



We did it! Online Membership Renewal

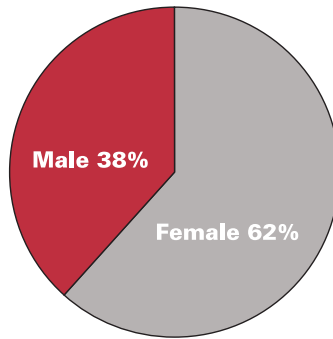
SCP online membership renewal was live from the NAPRA website for the 2007-08 membership year! 330 members renewed online — tremendous for the first year. Favourable comments were heard from many of the members that used the online renewal. To those members that identified some issues — thank you for that. Suggested changes have been made. Renewing your membership online is quick, easy and paperless — we look forward to increasing the user numbers for 2008-09.

To ensure security for you the member, the website has been closed until it is time for the 2008-09 membership renewal interval, and

all fee payment information (i.e. credit card numbers) has been deleted from the website.

This office is currently working on the Online Pharmacy Permit Renewal design and acceptance

testing. Online pharmacy permit renewal will be available for the 2007-2008 Proprietary Pharmacy Permit renewal — login and password information will be forwarded to each pharmacy manager later in the fall.

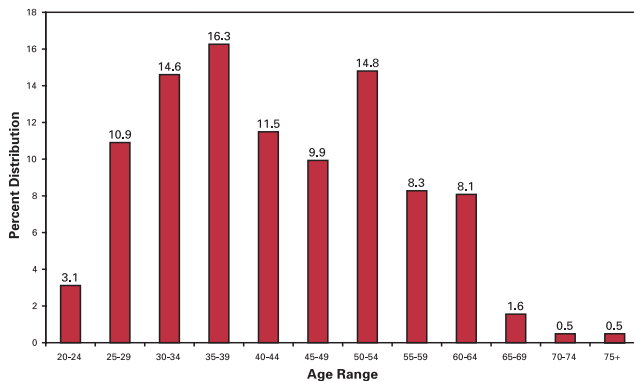


Gender Distribution

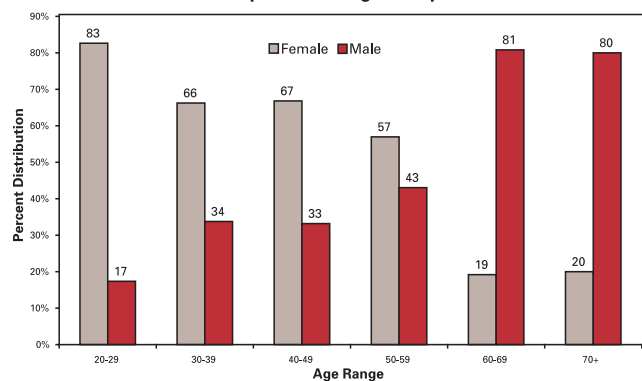
Canadian Institute for Health Information (CIHI) Data Analysis

As reported to members earlier, one of the reasons for the on-line membership renewal was to facilitate reporting to CIHI. They have completed their analysis of our first year data, and we are displaying a sample of the charts from this data for your information.

