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8 **BEFORE THE**  
9 **BOARD OF PHARMACY**  
10 **DEPARTMENT OF CONSUMER AFFAIRS**  
11 **STATE OF CALIFORNIA**

11 In the Matter of the First Amended Accusation  
12 Against:

13 **ROXSAN PHARMACY, INC.; FARBOD**  
14 **MELAMED, Pharmacist-in-Charge,**  
15 **SHAHLA KEYVANFAR MELAMED,**  
16 **CEO, President, Secretary**  
465 N. Roxbury Dr.  
Beverly Hills, CA 90210

17 **Pharmacy Permit No. PHY 38297,**  
18 **SHAHLA KEYVANFAR MELAMED**  
465 N. Roxbury Dr.  
Beverly Hills, CA 90210

19 **Pharmacist License No. RPH 42096,**

20 And

21 **FARBOD MELAMED**  
411 North Palm Dr. #11  
22 Beverly Hills, CA 90210

23 **Pharmacist License No. RPH 68252**

24 Respondents.

Case No. 4276  
OAH No. 2014040961

**FIRST AMENDED ACCUSATION**

[Gov. Code, § 11503.]

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1 Complainant alleges:

2 **PARTIES**

3 1. Complainant Virginia K. Herold brings this First Amended Accusation solely in her  
4 official capacity as the Executive Officer of the Board of Pharmacy, an agency within the  
5 Department of Consumer Affairs.

6 2. On November 3, 1992, the Board issued Pharmacy Permit Number PHY 38297 to  
7 Shahla Keyvanfar Melamed to do business as Rox San Pharmacy. On September 30, 2003, the  
8 license holder changed its name to Roxsan Pharmacy, Inc. The Pharmacy Permit was in full  
9 force and effect at all times relevant to the charges brought herein and will expire on  
10 November 1, 2014 unless it is renewed.

11 3. On August 19, 1988, the Board issued Pharmacist License Number RPH 42096 to  
12 Shahla Keyvanfar Melamed. Said license was in full force and effect at all times relevant to the  
13 charges brought herein and will expire on July 31, 2014 unless it is renewed. Respondent Shahla  
14 Melamed was the Pharmacist-in-Charge of Roxsan Pharmacy, formerly known as Rox San  
15 Pharmacy, from November 3, 1992 through December 2, 2012. She is and has been the  
16 President, Secretary and Chief Executive Officer of Roxsan Pharmacy since August 5, 2003.

17 4. On October 5, 2012, the Board issued Pharmacist License Number RPH 68252 to  
18 Farbod Melamed. Said license was in full force and effect at all times relevant to the charges  
19 brought herein and will expire on December 31, 2015 unless it is renewed. Respondent Farbod  
20 Melamed has been the Pharmacist-in-Charge of Roxsan Pharmacy since December 3, 2012.

21 **JURISDICTION**

22 5. This First Amended Accusation is brought before the Board under the authority of the  
23 following laws. All section references are to the Business and Professions Code (Code) and all  
24 regulatory references (Regulation) are to title 16 of the California Code of Regulations unless  
25 otherwise indicated.

26 6. Section 4300 relevantly states that the Board has authority to suspend or revoke any  
27 license issued under the Pharmacy Law, and that the proceedings to suspend or revoke a license  
28 must be conducted according to the Administrative Procedure Act (Gov. Code, §§ 11500, *et seq.*).



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12. Section 4150 relevantly states:

A pharmacy corporation means a corporation that is authorized to render professional services, as defined in Section 13401 of the Corporations Code, so long as that corporation and its shareholders, officers, directors, and employees rendering professional services who are pharmacists are in compliance with the Moscone-Knox Professional Corporation Act, this article, and all other statutes and regulations now or hereafter enacted or adopted pertaining to the corporation and the conduct of its affairs...

