

AACP

2022 Digital Health Workshop

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Main Session Chat Log

01:41:44 Timothy Aungst, PharmD: Hello Everyone!!!

01:42:00 Nidhi Gandhi: Welcome everyone!!

01:44:31 AACP Host: Link to Pre-Work and other resources: <https://www.aacp.org/resource/digital-health-work-shop-resources>

01:50:06 Risa Vatanka: Dr. Kevin Clauson Endowed Scholarship
Lipscomb University
College of Pharmacy and Health Sciences
One University Park Drive
Nashville, Tennessee
615.966.7160

Memorial donations may be sent to the
Vanderbilt Ingram Cancer Center

<http://www.vicc.org/giving>

02:32:05 See-Won Seo: Great overview, George! Very interesting frontier we are approaching

02:32:30 Vickie Clark, WNEUCoPHS: What do you think about Metaverse for pharmacy?

02:32:38 MelissaMurerCorrigan: Thank you George! Great presentation

02:33:41 Mark Yorra: What do you think about large tech companies like Google, Amazon, Microsoft, etc getting into the data handling and distribution of personal health information? Thanks

02:43:39 Dr. Mohamed Baraka: @Sister Michaela: Yes, most of us are suffering from curricular hoarding as we want to teach everything that our students may need in the future. Therefore, I think, we should set (Curriculum committees & stakeholders) & think about the core knowledge & skills really required for future job market & for future roles in digitally-enabled care careers

02:45:03 Timothy Aungst, PharmD: I'll try to address this in the next talk. I think it's going to come down to individual colleges approaches and capabilities. Ravi and myself will also have a track on this topic.

02:46:47 nkemp.nonyel: How do you think that clinical pharmacy specialists should incorporate this digital health information in the conversation during rounds?

02:46:50 Dr. Mohamed Baraka: Thanks a lot Tim

02:50:44 Lisa Goldstone: @nkemp.nonyel. I think one of the best ways to incorporate digital health information into rounds is to tailor it to the individual patient being discussed and their particular needs. And to make sure to include the patient's preferences and values related to the use of digital health technologies in their care as part of the discussion

02:50:45 Samuel: How frequently do you monitor and intervene in patients with CGMs, do you have a dashboard that someone monitors and intervene with the patient in real-time?

02:55:50 Timothy Aungst, PharmD: @Samuel the CGM I am seeing more amongst those ambulatory care pharmacists involved with endo. Currently with Freestyle and Dexcom being the core CGM on the market it can come down to education and use of the devices, management of the data to target pharmacotherapy, and exploring time in range (TIR) as a metric point. I suspect, given some ongoing technology development which will lead to other companies making their own CGM devices (e.g. OneDrop) and possible real time glucose sensing that may not necessarily be classified as CGM we'll see more glucose sensing technology come down further targeting wellness/weight loss and activity alongside current diabetes management

02:56:02 Sarah Shrader: It is so great to hear directly from a patient to hear what you need from "us" (healthcare providers). This is a direct call to us as educators to be sure the future pharmacists that are graduating are prepared in digital health. Thanks for sharing Robyn!

02:56:40 Robyn Kaiser-Patient: You're very welcome Sarah!

02:57:29 Dr. Mohamed Baraka: Interoperability is a big challenge here

02:58:47 Timothy Aungst, PharmD: Interoperability will be something I think by the end of the decade we'll see developed to some level of broader use. CMS I suspect will put pressure (fines if you don't), and I think multiple orgs are orienting their standards to address those concerns as they see these products gaining mainstream adoption

02:59:31 Dr. Mohamed Baraka: Thanks Tim for sharing your insights

02:59:41 Samuel: Thanks Timothy.

03:02:15 Dayanjan Wijesinghe: Are we allowed to make comments?

03:02:17 Sara Mahmoud, Post-doc Fellow in Academia (Digital Health): Hello, this is Sara. I am working on implementing digital health in pharmacy education. I want to ask a question on what should be the procedure if some of the digital health tools does not function? How can the pharmacist be helpful in this aspect?

