

# Newsjournal and Career Center Advertising

## Effective January 2018

The Illinois Council of Health-System Pharmacists accepts advertising in its digital newsjournal, [KeePosted](#), and website, [www.ichpnet.org](http://www.ichpnet.org), in accordance with its advertising policies (see Advertising Insertion Order Form) and at currently established rates.

### KeePosted™

#### Official Newsjournal of the Illinois Council of Health-System Pharmacists

**EDITORIAL CONTENT** — News and information about institutional pharmacy practice in Illinois and activities of ICHP.

**CIRCULATION** — Distributed to ICHP members, selected state and national pharmacy associations, and other interested parties. Quantity: 1,900. Not available to non-members by subscription; members receive the newsjournal as part of their membership services.

**TYPE OF PUBLICATION** — Online digital newsjournal. For interested members, ICHP prints *KeePosted* in-house for \$30 per year.

**PUBLICATION FREQUENCY** — Monthly (except March/April and September/October)

**PAYMENT INFORMATION** — Your institution will be invoiced upon receipt of the online ad copy and the indicated run time dates.

#### CLOSING DATES —

- December 8, 2017 (January issue)
- January 12, 2018 (February issue)
- March 9, 2018 (March/April issue)
- April 13, 2018 (May issue)
- May 11, 2018 (June issue)
- June 8, 2018 (July issue)
- July 13, 2018 (August issue)
- September 14, 2018 (September/October issue)
- October 12, 2018 (November issue)
- November 9, 2018 (December issue)

### Career Center

[ichpnet.org](http://ichpnet.org)

**EDITORIAL CONTENT**— Job postings, news and information about institutional pharmacy practice in Illinois and activities of ICHP.

**AD FORMAT**— The online ad information is accepted in text format only and will be placed in the appropriate category.

**ONLINE RATE**— The online ad rate is \$250.00 per thirty-day run time. Please indicate the run time dates with your e-mail submission. If you'd like to run your ad for an additional 30 days, it may be purchased for \$225.00.

**PAYMENT INFORMATION**— Your institution will be invoiced upon receipt of the online ad copy and the indicated run time dates.

## Advertising Space

**Premium Sponsor Ad:** A full color, horizontal web banner ad measuring 578 x 100 pixels. The Premium Sponsor Ad offers the maximum exposure as a stationary banner ad featured at the top of every page\* of our online digital *KeePosted*™ newsjournal. This ad is also hyperlink capable, able to take users to your website or destination of choice upon clicking. Your ad will be linked to the home page of your website unless otherwise specified.\*\*

**Rotating Banner Ad:** A full color, horizontal web banner ad measuring 578 x 100 pixels. The Rotating Banner Ad is a stationary banner ad featured at the bottom of every page\* of our online digital *KeePosted*™ newsjournal. This ad “rotates,” and will be selected at random from a rotating ad pool each time a page is refreshed, or a new page is loaded. This ad is also hyperlink capable, able to take users to your website or destination of choice upon clicking. Your ad will be linked to the home page of your website unless otherwise specified.\*\* Special rates for repeat advertising available.

**30-Day Job Posting:** This is a text only ad featured in the ICHP Career Center. Pricing includes 2 mentions in related email blasts sent out to ICHP members during the ad's run time. Please indicate run time dates with your submission.

\*The number of articles, features, and pages varies with each issue of *KeePosted*™. Because ICHP is accredited by ACPE for continuing pharmacy education, certain educational and feature articles published in the *KeePosted*™ may not feature advertisements. ICHP does not guarantee the number of times your ad may appear within an issue.

\*\*Tracking and Google analytics reports available upon request. Please allow up to 10 business days to receive your reports.