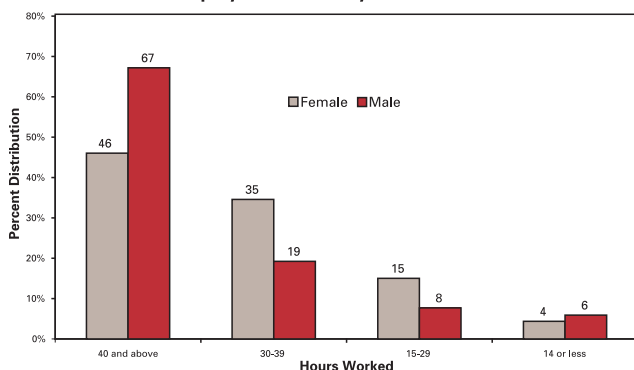
5 Year Age Range Distribution - Percent



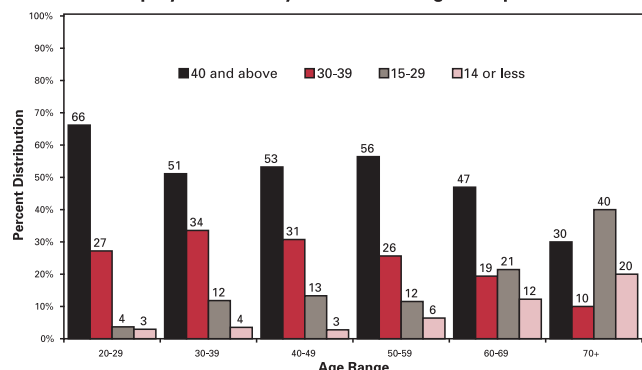
Gender Split Within Age Groups - Percent



Employment Hours by Gender - Percent



Employment Weekly Hours Within Age Groups - Percent



SCP Council 2007-08

Division 1

Jodie Simes, Fort Qu'Appelle
(term expires June 30, 2009)

Division 2

Terri Bromm, Tisdale
(term expires June 30, 2008)
Vice-President

Division 3

Randy Wiser, Prince Albert
(term expires June 30, 2009)

Division 4

Bev Allen, Saskatoon
(term expires June 30, 2008)
President

Division 5

George Furneaux, Regina
(term expires June 30, 2009)
President-Elect

Division 6

Joe Carroll, Moose Jaw
(term expires June 30, 2008)

Division 7

Debbie McCulloch, Rosetown
(term expires June 30, 2009)

Division 8

Janet Harding, Saskatoon
(term expires June 30, 2008)

Past President

Jeannette Sandiford, Weyburn
(term expires June 30, 2008)

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College of Pharmacy and Nutrition,
Saskatoon

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Justin Kosar

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Assistant Registrar

Pat Guillemin,
Administrative Assistant

Ray Joubert,
Registrar

Cheryl Klein,
Senior Administrative Assistant

Reola Mathieu,
Receptionist

Heather Neirinck,
Administrative Assistant

Lori Postnikoff,
Field Officer

Audrey Solie,
Administrative Assistant



Pharmacists across the country are collaborating on drafting an action plan for the profession in Canada. This *Blueprint for Pharmacy – Designing the Future Together* is designed to strengthen the profession's alignment with the health care needs of Canadians, and to respond to the stresses on the Canadian health care system. The *Blueprint for Pharmacy* addresses several areas of change required if the expanded role of pharmacists is to be reached. It is important for all pharmacists to provide your valuable insights on the Blueprint, as it may have an affect on your future practice.

To complete the online survey and/or review and comment on the complete *Blueprint for Pharmacy* draft document go to www.pharmacists.ca/blueprintconsultations.

If you have any questions please contact Marie-Anik Gagné, Director, Policy and Research, CPhA at 1(800) 917-9489 ext. 225 or mgagne@pharmacists.ca.

A Summary of Respondents to July 31, 2007

Which best describes your place of employment? (*CIHI Categories)

Response	Percent	Count
Hospital and Other Health Care Facilities*	37.89%	94
Community Pharmacy*	40.2%	100
Other Pharmacy*	0.0%	0
Group Professional Practice/Clinic*	1.2%	3
Community Health Centre*	0.4%	1
Other Community-Based Pharmacist Practice*	0.4%	1
Post-Secondary Educational Institution*	4.0%	10
Association/Government/Para-Governmental*	3.6%	9
Health Related Industry/Manufacturing/Commercial*	0.4%	1
Community Pharmacy Corporate Office*	1.2%	3
Student	7.6%	19
Other	3.2%	8

In which province do you currently work (or study if you are a student)?

