

# Travis Watts: Teacher and Clinician



BY OLIVIA MAYER

When Travis Watts picked pharmacy over teaching as an area of study at Southwestern Oklahoma State University, he may have thought he was choosing one profession over the other. But today, as the manager of clinics at the Claremore Indian Hospital pharmacy, he's just as much a teacher as a pharmacist.

Just a year after joining the comprehensive care facility that serves an Indian population of some 63,000 from a 12-county area, the native of Little Axe, Okla., established a Cardiovascular Risk-Reduction Clinic and Anticoagulation Management Service.

Both programs were started from the ground up. They began to address the high incidence of heart disease among American Indians, Watts says.

"Cardiovascular disease — heart disease, strokes — are the No. 1 killer of American Indians in North America at this time," he says, "and Oklahoma ranks No. 5 in

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deaths from cardiovascular disease. In the Indian Health Service, we realize that our patients are born with us and they die with us, so preventive care is very, very important," he adds.

The risk-reduction clinic includes several disease-state management programs. Areas of emphasis include diabetes, hypertension, smoking cessation, obesity and dyslipidemia. The anticoagulation service focuses

on various therapies including warfarin and heparin. Together, the two clinics recorded nearly 4,000 patient visits last year.

Patients are seen in one of the pharmacy's six counseling rooms. Each is set up very much like a physician's office with blood-pressure cuffs, patient-education brochures and counseling tables, Watts says.

"We are able to intensify their monitoring and intensify their patient education," he adds.

On any given day, the pharmacy, which generally has five or six pharmacists working plus a few technicians, sees 15 to 20 patients, and dispenses 700 to 1,000 prescriptions.

"It's a very busy care facility, very fast paced," says Watts, "but it's also an extremely rewarding practice."



*Clinics manager Travis Watts, right, confers with staff pharmacists Lt. Brian Wren, left, and Lt. Robert Hayes.*

All of the pharmacists are cross-trained, and each is involved in all of the different areas. No one pharmacist is in charge of dispensing or seeing patients. “We just kind of all work together,” he says. “The variety makes for an interesting career.”

“The daily job is never the same. When you open the door and walk in, you never know what you are going to get.”

After earning his bachelor’s degree from Southwestern Oklahoma State in Weatherford, Watts began his career with the Indian Health Service, an agency within the Department of Health and Human Services that is responsible for providing federal health services to American Indians and Alaska natives. He spent three years working with the Hopi in Arizona and then went to the University of Oklahoma for his Pharm.D. degree.

After a residency with Veterans Affairs — he is a Lt. Commander in the U.S. Public Health Service — he was stationed at the Claremore facility five years ago. Watts also has an appointment as a clinical assistant professor with the University of Oklahoma. He says his residency provided the basis for developing the

disease-state management clinics.

Watts credits the establishment of the clinics to both his fellow pharmacists and the staff at the facility.

“The support we got from our medical staff and our CEO allowed us to start the clinics and get going,” he recalls. “You have to have the support from the upper echelon to make these successful,” he adds.

His role, however, has not gone unnoticed.

In 1999, Watts was named the Indian Health Service’s Junior Pharmacist of the Year. That same year he also was honored as the Oklahoma Area Junior Pharmacist of the Year.

The clinics themselves have been extremely successful. With grant assistance, the pharmacy conducted a study of its lipids program and found 94 percent of the clinic’s patients were on goal. For the anticoagulation service, patients on warfarin were in range 70 percent of the time compared to 40 percent of the time before the clinic began.

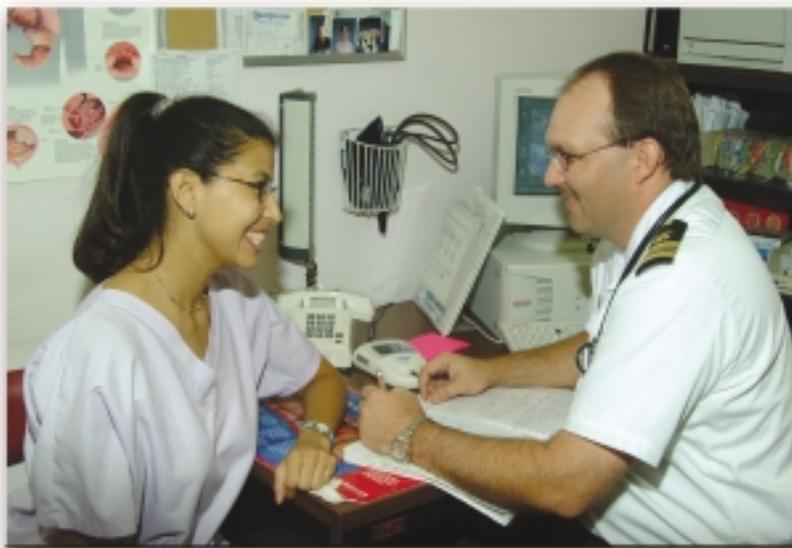
Watts points to the ability of his team of pharmacists to really focus on very specific areas, as well as an integrated approach in which health care is practiced in the Indian Health Service for the success of the clinics.