03:02:51 Sarah Shrader: Please comment in the chat for now.

03:02:56 Timothy Aungst, PharmD: I think Robyn is really articulating the issues that pharmacists can help educate and address with the transition of technology to provide patient monitoring services. Recognizing the limitations of technology and how to address issues that arise I think are key, similar to addressing ADRs/SE

03:02:59 Mark Yorra: The patient's ability to use the technology, whether it is voice activated or requires multiple steps is a challenge.

03:03:05 Mary Gurney (she/her/hers): Following up on Robyn's and Tim's comment about the issues she has had, the healthcare systems and the wider wearable companies environment - will it be regulations and/or malpractice cases that bring out better synchronization.

03:04:16 Timothy Aungst, PharmD: @Mary I think one environment I am watching closely is AI cars. I think industry standards for liability etc will be mimicked in healthcare. Does the company assume liability? How does insurance cover issues? What is user/consumer responsibility? HCP roles, etc.

03:05:17 Timothy Aungst, PharmD: Currently, to my knowledge, I have seen very limited formal publications on negative outcomes in Digital Health, which I think is a shortcoming. What is NNT/NNH for certain digital health services will need to be addressed

03:05:33 Timothy Aungst, PharmD: If we want to treat digital health with an EBM approach

03:05:40 Allison Bernknopf | she, her: Do we need to include as part of our training, how to get insurance companies to pay for this technology. That is often a hinderance, especially when one aspect of their health insurance is paying for the tech and another part of the plan (usually a different company) reaps the benefit. How do we have a more group effort to get this all covered?

03:07:03 Mary Gurney (she/her/hers): @Mark - Agree - my mom gets upset and frustrated when there are updates to just basic technology (FB, Fitbit, Windows) and to the software for her pacemaker. I know other patients that just roll with the changes. My concern is if issues happen for people like Robyn who are tech savvy - what might the repercussions be for patients who are not as tech savvy.

03:07:20 Timothy Aungst, PharmD: @Allison I think that's something that could be addressed. There's many of these devices/DTx products that are undergoing evaluation by orgs per managed care processes — If you want to read more see some of AMCP work — but leads to similar questions I think about addressing access to certain pharmacotherapy issues as well. Many of digital health products are either going through drug plans or medical claims so it is a bit hodgepodge approach

03:07:31 Lisa Goldstone: Thanks Kathryn for telling the audience about our approach to integrating digital health in the USC School of Pharmacy case conference course series! For those interested in learning more, I'll be talking about this in one of the tracks later today.

03:09:04 Dr. Mohamed Baraka: @Kathryn Litten: This is a great idea to integrate it while discussing cases/services

03:09:57 Bradley Phillips: Yes I agree! This year I am trying to emphasize digital education in our ambulatory care elective by having students utilize SMBG for the first half and provide CGMs and automated alerts in our course site for the second half leading to a reflection and application into diabetic patients. Digital health has a tremen-

dous avenue in outpatient pharmacy services.

03:10:01 Martina Snemis: Putting yourself in a patient's shoes is definitely beneficial for us, as students, to see how patients go through their daily lives with these monitoring tools - great idea for diabetes conversations!

03:10:36 Dr. Mohamed Baraka: But sometimes these tools are more than just tools. Regulatory affairs, acceptability & adoption in practice by physicians, their quality & reliability,etc!

03:10:37 Risa Vatanka: Great to hear @Bradley Phillips!

03:11:00 Timothy Aungst, PharmD: Nice to see that Kathryn and Bradley are integrating into the curriculum

03:11:28 Robyn Kaiser-Patient: Kathryn Litten - Having students wear CGMs is amazing! Having real world experience to speak with patients is paramount, versus just repeating info provided by the manufacturers

03:12:07 Timothy Aungst, PharmD: I'd like to see how Bradely and Kathryn got the devices, did you work through Abbott and Dexcom education grants?

03:12:34 Bradley Phillips: Yes I went through Abbott's educational grant

03:12:42 Kali VanLangen (Ferris State COP): I agree with Tim. As a Skills lab person, I would love to know.