Response	Percent	Count
Newfoundland and Labrador	2.9%	7
Nova Scotia	8.2%	20
New Brunswick	6.2%	15
Prince Edward Island	0.0%	0
Quebec	2.1%	5
Ontario	25.8%	63
Manitoba	1.6%	4
Saskatchewan	5.3%	13
Alberta	36.1%	88
British Columbia	11.5%	28
Northwest Territories	0.4%	1
Yukon	0.0%	0
Nunavut	0.0%	0

Signing Authority for Controlled Substances Orders in Hospitals or Health Centers

The following is a response from Andrée Bernard, B. Pharm., Office of Controlled Substances, Health Canada to a question issued by the College regarding nurses ordering controlled substances for a hospital or health center.

“With regard to pharmacies selling controlled substances to hospitals, this practice is authorized under Section 35 of the Narcotic Control Regulations and Section G.03.005 of the *Food and Drug Regulations*. The pharmacist must first receive a written order, signed and dated either by the pharmacist in charge of the pharmacy department at the hospital or by a physician authorized by the person in charge of the hospital to sign such an order on behalf of the hospital. A nurse is not authorized to sign such an order and, should a pharmacy receive one, the pharmacist should not fill it. For targeted substances, Section 55 of the *Benzodiazepines and other Targeted Substances Regulations* describes conditions under which a pharmacist is authorized to provide or sell a benzodiazepine or a targeted substance to a hospital. As for narcotics and controlled drugs, a nurse is not, at this point in time, authorized to sign an order on behalf of a hospital.

For rural hospitals or health centers, the status of these establishments must first be established. If they meet the definition of a hospital as per regulations related to controlled substances, these regulations therefore apply. Referring to the *Narcotic Control Regulations*, a “hospital” means a facility (a) that is licensed, approved or designated by a province in accordance with the laws of the province to provide care or treatment to persons or animals suffering from any form of disease or illness; or (b) that is owned or operated by the Government of Canada or the government of a province and that provides health services. A hospital may be an

establishment that provides care or treatments to outpatients as well. However, if the establishments you are referring to are rather private clinics, a physician may order controlled substances for professional use only and will have to keep the appropriate records as requested by applicable regulations.”

For clarification, the College asked specifically, “what if the person in charge of a hospital is a nurse, and/or what if the person in charge of a hospital designates a nurse as the signing officer?”

Beatrice Lee, Compliance Officer, Compliance, Monitoring and Liaison Division responded:

“As per section 35(1) of the *Narcotic Control Regulations* (NCR), a pharmacist may provide a narcotic to an employee of a hospital or a practitioner in a hospital if the written order for the narcotic is signed and dated by a pharmacist in charge of the dispensary of the hospital or a practitioner who is authorized by the person in charge of the hospital to order the narcotic. At this time, there are no provisions under the NCR that authorize a nurse to sign a written order for narcotics.

Section 65 of the NCR describes the different circumstances where the person in charge of a hospital may permit a narcotic to be sold, provided, or administered. However, this can only be conducted upon receipt of a prescription or a written order signed and dated by a practitioner or pharmacist. The NCR does not stipulate who can be designated as the person in charge of the hospital. Therefore, a nurse can be designated as such, but the nurse is not authorized to sign for an order.

Section 63(2) of the *Benzodiazepines and Other Targeted Substances Regulations* states that a pharmacist or practitioner who is authorized by the person in charge of the hospital can order targeted substances on behalf of a hospital.”

Drug Schedule Bylaw Amendment – Fexofenadine

Based on The National Drug Scheduling Advisory Committee recommendation, Council approved and submitted to the Minister of Health an amendment to Schedule III Status for fexofenadine products:

Fexofenadine HCl (in products marketed for paediatric use — under 12 years of age) will remain in **Schedule III**.

Fexofenadine HCl (in products marketed for adult use — 12 years and older) is now **Unscheduled**.

This drug schedule amendment became effective August 31, 2007, upon publication in the Saskatchewan Gazette.