Establishing the clinics did have its obstacles. The principal hurdle, Watts says, was getting the physicians’ confidence.

“The biggest thing to overcome was the hesitancy that the physicians had in turning their patients over to us to provide primary care,” he says.

So how do you best attack that challenge? By working closely with the one physician that seems most re-

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*Watts counsels a patient in one of the pharmacy’s six counseling rooms. Additional space is being added to meet the needs of the pharmacy’s risk-reduction clinic and anticoagulation management services.*

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ceptive to the idea, Watts says.

"Once we did a very good job for him, the other physicians saw what we could do, and with his praise, the others just started turning over their patients left and right. Now, if anything, we have too many patients," he smiles.

In fact, the anticoagulation service manages 95 percent of the patients on warfarin that attend the facility, and the 1,200-square-foot pharmacy is in the process of adding an additional 300-500 square feet for more counseling areas.

However, Watts says the physician confidence hurdles may be less in the Indian Health Service setting than for independent pharmacists. Since the early 1950s, Indian Health Service pharmacists have been integrally involved in clinical and patient care and have worked side-by-side with physicians.

So much so that they have a lot of laboratory and prescribing privileges for a variety of disease states. "We prescribe not from a slip from the physician's office, but each patient comes with his or her entire medical record in hand," Watts says.

"We're very active with our physicians. We do a lot of clinical consulting to health-care providers," he adds, including a monthly continuing education class. "Whenever we telephone our physicians and provide a clinical recommendation, most of the time they are going to take that recommendation," Watts says.

Besides working closely with physicians, the pharmacists also meet with local medicine men, many of whom are their patients.

"Within the Indian Health Service, we have a lot of traditional native American remedies that are talked about and used," Watts says. "It's very important that we have open lines of communication."

Much effort, he adds, is focused on breaking down barriers and really talking with, and educating, the patient on how Western and traditional medicines can work together. Watts himself is a member of the Choctaw Nation, and other staff pharmacists



*The Claremore Indian Hospital pharmacy has five or six pharmacists and several technicians on duty daily. They see 15-20 patients and dispense 700 to 1,000 prescriptions. Watts reviews patient information with Darla McLane, a pharmacy technician.*

are members of the Cherokee and Creek Nations.

"Indian Health Service is a very culturally sensitive mission. The objective is self-government and self-providing," he says.

Besides patient and physician education, Watts also is involved in teaching other pharmacists. Three years ago, Watts and his team of nine pharmacists, who serve the facility's outpatient pharmacy, began a series of three-day training programs on how to start and operate an anticoagulation service and diabetes program. In addition, Watts is a member of the hospital's diabetes-care team and conducts support-group instruction as well as giving some 30 presentations a year on a wide range of pharmacy topics.

Last year, the facility began a residency program for pharmacists. This year, Watts also was busy establishing a new pharmacy school affiliated with the University of Oklahoma in the Tulsa area.

Although Watts says he "fell into pharmacy" after tearing a rotator cuff in college that ended his baseball career, he couldn't be more pleased with his endeavor.

"Pharmacy has been the most rewarding career I could ever imagine," he says. "I enjoy the variety and the ability to deal with patients on a daily basis, and the professionalism within pharmacy is very high."

Watts, who has a 5-month-old daughter and a 5-year-old son, is married to a fellow pharmacist whom he met while working in Arizona. He says that practicing within the Indian Health Service has been especially rewarding.

"Our practice is very patient centered. We provide a very strong, empathic type of care," he says. "If you don't want to sit in a room with a patient, we're not the place for you because we provide a lot of direct patient care."

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