13. Section 4301 relevantly states:

The board shall take action against any holder of a license who is guilty of unprofessional conduct or whose license has been procured by fraud or misrepresentation or issued by mistake. Unprofessional conduct shall include, but is not limited to, any of the following:

...

(f) The commission of any act involving moral turpitude, dishonesty, fraud, deceit, or corruption, whether the act is committed in the course of relations as a licensee or otherwise, and whether the act is a felony or misdemeanor or not.

(g) Knowingly making or signing any certificate or other document that falsely represents the existence or nonexistence of a state of facts.

...

(j) The violation of any of the statutes of this state, of any other state, or of the United States regulating controlled substances and dangerous drugs.

...

(o) Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of or conspiring to violate any provision or term of this chapter or of the applicable federal and state laws and regulations governing pharmacy, including regulations established by the board or by any other state or federal regulatory agency.

(p) Actions or conduct that would have warranted denial of a license.

(q) Engaging in any conduct that subverts or attempts to subvert an investigation of the board...

14. Section 4302 states:

The board may deny, suspend, or revoke any license of a corporation where conditions exist in relation to any person holding 10 percent or more of the corporate stock of the corporation, or where conditions exist in relation to any officer or director of the corporation that would constitute grounds for disciplinary action against a licensee.

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1 15. Section 4306 states:

2 It shall constitute unprofessional conduct and a violation of this chapter for  
3 any person licensed under this chapter to violate, attempt to violate, directly or  
4 indirectly, or assist in or abet the violation of, or conspire to violate, any provision  
5 or term of this article, the Moscone-Knox Professional Corporation Act, or any  
6 regulations duly adopted under those laws.

7 16. Section 4306.5 states:

8 Unprofessional conduct for a pharmacist may include any of the following:

9 (a) Acts or omissions that involve, in whole or in part, the inappropriate  
10 exercise of his or her education, training, or experience as a pharmacist, whether or  
11 not the act or omission arises in the course of the practice of pharmacy or the  
12 ownership, management, administration, or operation of a pharmacy or other entity  
13 licensed by the board.

14 (b) Acts or omissions that involve, in whole or in part, the failure to  
15 exercise or implement his or her best professional judgment or corresponding  
16 responsibility with regard to the dispensing or furnishing of controlled substances,  
17 dangerous drugs, or dangerous devices, or with regard to the provision of services.

18 (c) Acts or omissions that involve, in whole or in part, the failure to  
19 consult appropriate patient, prescription, and other records pertaining to the  
20 performance of any pharmacy function.

21 (d) Acts or omissions that involve, in whole or in part, the failure to  
22 fully maintain and retain appropriate patient-specific information pertaining to the  
23 performance of any pharmacy function.

24 17. Section 4307 states:

25 (a) Any person who has been denied a license or whose license has been  
26 revoked or is under suspension, or who has failed to renew his or her license while  
27 it was under suspension, or who has been a manager, administrator, owner,  
28 member, officer, director, associate, or partner of any partnership, corporation, firm,  
or association whose application for a license has been denied or revoked, is under  
suspension or has been placed on probation, and while acting as the manager,  
administrator, owner, member, officer, director, associate, or partner had knowledge  
of or knowingly participated in any conduct for which the license was denied,  
revoked, suspended, or placed on probation, shall be prohibited from serving as a  
licensee as follows:

(1) Where a probationary license is issued or where an existing license is  
placed on probation, this prohibition shall remain in effect for a period not to  
exceed five years.

(2) Where the license is denied or revoked, the prohibition shall  
continue until the license is issued or reinstated.

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1 (b) "Manager, administrator, owner, member, officer, director, associate,  
2 or partner," as used in this section and Section 4308, may refer to a pharmacist or to  
any other person who serves in that capacity in or for a licensee.