What this means is *fexofenadine products marketed for paediatric use — under 12 years of age* can only be sold in a pharmacy, in the public access area in the professional services area of the pharmacy.

Fexofenadine products marketed for adult use — 12 years and older is now **Unscheduled** and may be sold from any retail outlet.

Complaints/Discipline Process – Responsibilities and Obligations

Under authority of *The Pharmacy Act, 1996* (the “Act”), the mandate of the Saskatchewan College of Pharmacists is protection of the public. In instances where the public feels that it has been harmed in some manner by a member of the profession (i.e. incompetence or misconduct) or by a proprietor (i.e. misconduct) who operates a pharmacy, the Act provides direction for the process of investigation and if need be hearings into such allegations of violations.

The Complaints and Discipline Committees believe that as a self-regulating profession it serves both the complainant and the member or proprietor to have a well defined complaints/discipline process.

All written complaints are investigated. The Complaints Committee (the “Committee”) is a group of practising members and one public member, who are charged with investigating these allegations. It is incorrect to believe that because there is a complaint submitted that the member is going to be disciplined. In fact, only a small proportion of complaints proceed to discipline, occurring only after thorough investigations being conducted, and due process being followed.

Should a member be contacted either as the subject of a complaint or as a witness to a situation that is the basis for a complaint, a member is obliged under the Code of Ethics to assist the Committee with the investigation.

During the investigation, if applicable, the Committee may, with the consent of the member or proprietor, refer the complaint to an alternative dispute resolution process. If the complaint is not resolved through this process, the com-



Discipline Committee Decision and Order

On March 28 – 30, 2007, the Discipline Committee (the “Committee”) was constituted to consider charges that the Respondent, Robert M. Jones, was guilty of professional misconduct within the meaning of section 25 of *The Pharmacy Act, 1996* (the “Act”).

In summary, the charges against Mr. Jones alleged that while acting as pharmacy manager of a proprietary pharmacy operated by Malcolm-Mark Enterprises Ltd. (“MME”), and/or in the capacity as a director of MME, he did abandon, in vacant commercial premises, voluminous records and items related to the practice of pharmacy which records and items included, inter alia, prescriptions for narcotics and controlled drugs, billing records, pharmacy claim statements, medication profiles and photographs of individuals.

The charges arose out of the discovery of pharmacy records and other items at commercial premises formerly leased by MME in Regina. As a result of investigations conducted by the College, it was determined, and not contested, that

certain of these records were confidential patient files, and related records, from pharmacies previously operated by Malcolm-Mark Enterprises Ltd.

In a Decision dated April 4, 2007, the Discipline Committee found Mr. Jones guilty of professional misconduct on the charge specified above. (Mr. Jones was found not guilty on a second charge.)

The following excerpt is from the decisions of the Discipline Committee:

“... on Mr. Jones’ own account of events, he took no steps to determine what became of the records left at the Shopping Mall. Mr. Jones did nothing to ensure that these records had been left on a basis that provided any assurance that patient confidentiality would be protected. In any event, it is completely clear that whatever thought he put to the matter, Mr. Jones did nothing to protect these records. In these circumstances, even if Mr. Jones genuinely believed at the time that Deloitte & Touche had taken control and possession of the confidential records, Mr. Jones’

actions would amount to professional misconduct.

....

Although it is reasonable that a director of a corporation that operates a proprietary pharmacy may delegate the carrying out of the day to day affairs of the pharmacy, it is also equally clear ... that the corporation’s directors are responsible for ensuring that adequate policies, practices and procedures are put into place to provide a reasonable assurance that the duties owed by the corporation in relation to the pharmacy are fulfilled. This is the inherent policy of the Act, which requires in section 19 that the majority of the directors of a corporate-owned pharmacy be pharmacists. In the present situation, whatever policies and procedures Mr. Jones had put into place while MME was a going concern, these procedures did not exist at the point of the abandonment of the records themselves. No reasonable basis existed for Mr. Jones to believe, as a director of MME, that the confidentiality of MME’s records left at the Shopping Centre had been safeguarded.

plaints/discipline process would continue.

