Pharmacy: Profession of hope

This evening we honor the legacy of Harvey A. K. Whitney, who lived and practiced pharmacy as a profession of hope. He valued pharmacy as a special calling requiring knowledge and intense academic preparation. With compassion and commitment, he delivered sustainable, high-impact services with an expectation of positive outcomes—real hope.

Many of you in this room also believe pharmacy is a profession of hope. We stand on the shoulders of great men and women: those past recipients of the Harvey A. K. Whitney Lecture Award who are present with us this evening and who were recognized earlier and those who could not be present. Special thanks to past recipients Abramowitz, Ashby, Carlin, Duffy, Manasse, Odds, Ray, Reilly, and Zellmer, and thank you to the 32 recipients of the award who have completed their service and lives. All of these men and women are beacons of hope for their patients and the profession.

Entry into pharmacy

It was 60 years ago this month that my religious superior asked me what I thought about pharmacy. My response was, “I do not know what it is.” As part of the explanation for her question, she included the notion that I was good in math and science and thus would do well in pharmacy. My less-than-enthusiastic response was, “I will try it.” What a turning point in my life, having just completed my freshman year at Saint Louis University in preparation for what I thought would be my life’s career as a teacher for first and second graders, befitting my love for children. Really, I like people, and pharmacy has allowed me both to teach and to interact with many people. Thus, it was and is a great choice for me.

The next issue was choosing a college of pharmacy. Should it be one, such as Creighton, affiliated with a Catholic university or the St. Louis College of Pharmacy? Thanks to my parents, Albert and Rose Ann Degenhart, my brothers and I were grounded in catholicity. Hence, my decision was based on the fact that in St. Louis, there was an opportunity to live in our house of studies with some members of my community, whereas in Omaha, the site of Creighton, we did not have any Sisters. As a young Sister (professed only two years), it was critically important to me to be well formed in my religious community. Thus, St. Louis College of Pharmacy was an excellent choice for this and many additional reasons.

Since we are honoring the legacy of Harvey A. K. Whitney this evening, I will address some of my comments directly to Mr. Whitney. Mr. Whitney, we never met; however, our careers did intersect as I had heard and read about you and was a sophomore at the St. Louis College of Pharmacy when you passed away. In addition, I have met and talked with many who have shared their admiration and knowledge of you, including the late George Phillips, a past recipient of the lecture award named after you, and your son, Harvey A. K. Whitney Jr. Harvey Jr. and I served together on the Roche Advisory Board.

You, Mr. Whitney, had an understanding of pharmacy before entering college, as you had worked in your Michigan hometown drugstore during eighth grade and all through high school and then for a drug company in Ohio. A slight detour took you to the drafting division of Dodge Brothers before your joining of the U.S. Army Medical Corps during World War I. Upon returning to Michigan after your honorable discharge from the U.S. Army Medical Corps, you entered the college of pharmacy at the University of Michigan.

The administration, faculty, and staff at the University of Michigan and the St. Louis colleges of pharmacy contributed respectively to your and my success as pharmacy students, and to all of them we owe a debt of gratitude. The administration set the tone and direction of our education, the staff created the environment in which that education could take place, and the faculty—with care, commitment, and dedication—ensured that they would be proud to send us out into pharmacy practice. Thank you to the St. Louis College of Pharmacy administration, faculty, board of trustees, and staff, and especially to those present.

Mr. Whitney and I have a message for pharmacy students today. Study intensely, learn as much as possible, and integrate that learning so that you may fulfill your dreams and hopes of practicing pharmacy: contributing to the health and well-being of others. Find mentors who are pharmacy leaders; they will model for you how to grow personally and professionally. Network with colleagues around the globe; you will challenge and support one another in your careers of provid-
SISTER MARY LOUISE DEGENHART, A.S.C., M.B.A., FASHP, is special assistant to the president at the St. Louis College of Pharmacy and a former pharmacy administrator who was instrumental in the growth of pharmacy residency programs.