Pricing			
Size	1x	3x (each run)	10x (each run)
Premium Sponsor Ad	\$500		
Rotating Banner Ad	\$250	\$225	\$200
30-Day Job Posting	\$250		

## Advertising Office

For more information or to reserve space for advertising, contact the ICHP office or simply fill out the **Advertising Insertion Order Form** and send to:

ICHP  
4055 N. Perryville Road  
Loves Park, IL 61111-8653  
or email to [MelissaD@ichpnet.org](mailto:MelissaD@ichpnet.org)

**Questions?** Contact Melissa Dyr Dahl, Communications Manager, by email at [MelissaD@ichpnet.org](mailto:MelissaD@ichpnet.org) or phone at 815-227-9292.



## ICHP Advertising Insertion Order Form

Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

### ICHP Advertising Policies

- Advertising will be accepted, subject to editorial approval, for drug products, employment opportunities, pharmaceutical equipment and supplies, publications and services, and other products or services of interest to institutional and ambulatory care pharmacists and pharmacy technicians. Final decisions for what constitutes appropriate advertising rests with the Editor of *KeePosted*, whose decision is final.
- Advertisers, by submitting advertising copy, certify that it is in accord with applicable government laws and regulations covering drug and drug-product advertising and anti-discrimination hiring policies.
- Alcoholic beverages and tobacco products are not eligible for advertising.
- Advertisements will not be accepted if they are known to: a.) contain attacks of a personal, racial, or religious character, or are libelous or otherwise contrary to law; or b.) contain claims found by any court or federal or state agency to be invalid or in violation of law.
- The Council reserves the right to place the word "Advertisement" on advertising matter that simulates editorial content and is not clearly identified as advertising.
- The advertiser may be required to submit data in support of the usefulness of a product or service and validity of claims, as well as in support of the advertiser's integrity and reliability.
- ICHP assumes that any product advertisement has complied with FDA quality assurance standards and assumes no liability if the product is not in compliance.
- Advertisements that suggest a profit or personal benefit to the pharmacist through a product's sale or recommendation are not permitted.
- Advertisements that offer free goods and premiums, or that state the availability of such premiums is contingent on purchasing a product will not be accepted.

Approved, ICHP Board of Directors

### Cancellation Policy

Cancellation of any insertion order will require advertiser to pay the published standard rates for any ads already run, regardless of quoted price in the insertion order. In addition, advertiser will pay a \$150 penalty for cancelling a multiple ad run order.

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### Submitting Your Ad

ICHP must receive the Advertising Insertion Order Form in order to place the ad in the newsjournal or on the website.

- Send the Advertising Insertion Order Form to the ICHP office by fax to 815-227-9294 or email to [MelissaD@ichpnet.org](mailto:MelissaD@ichpnet.org).
- Banner ads must be submitted in one of the following PC compatible file formats: JPEG (.jpg; preferred format), PNG (.png), or Adobe Acrobat (.pdf). Text only ads must be submitted as a Word document (.doc or .docx).
- Please include source information for any images used in your advertisement. Sources will be published in the *KeePosted*™ Image Disclaimer. Information should be sent to [MelissaD@ichpnet.org](mailto:MelissaD@ichpnet.org).
- One-time ad creation fee for a banner ad in *KeePosted*™ is \$50. Proofs will be emailed to appropriate party.
- Email your display ad(s) or text ad(s) to [MelissaD@ichpnet.org](mailto:MelissaD@ichpnet.org).

### Your Order

The following rates are amounts payable to ICHP. They do not include agency commissions. **Please circle your selection.**

Pricing			
Size	1x	3x (each run)	10x (each run)
Premium Sponsor Ad	\$500		
Rotating Banner Ad	\$250	\$225	\$200
30-Day Job Posting	\$250		

Date(s) of requested placement: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I agree with ICHP's Advertising and Cancellation Policies.

Signature: \_\_\_\_\_ Date of order placed: \_\_\_\_\_

### Method of Payment

- Please invoice my company referencing \_\_\_\_\_
- Enclosed is a check or money order made payable to: ICHP
- Charge my credit card

Credit card payments may be faxed to ICHP: (815) 227-9294  
 Account#: \_\_\_\_\_  
 Billing Zip: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_  
 Cardholder Name: \_\_\_\_\_  
 Cardholder Signature: \_\_\_\_\_

You will receive a receipt of payment via email.