At the conclusion of the investigation, according to the Act, the Committee has two options:

- recommend no further action, at which point the file is closed; or
- recommend that the Discipline Committee hear and determine the formal complaint.

When a complaint is referred to the Discipline Committee for hearing, the member is notified and a date and location for the hearing is finalized.

The Discipline Committee consists of other practising members and a public member. No person who sits on the Complaints Committee may sit on the Discipline Committee.



Using the analogy of a court of law, the Discipline Committee fulfills the role of the 'judge and jury', in that they hear evidence from both parties and make a decision. If the member or proprietor is found guilty of the allegations brought forward, the Discipline Committee then has the disciplinary powers under the Act to make one or more orders (i.e. penalties).

The Complaints Committee, through their solicitor, functions as the prosecution and presents evidence that has been gathered through the investigation. Evidence gathered during the investigation is given to the member prior to the hearing following the court rules of disclosure.

The member or proprietor who is

the subject of the complaint would be the respondent or defendant in the above court analogy. The respondent has the right to be represented by counsel at his/her own expense.

As stipulated in the Act, the Discipline Committee may accept any evidence that it considers appropriate and is not bound by rules of law concerning evidence. All testimony is to be under oath or affirmation and there is full right to examine, cross-examine and re-examine all witnesses and to present evidence in defence and reply.

A respondent has the right to appeal a decision or order of the Discipline Committee to the Council or to a judge of the Court of Queen's Bench as prescribed in the Act.

The unfortunate, but inevitable, conclusion is therefore that Mr. Jones abandoned the Confidential Records when MME ceased to be a going concern.

The Discipline Committee also has no hesitation in concluding that Mr. Jones' abandonment of the records constitutes professional misconduct. The abandonment of these records is clearly harmful to the best interests of the public, harmful to the best interests of the members of the College, and clearly harms (in a substantial way) the standing of the profession, given the consequences that can follow as a result of the failure to safeguard this information. Although no patient appears to have been harmed in this case, this outcome was fortuitous."

In the Order dated May 24, 2007, the Discipline Committee made the following orders pursuant to section 34 of *The Pharmacy Act, 1996*:

1. Mr. Jones shall pay a fine of \$4,000 on or before June 30, 2007, failing which his licence to practise pharmacy shall be suspended until payment is made;

2. Mr. Jones' continued practice as a pharmacist shall be subject to a condition that for a period of five years he shall have in place, and then shall adhere to, a documents and record retention and destruction policy satisfactory to the Registrar of the Saskatchewan College of Pharmacists. This condition to practise shall not apply when Mr. Jones is practising as a licensed pharmacist in a pharmacy in respect to which he is neither the pharmacy manager and which is not owned or operated by a corporation in respect to which he is not a director. For the purposes of this condition, if Mr. Jones is currently a director of a corporation holding a proprietary pharmacy permit, or is serving as a pharmacy manager, he shall have 60 days to put into place a documents record retention policy satisfactory to the Registrar. For greater certainty, nothing in this condition to practise shall limit the obligations of Mr. Jones (either before or after the five year term of the condition) under

any act, regulation, bylaw or other ethical or legal standard or obligation, nor shall anything in this condition to practice limit the powers or authority of the Registrar or the Council of the Saskatchewan College of Pharmacists under *The Pharmacy Act, 1996*;

3. Mr. Jones shall pay costs of the investigation and hearing in the fixed amount of \$35,000. If Mr. Jones requests, he may pay these by way of instalments as follows: \$8,000 on or before June 30, 2007; \$8,000 on or before September 30, 2007; \$8,000 on or before December 31, 2007 and \$11,000 on or before March 31, 2008, failing payment of any of which Mr. Jones' licence to practise pharmacy shall be suspended until payment is made; and
4. A summary of the Discipline Committee's Decision and this Order (including, for greater certainty, Mr. Jones' name) shall be published in the newsletter of the Saskatchewan College of Pharmacists.