03:12:43 JCaballero: This is great conversation but we need to focus on what Timothy Aungst talked about regarding pharmacists taking ownership of this technology

03:12:44 Khyati Patel: @Tim - Yes working with regional MSLs. These companies have educational grant programs.

03:12:46 Dr. Mohamed Baraka: Real world data/evidence about these DTXs sometimes is lacking

03:12:53 Risa Vatanka: Kudos to @Kathryn Perkins and her co-founders for creating a student organization (Digital Health & Informatics) where they invite digital health experts to present in monthly meetings to their interprofessional student members - great way to augment what the schools are doing to build awareness about the rapid advances at the intersection of health care and technology!!

03:12:58 Timothy Aungst, PharmD: That one seems good @Brad, the cap is 30 devices still from what I am learning

03:13:24 Timothy Aungst, PharmD: So good for electives still if faculty want to target it

03:14:16 Khyati Patel: We are doing faculty development program at RFU soon on DH with CGM focus and will be providing sensor samples for faculty to also try them out

03:14:30 Risa Vatanka: VCU College of Pharmacy also has a student developed organization (Pharmacists for Digital Health) that has successfully convened monthly meetings for 2+years bringing digital health experts from across the country to present and build awareness/knowledge among students - our future practitioners. :)

03:15:23 Dr. Mohamed Baraka: Nice to see you again @Risa

03:17:20 Kathryn Perkins-Student: We have loved collaborating with students from VCU and University of Pittsburgh as we have developed our organization. We all share virtual events! Our P1 student members went to a Pitt Innovation Lab event last week and came to me so excited about opportunities digital health!

03:17:37 Risa Vatanka: @Dr. Mohamed Baraka - great to have you join us again this year - with you here, we can call this a global digital health workshop!!

03:17:40 Mary Gurney (she/her/hers): Robyn - thank you for being on the panel!

03:18:30 Sarah Shrader: Breakout Discussion (1) Share your biggest ephiphany ("aha moment") from today (2) What is your biggest question you would like the pharmacist, student, or patient to answer when we get back together

03:18:33 Risa Vatanka: Wonderful hearing your experience/perspectives, Robyn!

03:29:19 Michael Perry: Breakout room 15: 1 Besides CGMS, what two or three technologies are you using or excited about incorporating into your practice

03:29:26 Krishna Kumar: great conversations

03:29:38 Tracy Marie Hagemann: Great point from our breakout: we need to loop in other professions (engineering students, designers, etc) into our interprofessional education especially where digital health is concerned.

03:29:40 Nancy Stern: Security of data

03:29:45 Nancy Stern: data

03:30:41 Sara Mahmoud, Post-doc Fellow in Academia (Digital Health): Break room 4: Geriatric population was perceived as a possible barrier to utilizing digital health, we also talked about how can we empower the community pharmacist to be a point of contact for any digital health malfunction

03:30:55 Fred Doloresco (He/Him): Room 5: With how fast things change in this area, how can we best prepare students to learn this independently as lifelong learners/after graduation.

03:31:09 Sara Mahmoud, Post-doc Fellow in Academia (Digital Health): But we talked about how elderly population is using technology so it is not perceived as a barrier anymore

03:31:32 Dawn Battise: Similar to Fred's comment: As a practicing pharmacist, how do you keep up with updates in digital health, especially if you are not in area where it is currently common/accepted? Learning to do this ourselves so we can pass this on to students.

03:31:41 Mary Gurney (she/her/hers): Breakout room 16: a couple of things: 1) using interprofessional activities to make sure that all healthcare professionals have exposure to digital health; 2) Remembering to not forget the patient and meet them where they are. Some patients may be very willing to use digital health and be active in their care and others may not want to have anything to do with digital health.

03:31:56 Aimon Miranda: Breakout room 9: Go-to resources to see what is out there in terms of digital health so that we can incorporate it into what we are teaching

03:32:12 Dr. Mohamed Baraka: @ Sara: Digital literacy is still a challenge plus internet connection & smart devices in low & middle income countries

03:32:27 Priti Patel (she/her): One of my fellow breakout room members discussed information overload from their CGM and that really resonated with me. We are about get data from so many sources, how will we triage it and cut through the noise? How do we teach that skill to students?

