a long time and that is the lack of advocacy in our profession.

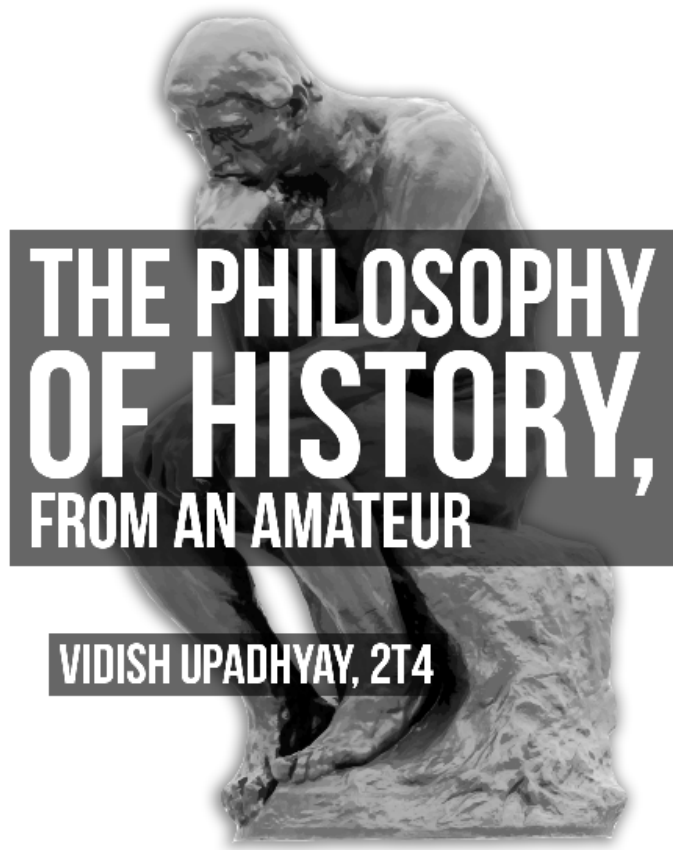
Pharmacists are often viewed as being passive, risk-averse, and conflict avoiding healthcare professionals. This is something that I was actually taught in a mandatory course in pharmacy school.

Pharmacists are not unionized and few people actually speak up about issues that are faced within the profession. As a result, change rarely occurs in the pharmacy profession, and when it does, it is usually not to the benefit of the pharmacist.

I can understand that pharmacy regulatory bodies are doing their best given the current circumstances and that the pandemic is making things challenging for them as well. However, I do think that there are some things that can be considered for new graduates, whether it be granting conditional licensure, mandating wages for pharmacy interns, or taking an online approach to the exam to allow everyone to take it at the same time. If nobody speaks up and the issue is not addressed, then nothing will change. If people speak up, and the issue is addressed, then maybe something will change.







I wasn't a philosophy major and by no means a student of history, but I think the average person takes advantage of living their day-to-day lives without acknowledging the infinite series of events that brought them to the present. I'm not saying you should pick up your nearest history textbook and memorize it word for word, all I ask it to take a step back and ask - not "what's" the history - but why is history.

What separates humans from animals? Other than the obvious biological disparities, consider the societal and emotional. Animals don't know the history of the habitat they live in, or the individuals in their lineage. All they own is the DNA passed down from their ancestors without knowing who their ancestors were. It seems silly to think of a frog wanting to know who his predecessor was, or if a lion wanted to know about his great-great-great grandfather. 10 times out of 10, the lion will prioritize its next meal above anything else, history be damned.