51st Convocation Luncheon

**TCU Place, Saskatoon
June 5, 2007**

The Saskatchewan College of Pharmacists proudly hosted the 51st Convocation Luncheon to recognize the Pharmacy Class of 2007 following the Convocation Ceremony at TCU Place in Saskatoon.

Master of Ceremonies, Mr. Doug Spitzig, a Past-President of SCP, welcomed everyone to the luncheon and congratulated the graduates on their achievements. Ms. Kim Smith, Pharmacists' Association of Saskatchewan (formerly the Representative Board of Saskatchewan Pharmacists) Board member, brought greetings from the Board.

Mr. Randy Wisner, Councillor and former Past-President of SCP, presented the College awards: The Saskatchewan College of Pharmacists Gold Medal Award was presented to **Lisa Marie Denie**; The Campbell Prize was presented to **James Andrew Lacey**.

Senior Stick Kim Sparrowhawk responded on behalf of the graduates; then led the graduates' recitation of the Oath of Maimonides.

Our best wishes go to the Class of 2007. We are pleased to note that the majority of the class has elected to remain in Saskatchewan to begin their careers. We welcome them to the College and encourage all graduates to become involved in the profession.



*Lisa Marie Denie
SCP Gold Medal Award*



*James Andrew Lacey
Campbell Prize*

CFP Announces New Executive Director

Christina Bisanz, President of the Canadian Foundation for Pharmacy, is pleased to announce the appointment of Dayle Acorn to the position of Executive Director, effective July 9, 2007.

Dayle Acorn joins the Foundation after an extensive career in the pharmaceutical industry with AstraZeneca and more recently, Hoffmann LaRoche. Dayle has held progressive management positions in sales, marketing, market access and pharmacy services across multiple therapeutic areas.

"I am extremely excited about joining the Foundation at a time when the role of pharmacists is being expanded to recognize their unique skills and experience," says Acorn. "With the support of grass-roots pharmacists, and our various stakeholders, I believe the Foundation with its focus on innovation in practice, can make a difference for the future of pharmacy."

Since 1945, the Canadian Foundation for Pharmacy has been engaged in activities that promote the advancement of the profession of pharmacy. The mission of the CFP is to be a catalyst for change, developing and supporting evolving pharmacist care to optimize health outcomes. Through its Innovation Fund, the Foundation currently supports projects and research that facilitate this transition.

Staff Update

Over the past two years many have asked, "Who is that pleasant woman that answers the College phone?" It was none other than **Paulette Francis** — receptionist extraordinaire!

Sadly for the College, Paulette has decided to return to her home province, and has relocated to Nova Scotia. We all felt safe knowing Paulette was at the front guarding the door! Coffee breaks and lunches will never be the same at the SCP

office without Paulette's sense of humour and her Maritime charm of spinning a yarn. Our loss is certainly Nova Scotia's gain.

Two new clerical staff members have joined the Saskatchewan College of Pharmacists office.

On September 5, 2007, **Audrey Solie** joined our staff on a part-time basis as Administrative Assistant in the registration and licensing area, replacing Connie Borsa. Audrey comes to us with considerable

administrative and clerical experience with municipal and provincial government.

Reola Mathieu, full-time Receptionist/Clerk became part of the staff on September 24th. She comes to the SCP office with reception experience in the health care and continuing professional learning fields.

Please welcome these new staff members as part of the SCP team.

Saskatchewan College of Pharmacists District Meeting Schedule

Please mark your calendar with the date of the District Meeting in your area, and participate in the affairs of your College. Individual District Meeting Notices outlining the Agenda, dates and locations will be mailed to members in September.