Sister Mary Louise, a member of the religious community of Adorers of the Blood of Christ, has served in several pharmacy administration positions planning and implementing state-of-the-art practice. During all of her practice career, she has worked toward advancing a well-trained core of pharmacy technicians and for more than 40 years has devoted a substantial portion of her professional efforts to the growth and development of pharmacy residency and technician training programs. She was a member of ASHP's Accreditation Services Division (1989-95) and then served as a contract surveyor until March 2015.

Sister Mary Louise was the director of healthcare facilities sponsored by the Adorers of the Blood of Christ (1996–2003). For the seven years that followed, she collaborated with others to establish a ministry of reconciliation in a troubled neighborhood on the south side of Chicago. In early 2011, Sister Mary Louise accepted the position of special assistant to the president at the St. Louis College of Pharmacy. In addition to her profession, she has devoted a significant amount of time to volunteer efforts for church, hospice, and mental health.

Sister Mary Louise is an active leader in professional organizations and was one of the founders of the Southern Illinois Society of Hospital Pharmacists and the Illinois Council of Health-System Pharmacists.

joined the pharmacy staff at the University Hospital in Ann Arbor in 1925 and in two short years were named chief pharmacist, a testament to your inspiring leadership.\textsuperscript{1} The late Leo Godley, another Whitney Lecture Award recipient, stated that you “made us feel and know that we were involved in a specialty that was worthy of respect, preservation and development.” You “compelled many to strive for this respectability and development through service and research.”

You also were happy and more than willing to share your experiences, knowledge, and practice with others as you taught pharmacy students and residents, nursing students, and the medical staff.

During your 20 years of service at University of Michigan Hospital, you contributed to establishing new and innovative pharmacy services, such as sterile compounding, publication of a formulary, and prepackaged and ready-to-administer dosage forms.\textsuperscript{1} The needs of your patients came first, as articulated in a letter you wrote to the hospital administrator requesting several pieces of equipment: “Because these needs are regarded as necessary for the maximum interest and welfare of the care of patients, and because they are held as accessories to the efficiency of the pharmacy, they are not presented as debatable. In the event some reason must be attached to each request, I shall be glad to furnish this added information.” Mr. Whitney, I am amazed at the scope and variety of practice sites that you engaged. In 1944, you were recruited to lead the pharmacy department at the Hartford Nuclear Engineering Plant in Richland, Washington. After a year there, you served for 2 years as director of pharmaceutical research at Ortho Products in Linden, New Jersey, and completed your pharmacy career in Detroit as a community practitioner for about 10 years. Thus, you covered the Midwest, Northwest, and Northeast in hospital, military, research, and community pharmacy—truly a profession of hope exercised in many ways.

My entry into pharmacy practice in 1960 occurred at a 55-bed rural community hospital in southern Illinois. Since I was the only pharmacy employee, I was both staff and chief pharmacist! In that environment, with a very supportive staff of my Sisters serving in every area of administration and service, we learned how—and began to appreciate each member’s contribution—to make our service whole. We were functioning interdependently long before the concept was recommended.

Thank you to my religious community of the Adorers of the Blood of Christ who have challenged, encouraged, and supported me in both my religious and professional life and who are represented here tonight by four Sisters. This is the time to acknowledge those pioneer Sister pharmacists who were so influential in the early days of the American Society of Hospital Pharmacists and who continued through the years to prepare young practitioners to carry on the ministry of pharmacy services in so many places.

My next practice site was the 99-bed St. Clement’s Hospital in Red Bud. (Some of my pharmacy friends referred to me as the Sister from Rose Bud.) There, my pharmacy technician helped me develop clinical services because it seemed the right thing to do. When the physicians made rounds, we were at the nursing units answering questions and making suggestions. We passed medications on weekends and took histories for the emergency room staff. With support from nursing service leaders, we implemented the unit dose distribution system as a good way to serve both patients and nurses.