3 (c) The provisions of subdivision (a) may be alleged in any pleading  
4 filed pursuant to Chapter 5 (commencing with Section 11500) of Part 1 of Division  
5 3 of the Government Code. However, no order may be issued in that case except as  
6 to a person who is named in the caption, as to whom the pleading alleges the  
7 applicability of this section, and where the person has been given notice of the  
8 proceeding as required by Chapter 5 (commencing with Section 11500) of Part 1 of  
Division 3 of the Government Code. The authority to proceed as provided by this  
subdivision shall be in addition to the board's authority to proceed under Section  
4339 or any other provision of law.

9 18. Section 4324 relevantly states:

10 (a) Every person who...falsely makes, alters, forges, utters, publishes,  
11 passes, or attempts to pass, as genuine, any prescription for any drugs is guilty of  
12 forgery and upon conviction thereof shall be punished by imprisonment pursuant to  
subdivision (h) of Section 1170 of the Penal Code, or by imprisonment in a county  
jail for not more than one year...

13 19. Section 4342 relevantly states:

14 (a) The board may institute any action or actions as may be provided by  
15 law and that, in its discretion, are necessary, to prevent the sale of pharmaceutical  
16 preparations and drugs that do not conform to the standard and tests as to quality  
17 and strength, provided in the latest edition of the United States Pharmacopoeia or  
the National Formulary, or that violate any provision of the Sherman Food, Drug  
and Cosmetic Law (Part 5 (commencing with Section 109875) of Division 104 of  
the Health and Safety Code).

18 20. Section 111400 of the Sherman Food, Drug, and Cosmetic Law (Health & Saf. Code,  
19 §§ 109875, *et seq.*) defines a misbranded drug or device as one that "is dangerous to health when  
20 used in the dosage, or with the frequency or duration prescribed, recommended, or suggested in  
21 its labeling."

## 22 REGULATORY PROVISIONS

23 21. California Code of Regulations, title 16, section 1716, states:

24 Pharmacists shall not deviate from the requirements of a prescription except  
25 upon the prior consent of the prescriber or to select the drug product in accordance  
with Section 4073 of the Business and Professions Code.

26 Nothing in this regulation is intended to prohibit a pharmacist from  
27 exercising commonly-accepted pharmaceutical practice in the compounding or  
dispensing of a prescription.

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22. California Code of Regulations, title 16, section 1735, states:

(a) 'Compounding' means any of the following activities occurring in a licensed pharmacy, by or under the supervision of a licensed pharmacist, pursuant to a prescription:

- (1) Altering the dosage form or delivery system of a drug
- (2) Altering the strength of a drug
- (3) Combining components or active ingredients
- (4) Preparing a drug product from chemicals or bulk drug substances

(b) 'Compounding' does not include reconstitution of a drug pursuant to a manufacturer's direction(s) for oral, rectal topical, or injectable administration, nor does it include tablet splitting or the addition of flavoring agent(s) to enhance palatability.

(c) 'Compounding' does not include, except in small quantities under limited circumstances as justified by a specific, documented, medical need, preparation of a compounded drug product that is commercially available in the marketplace or that is essentially a copy of a drug product that is commercially available in the marketplace.

(d) The parameters and requirements stated by this Article 4.5 (Section 1735 et seq.) apply to all compounding practices. Additional parameters and requirements applicable solely to sterile injectable compounding are stated by Article 7 (Section 1751 et seq.).

23. California Code of Regulations, title 16, section 1735.2, relevantly states:

(h) Every compounded drug product shall be given an expiration date representing the date beyond which, in the professional judgment of the pharmacist performing or supervising the compounding, it should not be used. This "beyond use date" of the compounded drug product shall not exceed 180 days from preparation or the shortest expiration date of any component in the compounded drug product, unless a longer date is supported by stability studies of finished drugs or compounded drug products using the same components and packaging. Shorter dating than set forth in this subsection may be used if it is deemed appropriate in the professional judgment of the responsible pharmacist.

(i) The pharmacist performing or supervising compounding is responsible for the proper preparation, labeling, storage, and delivery of the compounded drug product...