District Meetings will be held around the province as follows:

Monday, October 1	Prince Albert – Marlboro Inn – Marlboro East
Tuesday, October 2	North Battleford – Golden Eagle Lodge
Wednesday, October 3	Kindersley – Kindersley Inn – 1/3 Ballroom
Thursday, October 4	Swift Current – Days Inn – Room “C”
Tuesday, October 9	Weyburn – Signal Hill Arts Centre
Wednesday, October 10	Moose Jaw – Temple Gardens – “C” Mezzanine
Thursday, October 11	Regina – Travelodge – Cambridge Room
Tuesday, October 23	Saskatoon – Sheraton Cavalier – South Room
Wednesday, October 24	Tisdale – Tisdale Recplex – Hanover Room
Thursday, October 25	Yorkton – Best Western Parkland Inn – Harvest Room

Meetings commence at 7:30 pm

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Esterhazy, SK (pop. 3,000)

has a beautiful golf course in a valley setting, swimming pool, tennis courts, skating arena/curling rink, fitness centers. Extensive cross country ski and walking trails and offers a variety of seasonal sporting activities/clubs for youth and adults.

The town is situated close to lakes, parks, snowmobile trails and downhill ski areas.

Elementary (K-5) and High School (6-12) offer excellent academics and extracurricular programs.

Mosaic Potash, the main employer of the town, operates two mine sites in the area.

Please submit resume to:

Keith Sapara

Sapara's Drug Mart Ltd.

P.O. Box 250, Esterhazy, SK S0A 0X0

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Fax: (306)745-6654

Email: rksapara@sasktel.net



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Prescription Review Program



The Prescription Review Program (PRP) relies upon accurate and complete data submitted electronically from pharmacies to the ADAPT database in order to function properly. Recent monitoring through the PRP suggests that some prescriptions are not being transmitted and captured through the ADAPT database. Thus, this data is not available to the PRP for monitored drugs, nor to pharmacists and other health care professionals for viewing on the PIP (Pharmacy Information Program) viewer. The law requires that all prescriptions, including PRP prescriptions, be transmitted and captured by the Saskatchewan Prescription Drug Plan whether they are adjudicated by Saskatchewan Health or another third party paying agency. Most concerns seem to occur with Non-Insured Health Benefit clients.

It is essential to have accurate information for the PRP partners through the Prescription Review Program and the pharmacists of the province through the Pharmacy Information Program (PIP) to conduct proper medication reviews and provide good patient care.

The College of Physicians and Surgeons is very concerned that they are unable to properly monitor Prescription Review Program data as it may be incomplete and ask that all pharmacies takes steps to ensure they are transmitting the required prescription information. More serious cases of missed information may result in a formal complaint to the Saskatchewan College of Pharmacists.

Karen Wolfe Appointed Executive Director of NAPRA

Recently, the National Association of Pharmacy Regulatory Authorities appointed Karen Wolfe as NAPRA's Executive Director. Following the resignation of Ken Potvin in March 2007, Ms. Wolfe was appointed Interim Executive Director. She joined NAPRA as the Director of Pharmacy Practice Support in June 2006.

From the NAPRA News Release of September 5, 2007, NAPRA President Sandra Carey quotes, "We are very fortunate to have such a dynamic person as part of the NAPRA teamThe Board members appreciate her commitment to NAPRA during this period of change, and join me in congratulating Karen for her solid stewardship."

Ms. Wolfe graduated with a Bachelor of Science in Pharmacy and Pharmaceutical Sciences from the University of Alberta; and has also completed a Masters of Business Administration.

We congratulate Karen on her appointment, and we look forward to working with her in the future.

MEMBERSHIP SUMMARY

As of July 1, 2007, there were a total of **1397 members** on the register, compared to 1372 last July 1. The total consists of 1185 Practising members, 61 Non Practising members, 85 Associate members and 66 Retired members.

We wish to welcome our newest members, and encourage them to become active in their profession within their communities and provincially by working with the regulatory and advocacy bodies.