Humans, on the other hand, rely on history to establish the present and carve our future. Some philosophers (in a broad sense) theorize that we as a species continually record our history because it will inevitably generate a path towards perfect society, free of error. Although that's a drastic romanticization of history, I can understand the core sentiment. Everything that has accumulated in the past creates what we call the present, while also providing evidence for what the future holds. From one of my favorite shows that will not be named, the importance of history and humanity is put like this:

A maniacal leader who garners power and establishes authoritative control over a society will terrorize his people with absolute impunity. The forces of those times are next to helpless as the reign continues, with no end in sight. However, as time goes on, the crimes of such a man are exposed and although retroactive, he can be impeached from the pedestal that he forced himself on. This is the value of history. The power of history lies within the words of the pages and the education that follows, and it has the capacity to bring down the mightiest men of the past, given enough time. This leads to the old saying, "the pen is mightier than the sword."

So, what am I saying?

Animals and humans are different species, but I believe that the reliance of human history separates mankind from other species more than simple biological differences ever could. If they taught history like this in high-school I think it would instantly shoot up in the power rankings of favorite classes. The value of history lies in its appreciation, not its regurgitation. So, next time you're walking downtown Toronto or your neighborhood, just ask "why is this here?" to any random thing (literally anything). Do this and I promise that you'll go so far back in the past that you'll forget how you started.

Thank you for listening to this Ted talk.

# KEV'S KITCHEN

Kevin Galido, 2T3



## Ingredients

For 24 cookies:

- 1 cup (226 grams/8 ounces) of unsalted butter
- 1 1/4 cups (9 ounces/250 grams) packed light brown sugar
- 3/4 cup (6 ounces/175 grams) white granulated sugar
- 2 1/2 cups (10.5 ounces/300 grams) all-purpose flour
- 1 1/2 teaspoon kosher salt
- 1 teaspoon baking soda
- 2 large eggs
- 2 teaspoon vanilla extract
- 2 cups (12 ounces) of semisweet/bittersweet chocolate chips

Winter has finally arrived in Toronto. This would also mean that the splendor and joy of the holiday season would warm our cold, empty hearts. Unfortunately, COVID has other plans... but there is another way to bring a festive mood into your home... eating copious amounts of sweets that will make you forget that your heart is ultimately empty. In this obligatory recipe section of The Monograph, here is my personal favourite recipe for **chocolate chip cookies**. These cookies have the right balance of a crisp exterior and a soft interior. When you're feeling down, one cookie will assuredly make you feel much better... maybe that's the copious amounts of sugar and butter but you'll feel good, trust me.

Also use a weighing scale. Anyone who bakes without a food-grade scale is asking for failure.

## Instructions

1. Melt the unsalted butter in a pan and let it cool to room temperature
2. Whisk the flour, salt, and baking soda in a medium bowl
3. In a separate bowl, whisk the brown and white sugars. Break up any large chunks using the whisk or your fingertips.
4. Add the melted butter to the sugar bowl and whisk vigorously for 1 minute until the mixture becomes homogeneous and pulls away from the sides of the bowl

*(You will notice that the mixture is initially dark brown and that it becomes lighter as you mix. Stop mixing when the mixture becomes a pale brown)*

5. Whisk one egg to the sugar-butter mixture and incorporate fully. Repeat for the second egg
6. Add the dry ingredients to the wet and fold using a spatula to fully combine
7. Stir in the chocolate chips
8. Allow the dough to rest in the refrigerator for at least 10 minutes (overnight is best)
9. Preheat the oven to 375°F
10. Scoop the rested dough into 2-ounce portions and place on a parchment lined baking tray

*(Make sure you're giving each 2-ounce ball around 3-inches of space from adjacent cookies on the tray)*

11. Bake for 12-16 minutes

*(After 12 minutes the cookie will not be firm at all. Do not fret, the cookie will continue baking even when removed from the oven. If you prefer softer cookies, bake for 12 minutes. Harder cookies? 16 minutes.)*

Store them in a sealed container and they should remain fresh for a couple of weeks; but I doubt they will last that long. Finally, if you're health conscious and want to know about the nutritional information, don't ask. Really... don't ask.