03:32:32 Jackie Wasynczuk: How might we be systematic in making sure these topics are covered from P1 to P4 year, vs seemingly random inclusion?

03:33:12 Mary Gurney (she/her/hers): @Jackie - great question.

03:33:17 Dr. Mohamed Baraka: Great point @Sara Shrader - IPE

03:33:58 See-Won Seo: From breakout 6: Please share your thoughts on advocating for patients to access/afford digital health (eg, wearables, CGM)

03:34:16 Ravi Patel: Our breakout room talked about the value of having the devices as educational tools, limitations when absent, and questions about pooled resources

03:34:18 Dr. Mohamed Baraka: What if the other students in the round have no knowledge at all regarding DH tools? one of my colleagues raised this concern!

03:34:34 Tracy Marie Hagemann: If this is another thing added to the pharmacist workload - can pharmacists especially in community practice actually take this on, on top of all their other activities? How to get reimbursed for this? Workload issues?

03:34:35 Catherine Cone (she/her/hers): @Jackie - we discussed that. could we approach it at a much higher level (like AACP has student learning workshops 3-4 times a year for all students at all pharmacy schools) so we could get the most recent data out to our students thus pushing our profession forward more quickly?

03:34:40 Lisa Goldstone: @Jackie. It is important for the curriculum committee to be involved to ensure an intentional approach throughout the program

03:35:49 Tarik Al-Diery: @DrMohamed - definitely agree. Our students and staff need to know the DH tools first, and what constitutes DH, then how to apply them, and assess the benefits

03:35:52 Timothy Aungst, PharmD: @Tracy I think this is the reason we are seeing alternative distribution models popping up, whether it comes directly from traditional community pharmacies I am not so sure (e.g., true pill, Phil)

03:36:17 Timothy Aungst, PharmD: I suspect will be hybrid delivery models

03:36:47 Nancy Stern: We have had our students work with engineering students at neighboring schools on projects which has worked well

03:37:33 Sister Michaela: As CGM and other digital health expand, we might have patients who don't know "how" to use the contingency methods...might not know how to use a glucometer

03:37:35 Ravi Patel: Great points from clinicians and patients about the varied roles pharmacy can offer. There are unique positions for the role of pharmacists in development (building tech), deployment (making it work in a clinical settings), and dispensation (working with a patient).

03:37:41 Mary Gurney (she/her/hers): @Jackie and others - Are there any other skills that we are teaching that "we" have scaffolded through the curriculum so that students have multiple times to practice for different types of cases? If we are - how can we use that "model" to identify the skills we want graduates to have.

03:39:32 Ashley W Ellis, PharmD, MBA, CDECS: @Kathryn That is a great idea! celebrating a creative approach

03:39:35 Dr. Mohamed Baraka: 8 PM in UAE

03:39:43 Risa Vatanka: Yes! Hackathons are an incredible way to bring health profession students together with computer science/engineering students to collaborate and ideate health/tech solutions to address health care's grand challenges.

03:40:15 Dr. Mohamed Baraka: Can't wait for Tim's talk

03:40:24 Kathryn Litten-Faculty: My email is kathryn.litten@austin.utexas.edu if anyone has any further questions

03:40:42 Mary Gurney (she/her/hers): @Tracy - along with Tim's comments, I think as a profession we need to "recruit" are patients to advocate for us to have more help (technician and pharmacists) to be able to provide services. Especially as companies move into the "healthcare" services provision.

03:40:56 Heather Aaron-Pharmacist: Thank you all for your time! Feel free to reach out with more questions to me at Heather.Aaron@ochsner.org

03:41:01 Robyn Kaiser-Patient: If anyone has other questions from a patient perspective, please feel free to email me at RobynRSTAR@gmail.com

03:41:20 Kathryn Litten-Faculty: Team 6 discussed how we can advocate for accessibility and teach our students accessibility!

