I am honored to be with you today as the recipient of the Winston J. Durant Lecture Award and humbled to be included with those that have received this honor, and want to thank those that have chosen me. It does mean a great deal to me. While I have been a preceptor of over 100 residents on rotation with me over the years, I still was very surprised to receive this award. I want to thank all of you who took time from your busy schedules to be here with me and your fellow residents and leaders today. I am delighted to be here, as it gives me a chance to thank so many of you that have had an impact on my career. I also want to acknowledge my family, my husband, Rod Jorgenson, and my boys Lucas, a senior in high school, and Cody, a sophomore in high school, for their support of me and my career. Rod and I are proud parents of two teenage boys, who are fine young men. I thought for a moment of bringing them here today, but they are very busy with their own activities, so Rod is home holding down the fort.

Today I want to tell you a little bit about my life, and why I believe I am standing here receiving this award. It is not because I am a national leader, like many of those I have worked for and admired, or many of you here today. Receiving this award has more to do with hard work, perseverance, tenacity, a life long demanding career at University of Wisconsin Hospital and Clinics with some significant leaders in pharmacy, some courage from time to time, a little bit of luck, and a lot of determination. But it also has to do with my dreams, with people who mentored and assisted me along the way, and choices made.
Living my entire adult life in Wisconsin, and being a preceptor to over 100 administrative residents was never part of my master plan when I first set foot in Wisconsin at the age of 23. I had never been to Wisconsin before, and did not know the difference between a hot dog and a brat. I barely knew where Wisconsin was on the map; my geography was better on the west side of the Mississippi. In the summer of 1975 I drove a ‘64 Comet with a U-Haul from Wyoming to Wisconsin, and brought my friend Rita with me to begin the 2-year residency/Master’s program, and what turned out to be the next several chapters of my life.

What were my dreams? They were really quite modest at the time. I thought that a career in hospital pharmacy and pharmacy administration might be interesting and challenging. That about summed it up. I had seen a brochure about the program, and had done a little investigation about such programs. It’s surprising, with such modest goals, what life can bring. Life is about choice. The choices you make are often what give you the next choice, the next opportunity. Not all things turn out as planned, and sometimes a door closes, but amazingly, another door opens.

About my story… I was raised 13 miles from Chugwater, Wyoming; a town of about 100 people in southeast corner of Wyoming, on the plains 45 miles north of Cheyenne. There are no towns between Cheyenne and Chugwater, and very few trees or houses. It is a place of wide-open spaces and big sky. Those who live there are pretty independent, as neighbors are few and far between. Many people laugh at such a name and place. However, I’ve always been proud of my roots, and know that those who don’t understand just don’t get it, and I figure, too bad for them. My grandmother and grandfather were
Pioneers. They were strong willed, hard working people. They broke the sod on the Great Plains to farm wheat and find new opportunity and raise their family. My grandfather and grandmother farmed in the days of horses and buggies. I knew my grandmother well, and even lived with her my senior year of high school. My father also was a wheat farmer. My father attended the University of Wyoming for a couple of years, but quit college to make a better living farming wheat. He supplemented wheat farming with additional jobs of school bus driving and carpentry. He built two homes, one that I grew up in, and a lovely home in Cheyenne where my dear step mom continues to live.

I do not remember my mother well. She died when I was 6, leaving my father with four children ages 4-10. Most of my school age life, I lived with my father, two older sisters and a younger brother. We managed by sharing household duties and farm jobs. My father was a huge influence in my life, and I have always admired him. He is also why I am here today accepting this award. There was never a doubt that he expected me to go to college. I remember my father as a hard working, handsome, intelligent man with an easy deep laugh, and sky blue eyes and dark hair. His younger pictures resemble Elvis Presley, especially the ones in his Army uniform during World War II. He was a good storyteller, and a good dancer. I remember stepping on his shoes as he taught me to dance the fox trot and waltz when I young. He respected others, and was well respected in the community. He loved and cared for his children, getting us up and making breakfast for us every day, before we all got on the school bus he drove for our hour long ride into town. He also drove us the hour ride home, and my sisters and I took turns making supper. My father loved the outdoors, trout fishing, hunting, and camping. I
remember sleeping in sleeping bags under the stars in Yellowstone, one of his favorite
places next to Yellowstone Lake. We slept without a tent, which was pretty exciting one
night when a bear came into the campground. I suppose we were sort of an unusual
family to others. It was not always easy, but I learned to problem solve and work at a
very young age. I also learned about teamwork, and how things get done with a good
team. But mostly I was like other young girls, busy with schoolwork and school activities
such as cheerleading, student council president, playing flute in the band and in a flute
quartette, and singing in a church choir. There were many significant mentors along the
way, some from school, some from church, and some from the community, in addition to
my family.