<3 Keb

# Miso Soup Recipe

*Runyang Yin, 2T3 Monograph Rep*

I am an enthusiast for Japanese culture, but I am especially interested in Japanese cuisine. Since COVID-19 started this spring, I have been trying new recipes at home in my free time and one thing that I make with every meal is miso soup. Known as one of the most popular comfort foods of the Japanese people, miso soup is a savory broth that is full of nutrition and flavor. It is the soup that comes with every sushi order when you do dine-in at a Japanese restaurant and I am sure it made you go “wow!” the first time you tried it. Today, I want to share with you my simple and creative way of making miso soup at home. Yes, miso soup can be made at the convenience of your kitchen and it takes no more than 15 minutes to prepare.

Before we get started, it is important to know that miso soup is made from miso paste, which is made from fermented soybeans. The soybeans are mixed with salt and a mold called koji (which is also used to make Japanese sake). The good news is that you can buy miso paste from basically any Asian supermarket in the GTA and you never have to make it from scratch. The rest of the soup is literally up to your creativity, that is, you can add whatever you want into it! So without further ado, let me tell you what I add into my miso soup.

When I shop for miso paste, I always pick the one that comes with dashi, which is made of seaweed and dried bonito fish flakes. Traditionally, miso dashi provides all the flavors of the soup so it is important that you buy a box of miso with dashi included if you do not want to spend extra time making the dashi broth. Alternatively, if you want to make your own dashi (which is not covered in this article), you can buy red miso and add the two together yourself.

I can't really tell you how much miso I add to my water, because I just keep adding miso until I feel like the flavor is just right for my family. Miso dissolves rapidly in boiling water and will sit nicely on the bottom of your

bowl after it has settled, so you can keep adding more miso without anything to worry about.

The next part is where you add your favorite vegetables and tofus. I love adding a lot of green onion, thin slices of fried tofu, seaweed (dried wakame), and sometimes even mushrooms and Chinese cabbage if I want more greens in my bowl. If you cannot make fried tofu, you can simply add soft tofu and it will taste just as good. Just like before, the amount of ingredients you add is entirely up to your liking. If you really like a particular vegetable, go ahead and add it in!

And that is it. I hope you will try this 15-minute recipe at home and share your warm and delicious product with your loved ones on one of these chilly winterdays. Good luck with the rest of the semester and stay safe!





# VEGAN NUTELLA

*with 3 ingredients for under 4 bucks!*

Ghazaleh EA, 2T1



For those of you who visit my Instagram page, you know that I love home-made food, especially with fresh and simple ingredients.

Here, I want to share a very simple and delicious **Vegan Nutella recipe** that you can make at home for **under \$4.00!** This one is way healthier than the original and tastes very similar!

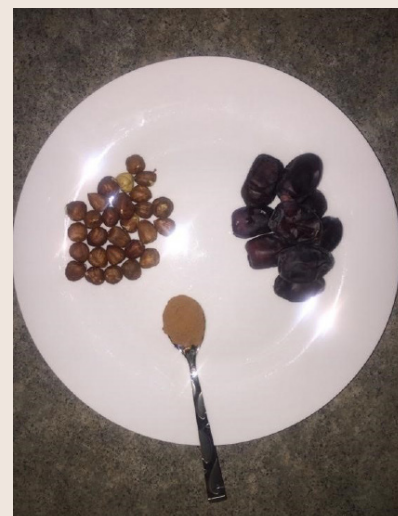
This recipe with step-by-step images and videos are available on the highlights on my IG page.

## Ingredients:

- Unsalted Whole Hazelnuts
- Dates
- Cocoa Powder

## Kitchen Equipment:

- Access to an oven
- Food processor or blender



Ingredient (quantity)	Cost per package	Cost for this recipe
Unsalted Whole Hazelnuts (100g)	\$2.97 (for 100g bag) <sup>1</sup>	\$2.97
<u>Mazafati</u> Dates (~100g)	\$4.00 (for 600g box) <sup>2</sup>	~\$0.70
Cocoa Powder (4 teaspoonful ~12g)	\$3.97 (for 226g box) <sup>3</sup>	~\$0.25
Total Cost for this Recipe:		\$3.97

1. Walmart.ca; GreatValue Whole Hazelnuts
2. khoraksupermarket.com; Black Emerald Mazafati Dates
3. Walmart.ca; Hershey's Cocoa Natural



**Step 1:** Roast hazelnuts in the oven at 350°F for 12-15 minutes (to warm up the oil inside). Do not burn them!

**Step 2:** Let the hazelnuts cool at room temperature for 5-10 minutes. Then using a clean cloth or hands (if they are cool enough), shed off the skin.