04:22:42 JCaballero: 👍

04:41:01 See-Won Seo: Post-DH Institute, started to more routinely incorporate digital inhalers/devices in the Respiratory course and the RxTx Updates elective! Students have shown interest in DH innovations

04:42:05 Risa Vatanka: Fantastic @See-Won Seo - thanks for taking action! Great to hear the positive feedback from students

04:43:21 Sarah Shrader: <https://www.aacp.org/resource/digital-health-workshop-resources>

04:43:46 Dr. Mohamed Baraka: That's really helpful

04:44:26 Mariette Sourial: Will we receive those slides at the end?

04:44:50 Ravi Patel: New journal that was shared by a colleague: Mayo Clinical Proceedings: Digital Health

04:46:19 See-Won Seo: Joined the DiMe Society and found it a great interdisciplinary DH group to discuss issues in DH (they have journal club discussions too): <https://www.dimesociety.org/>

04:47:50 Jackie Wasynczuk: Thanks for all these resources! A resource I found helpful recently: <https://www.iqvia.com/insights/the-iqvia-institute/reports/digital-health-trends-2021>

04:48:09 Mary Gurney (she/her/hers): The slides should be posted on the AACP DHI website under Agenda and Resources <https://www.aacp.org/resource/digital-health-workshop-resources#preWork>

04:48:45 Dr. Mohamed Baraka: <https://portal-beta.healthxl.com/?s=opb7i>

04:48:54 Dr. Mohamed Baraka: Daily simple digest

04:49:21 Mary Gurney (she/her/hers): JMIR (Journal) may also have some things of interest. <https://www.jmir.org/>

04:50:17 Risa Vatanka: @See-Won Seo glad you joined DiMe and are experiencing the value!! Important that pharmacy is represented in these interprofessional organizations. :) They are a tremendous resource. Love their DiMe-A-Day (digital health word for the day email) - great way to increase knowledge daily in this rapidly advancing realm. We created a Digital Clinical Measures Micro-Playbook for Pharmacists (included in the AACP resource

page) - another valuable resource.

04:51:09 Tarik Al-Diery: How have you evaluated the facilitators and barriers of DH implementation within undergrad curriculums?

04:51:14 Earl Ettienne: Would all the resources listed in the chat be collated and stored under resources so we can come back to them?

04:51:22 Dr. Mohamed Baraka: You & DiMe are doing a great job Risa. Thanks a lot. I also learn from this

04:52:04 Risa Vatanka: Thank you for your tremendous thought leadership @Tim Aungst in digital health integration in pharmacy curriculum and pharmacy practice - you are an inspiration to us all!!!

04:52:09 Nidhi Gandhi: We will saving the chats so will be sure to compile the links being shared and add to the webpage

04:52:43 Dr. Mohamed Baraka: Many thanks @Tim for sharing your data-driven insights

04:53:00 Mariette: How do we implement in curriculum with faculty who are teaching those areas but are not comfortable with teaching about digital health?

04:53:02 Dr. Mohamed Baraka: Wonderful presentation Tim

04:53:51 Dr. Mohamed Baraka: @Mariette: Yes, this is a big challenge. Don't expect everyone to be with you on the same page regarding this hot topic

04:55:59 AACP Host: <https://www.aacp.org/resource/digital-health-workshop-resources#preWork>

04:56:24 AACP Host: <https://www.aacp.org/resource/digital-health-workshop-resources>

Track 3 Chat Log

13:49:00 Wesley Haltom: IPPE - Required counseling activities on remote monitoring devices and/or reflection assignments on devices found in community pharmacies

13:49:18 Anastasiya Shor: Review software from different perspectives- prescriber software, pharmacy software, hospital EHR record, all of the same patient to understand what each system looks like

13:49:18 Joan Hardman: Include in APPE reflective writing a paragraph on what types of digital health initiatives there were able to be involved with.

13:49:22 Tracy Marie Hagemann: Since I'm not even sure what types of DH our preceptors are using or aware of - providing preceptor development or even just surveying them to see what is being done.