It was my senior year of high school when I decided to major in Pharmacy at the
University of Wyoming. I was a good student, liked science, math and chemistry. I had
also taken a number of business classes in high school. Even though I graduated from a
class of nine, I knew I was getting a good education. I remember reading about careers in
study hall, and pharmacy seemed like it might fit. My senior year, I lived with my
grandmother, and I would drive her to the neighboring town 25 miles north, where we
shopped and where she picked up her prescriptions at the nearest pharmacy. Her
medications were significant for her health. I also worked on Sundays, before and after
church, as a waitress at Ada’s Wagon Wheel Café. This was mostly to make some
spending money. Ada’s son was in pharmacy school at the University of Wyoming. I
am not sure, but this might have planted a seed, too. After working as a waitress for one
full summer to earn money for college, I knew I would not be a waitress for the rest of
my life, and was determined to finish college even before I started.
I put myself through college with loans, grants, scholarships and a part-time job. My wardrobe, like everybody else’s, consisted primarily of a few pairs of blue jeans, and like many students, I had little money. My sophomore year, I asked for a part-time job at a local pharmacy, even though there was not a job listed. I was hired and started as a cashier up front, selling over the counter items and delivering drugs in a Volkswagen bug to homes in the Laramie area. These home visits were very enlightening. I saw how people really lived and managed their drugs. I remember the older black diabetic woman whose vision was so poor that she raked a quarter’s edge on her teeth when giving me change to distinguish it from a nickel. Her live-in boyfriend helped draw up her insulin. I remember another older woman who could not get up to answer the door. She would just yell for me to come in as she stayed in her recliner. I would open her prescription bottles, as she requested, and set them on the windowsill next to her chair, where she could reach them without getting up. Probably not the best place for storage, but I believed this was necessary for her. Her legs were huge with edema. I kept this job for my entire college education, and worked full time in the summers, and eventually was allowed to work behind the dispensing counter assisting with filling prescriptions.

I never veered from my goal to finish pharmacy school and graduated with honors. I thought pharmacy was a very interesting career and never doubted this choice. I learned more because I worked at the pharmacy, and could relate my schoolwork with my pharmacy work. Near the end of my college education, a professor asked the class which students were going to practice in community pharmacy? hospital pharmacy? academics? Most everyone but Rita Cheri and I raised their hands for community pharmacy. We
raised our hands for hospital pharmacy, knew little about it, but thought it sounded more interesting.

I had a very good advisor, a pharmacology professor at University of Wyoming School of Pharmacy, and scheduled a meeting with him near the end of my college career. I mentioned I had heard about 1-year residencies in hospital pharmacy, and asked his advice. He suggested that if I was going to continue my education, I should consider a 2-year program, which included a Master’s Degree, and mentioned Ohio State had such a program.

I was not sure about the idea, as two years seemed like a huge commitment, and I did not have much money, but I was interested and I trusted his advice. So, once again I was mentored. My friend, Rita Cherni, was also exploring residencies, and had an extra application to Wisconsin, which she gave me. I would have missed the deadline had she not had an extra application. In fact, I am not sure I would have applied to Wisconsin. This is “luck” part. Back then, the Wisconsin program interviewed earlier than other programs (this was before the match), and WI “cheated” by being first. Dave Zilz and Tom Thielke were sly back then too. I filled out the application and interviewed. Rita and I were both accepted into the program. I also had an application for a program in Kansas, but decided not to interview there since I was already accepted at WI and really couldn’t afford another plane ticket. When I interviewed for the residency program, Dave and Mary Ann Zilz welcomed me to stay in their home. Dave drove by Observatory drive to show me beautiful Lake Mendota and the campus. I was impressed. Little did I
know that I would spend most of my waking hours at the hospital and not see much of Lake Mendota during my residency.