**Step 3:** Add hazelnuts to a food processor or high speed blender until hazelnut butter is creamy and smooth.

Note: My food processor is a KitchenAid MiniFood Chopper. It is on sale now for \$49 at both walmart.ca and canadiantire.ca.

**Step 4:** Remove pits (or seeds) from Mazafati dates

*(Continued on next page)*



*Step 5:* Mazafati dates are very fleshy. But if your dates are not fleshy, then you might want to soak them in water the night before. Then, add the pitted dates (seedless) to the food processor and mix. Add 1-2 tablespoons of water to the mix to prevent caking (if you soaked your dates, use that date water!)

*Step 6:* Add cocoa powder at this point. You can add as much as you want! My suggestion is 4-5 teaspoons.

*Step 7:* Continue to blend or mix until desired consistency is reached.

*Step 8:* Transfer to a glass jar and keep in the fridge for a few hours.

*Step 9:* Enjoy with a toast and a cup of hot tea!

If you would like to see images and videos of step-by-step process, consult my page and see the highlights. Don't forget to support by following my page @TheDeerLyfe.

If you did end up trying this recipe, tag me and use my hashtag #FOODILYFE !

Have Fun!

## Pharmacy Shout-Outs!

📣 Ben D'Mello is single and ready to mingle

📣 shout out to sda ur pretty cute styl

📣 Shoutout to the 526 pham <3

📣 Love my pharmacisters ❤️

📣 Rachel Ma - so fun to play games with and super cheerful

📣 Shout out to Stephanie Lau for being a wonderful phriend <3

📣 s/o to Andrew Tu, for always being there for me and being a huge support <3

📣 Shout out to Mr. Lau, send it brother

📣 I would like to give a shout out to Sabih for being my bhai and supporting me throughout this rough year

📣 Kaleb Nguyen my boiiiiii

📣 To Kishan, my artsy friend: i'm so glad we met, let's continue to support each other! 😊

📣 All I want for Christmas is AVO cause he's the gift that keeps on giving :)

📣 Thank you to ato, for being the worst imposter in all the deception games we play

📣 s/o to all the pear

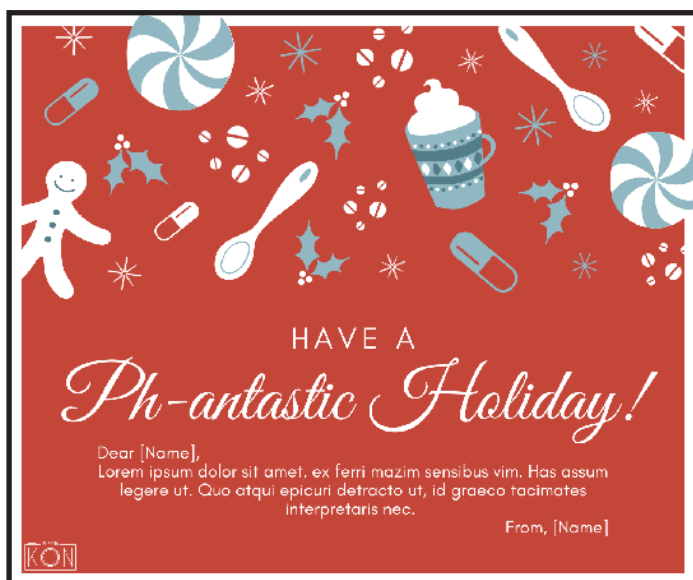
# Pharmakon's 2020 Holiday Cards

Pharmakon's 2020 Holiday Cards are now on sale!

