Ready for an update with lots of good stuff? No April Fool's jokes, but some pretty important info:

**P1, P2, P3, P4s:** I received a question from a PharmD student asking why we are requiring an up to date TB test by May 15 when the CDC has loosened their TB guidelines for asymptomatic healthcare workers and in the midst of all this COVID stuff. It is a great question and makes a lot of sense. Of course, making sense does not seem to be enough these days! The purpose of our PPD policy is not for the sake of the College, but for all the clinical sites where our students do IPPES/APPEs. We have affiliation agreements with all sites, and we must abide by the terms of the contract. Although the CDC loosened the TB guidelines, none of our sites have to date. We would be in violation of our affiliation agreements if we do not have assurance that students are TB negative when we send them on rotation. As a result, must stick with our TB testing protocol. In future agreements, we can try to negotiate for a less-stringent, CDC compliant stance, but I make no promises, because it is us against a bunch of corporate lawyers! Thanks for understanding.

**P1, P2, P3, P4s:** I gotta give a shout out to the Office of Experiential Education Office! They are actually building the plane while flying it! New problems arise as soon as the previous one got solved! Their creativity is amazing and they are making on-time graduation happen (even if it kills them!). Please be appreciative of what they are doing. Their dedication though all this has been inspiring to me.

**P3s:** Speaking of Experiential Ed, here are some of the creative solutions they are coming up with to ensure that you graduate on time too! See this message from them:

> This is a challenging time. The COVID-19 pandemic has caused us all to make significant adjustments to how we do our work to keep you, our patients, and ourselves safe and reduce the potential of exposure. Many of our health system and now, some of our community pharmacy partners have suspended student rotations. Other sites have excluded students from being physically on site but are allowing them to participate in remote rotation activities (e.g., telepharmacy). Still others are committed to completing rotations for currently assigned students but are not allowing new students to onboard until further notice. These policies make some sites unavailable to students as we approach the start of the 2020-2021 APPE year. As the pandemic continues to evolve, we anticipate that there will be additional, unforeseen changes that impact our experiential sites and ultimately, affect your APPE rotation schedules. We will be working directly with preceptors regarding any schedule changes that need to be made and we will communicate with you individually about any changes to your schedule. Please do not contact your preceptors directly about site availability and schedule changes.
We will be making some changes to Rotation 1 (and perhaps Rotations 2 and 3) of your schedules to address rotations affected by these site policies. Students currently assigned to sites that have suspended rotations or are unable to onboard new students will be reassigned to other rotations or rotation sites. We remind you to be careful about making any travel and lodging plans for out-of-area rotations in blocks 2 and 3 as your schedule may change because of COVID-19 as vendors may not refund deposits and fees. Thank you in advance for your understanding and flexibility as we make needed changes to the 2020-2021 APPE schedules.

P1, P2, P3, P4s: Things are really moving fast at the hospital! Over 50 of you submitted your names to help out the Pharmacy Dept and I forwarded your info to them today. It is up the Pharmacy Dept to contact you now. Thanks for participating!

P1, P2, P3, P4s: Speaking of the hospital, Stan Kent shared these tidbits that are just fascinating: “Field hospital update – This is what we think right now, but it can change. The current plan is to set up a field hospital located at the indoor track on South State St. This would need to be ready to open by April 9. There will be about 500 beds on the track (and potentially another 500 in the tennis building). Orders, notes, labs and provider documentation will be in MiChart; nursing charting will be on paper (notes and MAR).” This is BAM again. I am old enough to remember and use paper charts. They work fine, but you need to be thinking full time as a pharmacist, there are no error messages to blink when something is going wrong. You will need to be your best, vigilant pharmacy-self if working there.

No ACE Inhibitors & COVID? From UpToDate:

**Do not empirically discontinue ACE inhibitors and ARBs amid COVID-19 pandemic**

There is speculation that patients with coronavirus disease 2019 (COVID-19) who are receiving angiotensin-converting enzyme (ACE) inhibitors or angiotensin receptor blockers (ARBs) may be at increased risk for adverse outcomes [1,2]. Angiotensin-converting enzyme 2 (ACE2) is a receptor for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2, the virus that causes COVID-19), and renin-angiotensin-aldosterone system inhibitors can increase ACE2 levels [3]. Although patients with cardiovascular disease, hypertension, and diabetes who are infected with SARS-CoV-2 may have a more severe clinical course, there is no evidence to support an association of more severe infection with continuation of ACE inhibitors or ARBs, or decreased severity of COVID-19 after stopping these agents. Discontinuing ACE inhibitors or ARBs in some patients may exacerbate comorbid cardiovascular or kidney disease and lead to increased mortality [4]. Thus, patients receiving ACE inhibitors or ARBs should continue treatment. This approach is supported by multiple guideline panels [5-9].

See 'Choice of drug therapy in primary (essential) hypertension', section on 'COVID-19 and ACE inhibitors/ARBs' and 'Coronavirus disease 2019 (COVID-19)', section on 'Patients receiving ACE inhibitors/ARBs'.

I can tell that many of you are really enjoying time with your pets. I don’t have one, so I am living vicariously with virtual pets that I don’t have to feed here: https://www.montereybayaquarium.org/animals/live-cams

**Attached** is your April Calendar, with a self-care twist.

I did not have an April Fool’s joke in this email, but did anyone have a good prank pulled on them today?
P.S. My wife thinks Vaseline on the toilet seat is a funny April Fools joke by the way...

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