After I arrived in Madison for the residency, Tom Thielke and the senior residents proceeded to be sure we junior residents knew some of the Madison hot spots. I learned some things were quite different in Wisconsin. People drank brandy not whiskey, friends and families went to taverns for brats, burgers or Friday night fish fries, and they drank beer, but they didn’t drink Coors beer. We had bars in Wyoming, and believe me, they were not a place for families, and few served food unlike the taverns in Wisconsin. I also thought it was strange when I saw women doing the polka together, but before long, I too was doing the chicken dance at weddings, going out for Friday night fish, eating brats with sauerkraut, and drinking brandy Alexander’s, brandy manhattans, brandy and Coke, brandy and diet Pepsi and singing “On Wisconsin” at football games. Did you know you can put brandy in almost anything? Wisconsin and Madison, began to grow on me, and these Midwest people were really pretty good folks.

Fellow residents and pharmacists also mentored me. The first unit I worked was 2 West (Urology), 2 B (the psych unit), and Infirmary 3 (General Medicine) and all of Children’s Hospital on weekends. I was placed on these units due to my lack of experience, as there were not often codes on these units. Shortly after I began, much to my dismay, a code occurred on Infirmary 3 on a weekend when I was staffing. Infirmary 3 had its own blue cart, as the one from the ER could not fit on the old small elevator to Infirmary 3. I will never forget the senior resident who came to save the day. He was “Superman” to me as he whipped the drugs out of the emergency drug box and handled the situation. My
knees were shaking, as I had never seen anything like this before. The next day I asked the pharmacy supervisor in charge of cardiology, to open an emergency box and review how the syringes of bicarb and epi were put together, and review again the dosing.

Then there was the time I was paged “stat” for Haldol for 2 B, the pysch unit. I obtained the syringe of Haldol and made my way quickly to 2 B. Little did I know, as I used my key to open the door of the Psych Unit, the Haldol was for the young but rather large man on the other side. He escaped as I entered the unit. Fortunately, the male unit clerk down the hall on Urology, was pretty strong, and tackled the agitated patient. After too much commotion and additional assistance, the patient was escorted back to the psych unit. Needless to say, the psych nurses were not pleased, and wondered why I didn’t use the back door. The next day, the more experienced psych pharmacist showed me the back door, which had somehow been left out of my training.

There were numerous learning events, and I became wiser and wiser. It seemed like I was having more than my share of learning events. In the mean time I was taking the undergraduate clinical clerkship course taught by Dave Angaran, as Dave and Tom wisely suggested I bolster my clinical education.

I was not experienced enough to work the trauma life center (TLC), until the holidays came around, and all of a sudden I found myself working TLC over the holidays. Wow, was I really that much better, or was they just short staffed?? I never knew for sure, but it was definitely another learning experience.
My group of residents gave DZ and TT a few grey hairs. Residents had not had raises for years, and resident salaries were very low. When we met with DZ and TT, and said we were going to apply for food stamps, they came up with a raise for our second year. Many of you can thank our group for the subsequent cost of living raises that were implemented.

I continued the program over the two years, and at times was not sure of my decision to do the residency, but I stuck to it, and finished. This is where determination and tenacity comes in.

My plan was not to stay in Wisconsin. After graduation, I interviewed at University of Iowa, Iowa City, and University of Wyoming. The interview at Iowa went flat, it was not a position I wanted, and I did not think I could not work for the Director. The Dean of the University of Wyoming offered me a position, and it would have allowed me to go home, but the position was more academic and it did not seem to “fit” either. I was still in Madison determining where I might interview next, when I heard about a Supervisor of the Outpatient Pharmacy position opening at UWHC. I really did not think I had a chance, especially after the food stamp deal and a few other things I won’t go into, but I got up my courage and called TT to see if he would consider me for an interview. Low and behold he agreed. I was offered the position, but only if I would stay two years.