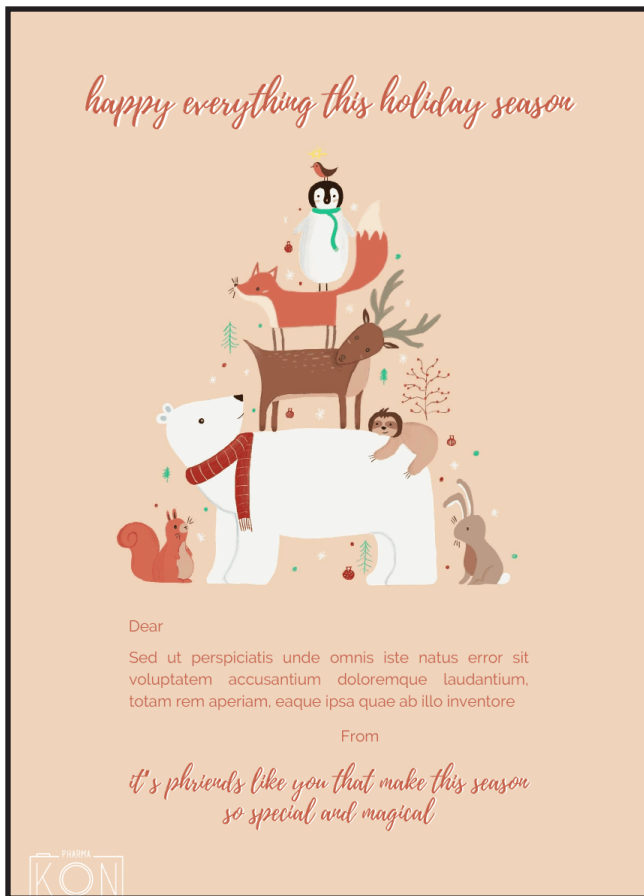
One card is for \$2 and three are for \$5. Order here from <https://forms.gle/FmycAEj2rsFGoe067>

Sales end on Dec 11th and will be sent out Dec 23rd at 12pm.

Send these cards to your friends and spread some festive cheer!







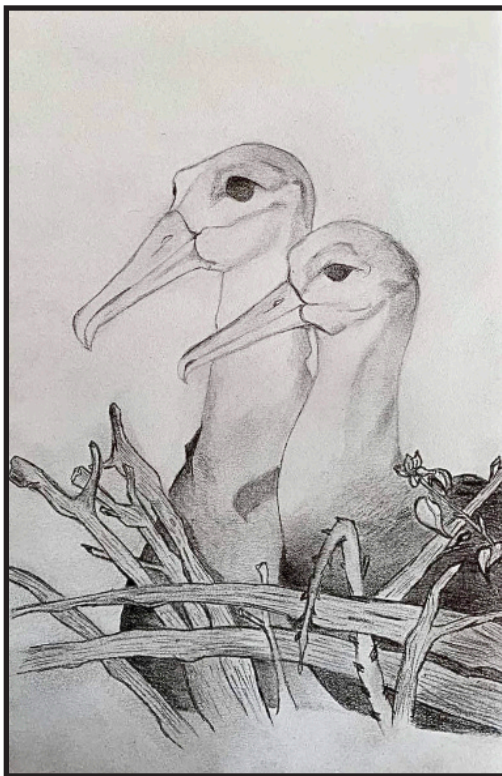
# Artist Spotlight



Stephanie Lau, 2T2



Khoa Dang, 2T3



Pooja Patel, 2T4



Hebah Arabi, 2T1



# Artist Spotlight



Rachel Ma, 2T4



Al-Amin Ahamed, 2T4



Al-Amin Ahamed, 2T4



Rachel Ma, 2T4





