

House of Delegates

REPORT OF THE

COMMITTEE ON RESOLUTIONS

June 8, 2025

Charlotte, North Carolina

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Article 7.2.2.1 of the ASHP Rules of Procedure for the House of Delegates states:

Resolutions not voluntarily withdrawn by the submitter that meet the requirements of the governing documents shall be presented to the House of Delegates by the Committee on Resolutions at the first meeting and acted upon at the second meeting. They shall be submitted to delegates with one of the following recommendations: (a) recommend adoption, (b) do not recommend adoption, (c) recommend referral for further study, or (d) presented with no recommendation of the Committee on Resolutions.

Action by the House of Delegates shall be on the substance of the resolutions and not on the recommendation of the Committee on Resolutions.

Pursuant to the above article, the Committee on Resolutions presents the attached resolutions (Appendix A and Appendix C) to the House of Delegates.

For the first resolution, which is to advocate that Advance Trauma Life Support (ATLS) certification is made available to pharmacists, the recommendation of the Committee is to refer the resolution to the Council on Pharmacy Practice for further study and consideration in September. The Committee noted that the Council on Pharmacy Practice's policy 1527, Pharmacist's Role in Urgent and Emergency Situations (Appendix B), provides a strong foundation for incorporating examples such as ATLS, along with other similar certifications that the Council may identify and include in the policy language or resolution. The Committee expressed support for pharmacists pursuing advanced training and certification as a means to further strengthen their role in patient care and enhance professional credibility through standardized competencies. The Committee concluded that the ASHP policy committee process, with its studied reflection and multiple layers of review, would be the best way to arrive at policy that expresses a comprehensive view of the role of pharmacists in emergency situations. Delegates are reminded that they are voting on the substance of the resolution, which is approval of the motion as follows:

To advocate that Advanced Trauma Life Support (ATLS) certification be made available to pharmacists.

The options for House action on the resolution, to be taken at the second meeting, are to (a) approve the motion; (b) defeat the motion; (c) refer the motion for further study by a committee or task force to be determined by the Board of Directors (the option recommended by the Committee on Resolutions); or (d) amend the resolution, which would then require due consideration by the Board of Directors at its next meeting in September.

For the second resolution, the Committee on Resolutions determined to **not present the resolution to the House because it does not constitute professional policy as defined by the Board of Directors** (i.e., is not "a pronouncement on an issue related to pharmacy professional practice"). Article 7.2.2.2 of the Rules of Procedure for the House of Delegates states that the House "shall be informed of resolutions not presented to it and the reasons therefore."



Appendix A

Resolution for the 2025 ASHP House of Delegates: Advanced Trauma Life Support (ATLS) Certification for Pharmacists

Submitted by:

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Paula Hogrefe, PharmD, BCEMP, BCPS (plhogrefe@gmail.com) Memphis, TN

Subject: Advanced Trauma Life Support (ATLS) Certification for Pharmacists Received: February 20, 2025

Motion

To advocate that Advanced Trauma Life Support (ATLS) certification be made available to pharmacists.

Background

ATLS training and certification was developed in the 1980s by the American College of Surgeons (ACS) to uniformly assess and treat seriously injured trauma patients. It is designed for physicians, but a modified version of this training is also available for nurses.

The 2020 ASHP Guidelines on Emergency Medicine Pharmacist (EMP) Services reference the important role EMPs play in "all critical and acute resuscitative efforts in the Emergency Department." The guidelines specifically reference pharmacists' involvement in the resuscitation of trauma patients. The guidelines also recommend that EMPs seek out training and certification in the conditions applicable to their practice settings, such as Basic Life Support (BLS), Advanced Cardiac Life Support (ACLS), and Pediatric Advanced Life Support (PALS) from the American Heart Association (AHA), as well as ATLS from ACS. Currently, pharmacists can obtain certification in all these except ATLS. Pharmacists can audit the course but cannot become certified in ATLS.

To advance the training and the role of EMPs in traumatic resuscitations, pharmacists should be incorporated into the existing ATLS certification, or a new training/certification specific to pharmacists should be developed as one was for nurses. If ACS is unwilling to do this, ASHP should collaborate with other organizations such as AHA to create a pharmacist-appropriate trauma resuscitation training certificate.

Suggested Outcome

ATLS certification (or equivalent) would become available to pharmacists, either through the ACS or another certifying body such as AHA.



Appendix B

ASHP Policy 1527, Pharmacist's Role in Urgent and Emergency Situations

Source: Council on Pharmacy Practice

To affirm that pharmacists should participate in planning and providing emergency treatment team services; further,

To advocate that pharmacists participate in decision-making about the medications and supplies used in medical emergencies; further,

To advocate that pharmacists serve in all emergency responses, and that those pharmacists receive appropriate training and maintain appropriate certifications.

This policy was reviewed in 2025 by the Council on Pharmacy Practice and by the Board of Directors and was found to still be appropriate.

Rationale

Pharmacists have a leadership role in many hospitals in planning for emergency treatment team services. Data from the 2021 ASHP National Survey indicates that approximately 70% of hospitals have pharmacist participation in cardiopulmonary resuscitation (CPR), or code, teams and 36% have pharmacist participation on rapid response teams. This role includes developing policy on the contents of code carts and other supplies as well as establishing the role of the pharmacist in supporting these services. The literature demonstrates that pharmacists can make significant contributions to CPR and other emergency response teams as medication-use leaders and as participants, and there is evidence that better patient outcomes result when pharmacists participate. Pharmacists participating in this role should receive appropriate training and certification (e.g., Basic Life Support, Advanced Cardiopulmonary Life support, and Pediatric Acute Life Support). The ASHP Guidelines on Emergency Medicine Pharmacist Services reference many of the patient care services that pharmacists provide during urgent and emergency situations including but not limited to direct patient care activities, medication information, resuscitation, high-alert medication handling procedures, medication selection and preparation, medication order review and medication therapy monitoring, patient and caregiver education, and medication reconciliation.

Appendix C

Resolution for the 2025 ASHP House of Delegates: Revision of ASHP State Affiliation Guidelines Appendix C to Permit Special Accommodation Models for Unified State Pharmacy Associations

Submitted by:

Chris Greer, RPh (christopher.greer@providence.org)
Spokane, WA

John Muchka, PharmD, BCPS (jpmuchka@yahoo.com) Nashotah, WI

Subject: Revision of ASHP State Affiliation Guidelines Appendix C to Permit Special Accommodation Models for Unified State Pharmacy Associations

Received: March 10, 2025

Motion

The American Society of Health-System Pharmacists (ASHP) should revise Appendix C of the ASHP Guidelines for Affiliation with State Organizations to permit special accommodation models for affiliating with unified state pharmacy associations that align with the ASHP mission and represent health-system pharmacists. It is the intention that qualified unified state pharmacy organizations may serve as the primary entities for state-level representation and collaboration with ASHP as an affiliate.

Determination by Committee on Resolutions

The Committee on Resolutions determined to **not present the resolution to the House because it does not constitute professional policy as defined by the Board of Directors** (i.e., is not "a pronouncement on an issue related to pharmacy professional practice"). Article 7.2.2.2 of the Rules of Procedure for the House of Delegates states that the House "shall be informed of resolutions not presented to it and the reasons therefore."