At this point, my attention went fully to my career. I chose Ambulatory Pharmacy, because I liked it, even when others were not interested, and I have been riding a tidal wave of growth and expansion ever since. I worked hard, closed N&R Hospital Pharmacy, helped move from the old hospital into the new hospital, opened the new
Outpatient Pharmacy, justified and opened the Oncology Clinic Pharmacy, managed the Drug Information and Poison Control Center, managed night pharmacy, computerized the Outpatient, Oncology Clinic and Student Health Pharmacies, provided clinic medications to a growing outpatient clinic population, opened Northeast Family Practice Pharmacy, opened University Station Pharmacy, opened West Pharmacy, opened East Pharmacy, worked on the acquisition of five more pharmacies, implemented the Bleeding Disorders Program, and the Medication Assistance Program. I did these projects with the assistance of residents and staff. In the meantime, I worked on improving reimbursement for the medications dispensed. Some of the hospital billing systems did not provide reimbursement that covered the cost of drugs. Now you might think this is easy to get paid for your services, but really is not. In fact, it has been challenging to operate a retail pharmacy within the hospital billing system. Reimbursement has become an area of focus for me. Obtaining reimbursement for the drugs and services pharmacy provides is more difficult than it should be. With current trends in reimbursement, pharmacy and healthcare systems will be challenged to expand clinical services, automation, and improved distribution systems. It will take significant work to move to the next level. All of you are part of the solution, and I trust with the talent and leadership in this room today there will be continued contributions made to patient safety, clinical quality of care, with financial performance.

I would like to thank the many residents that have assisted me and allowed me the success I have enjoyed. Some residents may not even know how significant their contributions were to UWHC and patient care, as some of the work they did on my rotation did not “blossom” until after they graduated. I have been given assistance with
the adjudication of retail claims, beginning with using a “black box”. At the time, fiscal did not think this was a good idea, and this notion of billing like a retail pharmacy was not received with open arms. There were also residents who gathered grocery bags of expired samples, heaped them in the conference room as we met with physicians who pretended expired samples were not a problem, until we convinced them otherwise.

Other more recent residents have reviewed the high cost clinic medication processes and justified the Infusion Center Pharmacist and Medication Preauthorization Coordinator positions. There are also many who have combed through spreadsheets of HCPCS codes so that UWHC would be better reimbursed for high cost clinic drugs, some have researched mail order services, other have assessed computer and workflow processes. There have been many who have reviewed HMO and PBM contracts, and completed data analysis to determine margins and business plans. Others help with budgets or JCAHO/TJC preparation. The list goes on and on. Much of my success is due to residents and their hard work and team effort. So many years have passed, that I cannot do justice to the work done by the residents, and these are just a few examples.

I also want to thank my fellow managers, past and present. They have worked hard and continue to turn things upside down with changes and automation in efforts to improve patient care. So many have done so much.

And of course, I need to thank the staff. They are the ones that have risen to the occasion time after time, to do what is needed for patient care.
It is clear looking backwards how one thing leads to another, and how if you have a goal, it will lead you. Mine was simply to have a rewarding career in pharmacy that I could take some satisfaction and pride and make a contribution to patient care.

Of course I could not end without giving a few words of advice:

1.0 When issues surface, listen and see all sides of the issue. Seek first to understand.
2.0 Remember that teamwork is the way to get things done. You are only as good as your team.
3.0 Trust in yourself, but seek advice often. You’d be surprised how often sharing a problem helps solve it.
4.0 Stay true to your goals and commitments. Make your dreams come true.
5.0 Work hard, but remember to take time for yourself, family and loved ones.
6.0 Live with honesty, courage, and grace.
7.0 Choose right over wrong, there is never a wrong time to do the right thing.
8.0 Remember, when one door closes, another door opens. Learn from mistakes or hardship, and look for the next opportunity.
9.0 Assess what is important to you, and live accordingly.

If you are as fortunate as I have been, you will have a career that not only keeps your interest and challenges you, but also gives you the satisfaction of doing something worthwhile.
I especially want to thank Tom Thielke and Dave Zilz, who took a chance on a young and somewhat naive young woman from Wyoming who had the goal of learning about hospital pharmacy.

Hopefully I have influenced others along the way in a positive way. I have had the opportunity to mentor some of you, and many of you have mentored me even more. Together we have shared some career success.

Thank you all very much.