In July 1972, Ron Turnbull, director of pharmacy at the University of Chicago Hospitals and Clinics, offered me a pharmacy position as assistant director of pharmacy. Thank you, Ron! My fear of an academic medical center was how to deal with the various levels of the medical staff. That dissipated after I received the first “important” question from a
medical resident: “What is the usual dose of vitamin B₁₂?” After three happy years in Chicago, I returned to the southern part of the state to obtain a master’s degree in business administration at Southern Illinois University Carbondale, knowing that a weak area of practice for me was the business aspect.

In 1978, Clyde Buchanan, director of pharmacy at St. John’s Hospital in Springfield, Illinois, offered me a pharmacy position to help direct development of services for a skilled nursing facility and for adult daycare, intermediate care, hospice, chemical dependency, and acute care patient areas. Thank you, Clyde! One hospital committee that I chaired, the medical moral committee, was appreciated as both a challenge and a gift.

Mr. Whitney, we did many things in our practice careers because they seemed the right things to do or because no one else was providing the service. With an eye to the 2010 Pharmacy Practice Model Summit, our hopes for pharmacy practice were that

- Pharmacists deliver services according to a pharmacy practice model analogous to the models of our dental and medical colleagues,
- Every patient or client has a personal pharmacist who serves as the pharmacy coordinator for transition of care, similar to the role of the primary care physician,
- Pharmacists spend most of their time in direct patient care activities delivered consistently to all patients based on severity of need and that pharmacy students and pharmacy residents participate in the provision of these pharmacy services,
- Pharmacy technicians are responsible for distribution of medications and the technology that documents and supports these activities, and
- Pharmacists are essential members of a collaborative healthcare team that is centered on the patient and family.

Harvey A. K. Whitney (1894–1957) received his Ph.C. degree from the University of Michigan College of Pharmacy in 1923. He was appointed to the pharmacy staff of University Hospital in Ann Arbor in 1925 and was named Chief Pharmacist there in 1927. He served in that position for almost 20 years. He is credited with establishing the first hospital pharmacy internship program—now known as a residency program—at the University of Michigan in 1927.

Harvey A. K. Whitney was an editor, author, educator, practitioner, and hospital pharmacy leader. He was instrumental in developing a small group of hospital pharmacists into a subsection of the American Pharmaceutical Association and finally, in 1942, into the American Society of Hospital Pharmacists. He was the first ASHP President and cofounder, in 1943, of the Bulletin of the ASHP, which in 1958 became the American Journal of Hospital Pharmacy (now the American Journal of Health-System Pharmacy).

The Harvey A. K. Whitney Lecture Award was established in 1950 by the Michigan Society of Hospital Pharmacists (now the Southeastern Michigan Society of Health-System Pharmacists). Responsibility for administration of the award was accepted by ASHP in 1963; since that time, the award has been presented annually to honor outstanding contributions to the practice of hospital (now health-system) pharmacy. The Harvey A. K. Whitney Lecture Award is known as “health-system pharmacy’s highest honor.”
Pharmacy residency

An area, Mr. Whitney, dear to your heart and endeavors was pharmacy residency experience. Although these programs were called internships in your time, they were the seed that produced the pilot program that Paul Parker tested in a number of hospitals and that led to the first hospital pharmacy residency standard in 1962. The late Warren McConnell—one of your interns from the early 1940s, a director of ASHP’s Accreditation Services Division, and a Whitney Lecture Award recipient—considered your internship program your most noteworthy contribution. He stated, “What made the greatest impression on me was his recognition of the need for the well-trained hospital pharmacist to have a good understanding of the clinical aspects of hospital pharmacy practice. He insisted that his pharmacy residents attend clinical staff conferences, grand rounds and autopsies and that an intimate professional relationship be established between the pharmacy and medical staffs.” In 1989, Don Letendre, director of ASHP’s Accreditation Services Division, offered me a position as assistant director of that division. Thank you, Don! Building on the work of the previous directors—John Oliver, Warren McConnell, and Max Ray—we worked to revise and create new accreditation standards (both for pharmacy residency and pharmacy technician training programs) to meet and challenge current practice with the hope of meeting future needs of the public we served, conducted many site surveys for accreditation of those programs, and sought to have existing programs add more residents and pharmacy technician trainees as well as assist colleagues who desired to establish new programs. The opportunity exists today for all in pharmacy to create the pharmacy residency positions needed for every area of practice. It is critical that new pharmacy graduates have the opportunity to participate in residencies appropriate for their area and level of practice.