13:50:00 Annette McFarland: JC on digital health topic, from digital health journal

13:50:25 Meghan Bodenber: We have skills-based competencies for our APPE students that they must complete prior to graduation. We could add competencies related to answering a patient question regarding a Smart device or application, and also educating a patient on continuous glucose monitoring device.

13:50:28 Wesley Haltom: One other idea I think we're definitely going to do: Adding boxes to our site descriptions so we can flag sites for being more immersive with devices/skills associated

13:50:53 Elizabeth Hearn (she/her): I'd like to start a virtual support group for our patients with diabetes; the APPE students can field questions from patients and mediate conversations

13:51:01 Funtó Babalola: giving students an active role in managing the technology on APPE rotations (ex: daily dashboard reviews to determine which patients require follow up or craft the text messages that are sent out)

13:51:23 Merna Tawadrous: At the end of an APPE rotation, possibly having the group of students create an online interactive seminar that would be presented to their peers of the same year. For example, present different ways Digital Health can be implemented or what barriers are there to implementation.

14:00:44 Risa Vatanka: <https://www.aacp.org/sites/default/files/dhw22/dhw-instructional-design-template-2022.pdf>

15:33:02 Sarah Peppard: As an IPPE activity, have students identify a patient problem that could be solved by a digital health tool

15:40:48 Sarah Shrader: Hi! Please tell them to be back at 4:25 and to also have taken a BREAK ON THEIR OWN during that time.

15:41:21 Sarah Shrader: Do they want to share and generate ideas together before workshop time? Other groups are doing that....but this is a smaller group than the rooms

16:19:14 See-Won Seo: Risa, may I ask if you know if anyone is precepting at a start-up for DH?

16:19:25 See-Won Seo: Or an established company like Google, etc

16:19:47 Risa Vatanka: Yes, there are a number of digital health start-ups that have students on rotation

16:20:00 Risa Vatanka: Arine takes students

16:20:08 Risa Vatanka: I can connect you to them

16:20:30 Risa Vatanka: Pear Therapeutics often has medical students - I'm sure they would be open to discussing pharmacy students

16:21:21 Risa Vatanka: Omnicell has fellowships

Track 4 Chat Log

12:45:47 See-Won Seo: @Ravi, how about an “Intersections” speaker series etc? Intersection of DH x public health -- so students can dabble in both

12:46:46 Jackie Wasynczuk: As a frame of reference, how many credits was the elective course? Vs how many credits to qualify to have a ‘track’?

12:48:50 Allison Bernknopf | she, her: How do you build that network of connections when you are new and don’t work in those fields?

12:50:58 Ravi Patel: @See-won - Definitely! Overlaps and complements are common with the intersections. We just hosted guests pharma sharing insights on the “clinical” impact and the regulatory impact of technology on their thoughts

12:51:17 Abby Kahaleh: @ Tim. Great point on the impact of building an e-professional network on pharmacy students careers.

12:51:51 Ravi Patel: @Allison - Great question and very common. If the experts in your area of practice are not “digital” in nature, it is likely a component of someone/some practice already in an area of practice.

13:00:11 William Petros - WVU SoP: discuss device assessment toos

13:00:11 Catherine Cone (she/her/hers): Med Adher would fit nicely into our curriculum - so digital health surrounding this concept would be a great start for us.

13:00:11 Ashley W Ellis, PharmD, MBA, CDECS: certificate program CE

13:00:11 Sarah Cox: Interdisciplinary elective: Design Thinking using DH to solve problems and innovate (including bioinformatics, engineering, business, etc students)

13:00:11 Abby Kahaleh: Using Digital Health to meet Healthy People 2030 goals

13:00:12 Jackie Wasynczuk: Conduct journal clubs every so often about literature related to digital health. Do a full “PIES” form

13:00:13 Mark Patterson: pharmacoeconomic evaluations of top 5 digital health tools. teaching ICER, ACER, cost-benefit analyses, cost utilities.