Membership Renewal Summary – As of July 1, 2007

	2003	2004	2005	2006	2007
Practising Members	1116	1134	1158	1158	1185
Community	860	843	890	862	842
Hospital	171	174	175	179	185
Out of Province	33	34	37	33	37
Other	52	83	56	52	68
Conditional Practising			26	32	53
Non Practising Members	66	58	60	65	61
Associate Members	105	98	89	79	85
Retired Members	80	81	82	70	66
TOTAL MEMBERSHIPS	1367	1371	1389	1372	1397
Membership Terminations	75	65	63	77	67

From January 1, 2007, to June 30, 2007, 62 graduates of the College of Pharmacy and Nutrition, University of Saskatchewan, registered with our College. Between June 5 and June 30, a total of 53 of those graduates held a Conditional Practising membership prior to receiving their Certificate of Qualification from the Pharmacy Examining Board of Canada.

Between July 1, 2006, and July 1, 2007, 13 candidates from outside of Saskatchewan registered under the Mutual Recognition Agreement requirements. There were three foreign-trained candidates registered during that period.



Health Canada

Loss, Theft and Forgery

All those working with Controlled Substances (i.e. narcotics, controlled drugs, Benzodiazepines and other Targeted Substances) and precursor chemicals must take proper security measures. If a theft, loss or forgery occurs, it should be reported



to the local police immediately and must be reported to the Office of Controlled Substances, Health Canada — no later than 10 days after its discovery. You will find a standard form for reporting the loss or theft (except forgery) of a Controlled Substance at ... www.hc-sc.gc.ca/index_e.html and search "Loss & Theft Report". Forgeries are to be reported separately. To obtain a Forgery Report Form for Controlled Substances please call the Compliance, Monitoring and Liaison information line at 613-954-1541.

COLLEGE OF PHARMACY AND NUTRITION

Our sincere thanks ...

The annual "Golden Suppository Golf Classic" has been an important source of support for the College of Pharmacy and Nutrition for over 20 years. Proceeds from the Golf Classic support the College Research Trust Fund, enriching the professional programs of the College and helping ensure our students continue to receive the highest quality educational experience.

Golden Suppository Golf Classic 2007 Sponsors

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GlaxoSmithKline	Rexall / Drug Trading
Sandoz Canada	

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Scotiabank	Janssen – Ortho
RBSP / PAS	McKesson Canada
Apotex	Canadian Tire – Preston Crossing
Teva – Novopharm	Gennium Pharma
sanofi-aventis / BMS	London Drugs
PHARMALYTICS	PharmaChoice
U of S Faculty Club	Pfizer
IMS Health	Wyeth Consumer Healthcare

Silver (\$500 to \$999)

Pharmasave	Saskatchewan Blue Cross
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Bronze (Up to \$499)

Holiday Park Golf Course	Arco Graphics
Lothman Insurance & Consulting	ratiopharm

... and appreciation!

CPhA Centennial Pharmacists

June 3, 2007

On Sunday, June 3, 2007, during the 100th anniversary conference, the Canadian Pharmacists Association hosted a gala luncheon to recognize 100 pharmacists "who have made contributions to leading and building CPhA and the profession of pharmacy in Canada."

A Selection Committee was established to review nominations from across the country with selections made to "recognize the contribution to pharmacy and Canadian society made by these pharmacists as a consequence of their leadership and the positive profile they have brought to the profession."

The Saskatchewan College of Pharmacists is proud of the association with these University of Saskatchewan Alumni, as well as current and former members of this College who were recognized, each for his or her significant contributions to the profession.

CPhA Founders

Alexander Campbell
Robert Martin

Bev Allen
John Bachnysky
James (Jim) Blackburn
Gordon Duff
Wayne Hindmarsh
Raymond (Ray) Joubert
Stanley Lissack
Garth McCutcheon
Finlay A. Morrison
Kenneth A. Ready
Betty Riddell
Bruce Schnell
Barbara Shea
Patricia Smith
Gordon Stueck
Jack L. Summers
Bill Wilson