Mr. Whitney, you saw your endeavors in this arena as contributing to the advancement of hospital pharmacy and patient safety. I am so grateful for all of the 26-plus years that I devoted to the Accreditation Services Division. I say a very hearty thanks to the many persons with whom I ministered in this area: Accreditation Services Division staff, Commission on Credentialing members, cosurveyors, pharmacy directors, residency program directors, pharmacy residents, and pharmacy technician students. Thank you all for your wonderful enthusiasm and support that you offer and provide for advanced training.

Mr. Whitney, you must be happy for all the time and energy your son, Harvey A. K. Whitney Jr., has contributed to development, education, and communication for pharmacy technicians and students. You are aware of the need to continue strengthening the pharmacy technician training programs to allow persons to be well trained academically and experientially and for their roles to be considered a pharmacy career and profession. To accomplish this, a model curriculum must be identified and endorsed by all sectors of pharmacy. The answer to fulfilling these hopes lies within the pharmacy profession. The collaboration between the Accreditation Council for Pharmacy Education and ASHP gives us hope that all sectors of pharmacy will come together to meet those desired outcomes.

In 2011, John Pieper, president of the St. Louis College of Pharmacy, offered me a position as special assistant to the president at the St. Louis College of Pharmacy. Thank you, John! After 50 years of pharmacy practice, I returned to my alma mater, where today I spend a good portion of my time working with students, helping them learn how to study and be successful as a means to achieve their dreams and hopes. In addition, I have the opportunity to encourage other students to pursue pharmacy residency programs.

Professional organizations

Thank you for your foresight, Mr. Whitney, in gathering together a small group of hospital pharmacists as a subsection of the American Pharmaceutical Association. You were able, in 1942, to establish this as the American Society of Hospital Pharmacists, serving as the first president. In addition, you felt the need to communicate on a broader scope; hence, you cofounded the Bulletin of the American Society of Hospital Pharmacists, which is now the American Journal of Health-System Pharmacy.

That need to “connect” was my impetus in December 1960 to ask a fellow classmate of his interest to help establish the Southern Illinois Society of Hospital Pharmacists. That dream became a reality in 1962, when the Southern Illinois Society of Hospital Pharmacists was recognized as a chapter of the American Society of Hospital Pharmacists, which led to the formation of the Illinois Council of Hospital Pharmacists. Serving in these volunteer positions is one way of giving back to the profession and paying it forward. Mr. Whitney and I urge all pharmacists to find the organizations that help them fulfill their professional dreams and hopes and to volunteer their services to those organizations in some meaningful way.

Another necessary way to connect is to engage in outside interests. Mr. Whitney, you loved to read, and Kipling was your favorite author. I have been known to schedule site surveys and trips around certain sporting events, family or community celebrations, or lunch with a friend in the area.

In the past, some of you in the audience, for a variety of reasons, have received a blessing from me. This evening, Mr. Whitney and I leave you with a blessing in the words of a friend, the late John O’Donohue:

May you awaken to the mystery of being here and enter the quiet immensity of your own presence.
May you receive great encouragement when new frontiers beckon.
May you respond to the call of your gift and find the courage to follow its path.

May your outer dignity mirror an inner dignity of the soul.
May you take time to celebrate the quiet miracles that seek no attention.

May you experience each day as a sacred gift woven around the heart of wonder.

Thank you for your part in pharmacy: profession of hope.

Excerpt reproduced, with permission, from reference 4.

Disclosure
The author has declared no potential conflicts of interest.

References