13:00:13 See-Won Seo: DH conference for patients where our students can interface to help teach/explore on DH

13:00:14 Samuel: Develop a project for students to survey how satisfied they are with digital health intrusiveness

13:00:14 Ravi Patel: Coffee/tea and conversation over a digital topic of interest with the presenter getting a baked good as a notifier of their presentation

13:00:14 Allison Bernknopf | she, her: Develop an introductory course, required for all students in the first semester to introduce the main concepts and then integrate content throughout other courses

13:00:18 Edward Chiyaka: Evaluate one wearable product focusing on its impact, uptake, and cost

13:00:21 Shanta Dube: I’m in public health -- ID public health topic and corresponding DHs and classify what they do

13:02:06 Earl Ettienne: Implement a simulation that is therapeutics driven showing the drug/transporter movement through the body.

13:02:11 See-Won Seo: Would be good experience for students to create their own DH consultant jobs through their app discovery experience

13:02:58 See-Won Seo: @Earl, that sounds very cool. Almost like the Magic School Bus episode where they travel through the human body

13:07:31 Ravi Patel: @Earl - I know this company’s videos (I don’t know about them as a product) that had this review of high throughput screening using a VR setting. Even if the VR is not function via YouTube here, I thought it would be worthwhile in sharing (<https://www.youtube.com/watch?v=1XgsPneo8FY>)

13:08:19 Earl Ettienne: Cool I will take a look

13:12:08 See-Won Seo: Thank you!

13:12:42 Jackie Wasynczuk: Thank you!

13:47:39 Sarah Shrader: That workshop webpage we keep directing everyone to. You will see the agenda and slides posted. Eventually the recording will be posted there after 2 weeks.

13:48:13 Sarah Shrader: Sorry that was meant as a reply to someone's question...but a good reminder for everyone as to where the recordings will be housed!

14:01:04 Sara Mahmoud, Post-doc Fellow in Academia (Digital Health): Thank you

14:13:41 Ravi Patel: VRx: How Virtual Therapeutics Will Revolutionize Medicine - <https://www.amazon.com/VRx-Virtual-Therapeutics-Revolutionize-Medicine/dp/1541699769>

14:22:09 Anastasiya Shor: Does this mean implementing an elective in digital health?

14:22:45 Sarah Shrader: Yes we want you to think about it differently then the last session. So elective, track, certificate, etc.

14:23:14 Ravi Patel: @anastasiya - It can be in any education format as long as it addresses digital health across a curriculum

14:31:35 Anastasiya Shor: Survey all faculty to learn of the unique digital health capabilities on each site and publish results

14:31:35 Julie Murphy: Create a DH certificate program for an audience that goes beyond pharmacy/pharmacists

14:31:36 Mark Yorra - Northeastern University, Boston: Home health care in a digital age

14:31:36 Caleb Class: Wear a pulse oximeter overnight, upload and analyze the data!

14:31:37 Abby Kahaleh: Using Digital Health for Patients ECHO Monitoring

14:31:37 Sara Mahmoud, Post-doc Fellow in Academia (Digital Health): Elective informatics and research course which consists of: DTx research + affiliated with community pharmacies -> graduate with honors project

14:31:37 Priti Patel (she/her): Digital literacy (is that the right term?) assessment for students

14:31:41 Ravi Patel: Curated podcasts other perspectives in pharmacy that can serve as topic discussions with others

14:31:41 Sheel Patel: create a digital health tool for the future. Be creative and innovative!

14:31:42 Vickie Clark, WNEUCoPHS: Digital Dementia

14:31:42 Danielle Franklin: students come up with there own app idea and have to pitch the idea to the class (shark tank style)

14:31:45 Mariann Churchwell: CKD have students use a nutrition tracker for each meal for 3-5 days to calculate Na+, K+, Phos daily intake and assess a CKD diet

14:31:50 Meghan Bodenber: Include a communications elective that includes digital health

14:37:26 Ravi Patel: @Vicki - Some current work Alabama (and funded AHRQ) - <https://digital.ahrq.gov/ahrq-funded-projects/examining-clinical-workflow-and-outcomes-integrating-health-information>

14:37:37 Ravi Patel: @Vickie*

14:37:45 Vickie Clark, WNEUCoPHS: Thank you