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24. California Code of Regulations, title 16, section 1751, relevantly states:

(a) Any pharmacy engaged in compounding sterile injectable drug products shall conform to the parameters and requirements stated by Article 4.5 (Section 1735 et seq.), applicable to all compounding, and shall also conform to the parameters and requirements stated by this Article 7 (Section 1751 et seq.), applicable solely to sterile injectable compounding.

...

(c) Any pharmacy compounding a sterile injectable product from one or more non-sterile ingredients shall comply with Business and Professions Code section 4127.7.

25. California Code of Regulations, title 16, section 1751.1, states:

(a) Pharmacies compounding sterile injectable products for future use pursuant to section 1735.2 shall, in addition to those records required by section 1735.3, make and keep records indicating the name, lot number, amount, and date on which the products were provided to a prescriber.

(b) In addition to the records required by section 1735.3 and subdivision (a), for sterile products compounded from one or more non-sterile ingredients, the following records must be made and kept by the pharmacy:

...

(2) Refrigerator and freezer temperatures.

...

(c) Pharmacies shall maintain and retain all records required by this article in the pharmacy in a readily retrievable form for at least three years from the date the record was created.

26. California Code of Regulations, title 16, section 1751.7, states:

(a) Any pharmacy engaged in compounding sterile injectable drug products shall maintain, as part of its written policies and procedures, a written quality assurance plan including, in addition to the elements required by section 1735.8, a documented, ongoing quality assurance program that monitors personnel performance, equipment, and facilities. The end product shall be examined on a periodic sampling basis as determined by the pharmacist-in-charge to assure that it meets required specifications. The Quality Assurance Program shall include at least the following:

...

(2) The storage of compounded sterile injectable products in the pharmacy and periodic documentation of refrigerator temperature.

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1 (c) Batch-produced sterile injectable drug products compounded from  
2 one or more non-sterile ingredients shall be subject to documented end product  
3 testing for sterility and pyrogens and shall be quarantined until the end product  
4 testing confirms sterility and acceptable levels of pyrogens.

5 27. California Code of Regulations, title 16, section 1770, states:

6 For the purpose of denial, suspension, or revocation of a personal or facility  
7 license pursuant to Division 1.5 (commencing with Section 475) of the Business  
8 and Professions Code, a crime or act shall be considered substantially related to the  
9 qualifications, functions or duties of a licensee or registrant if to a substantial  
10 degree it evidences present or potential unfitness of a licensee or registrant to  
11 perform the functions authorized by his license or registration in a manner  
12 consistent with the public health, safety, or welfare.

13 28. California Code of Regulations, title 16, section 1793.7, relevantly states:

14 (a) Except as otherwise provided in section 1793.8, any function  
15 performed by a pharmacy technician in connection with the dispensing of a  
16 prescription, including repackaging from bulk and storage of pharmaceuticals,  
17 must be verified and documented in writing by a pharmacist. Except for the  
18 preparation of prescriptions for an inpatient of a hospital and for an inmate of a  
19 correctional facility, the pharmacist shall indicate verification of the prescription  
20 by initialing the prescription label before the medication is provided to the patient.

21 ...

22 (c) A pharmacy technician must wear identification clearly identifying  
23 him or her as a pharmacy technician...

24 **ARKANSAS PHARMACY LAW**

25 29. At all times relevant to the charges brought herein, Arkansas Administrative  
26 Code, title 070, division 00, rule 4, section 04-04-0001 stated, in pertinent part:

27 Out of State pharmacies shall comply with the following qualifications to be,  
28 and remain, licensed in Arkansas by the Board.

(a)(1) The pharmacy holds a current license in good standing in the  
state(s) in which it is located.

(2) Each pharmacist dispensing drugs into Arkansas shall be licensed as  
a pharmacist in Arkansas or in the state where he practices if that state has  
standards of licensure at least equivalent to those of Arkansas.

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1 (c) The out of state pharmacy shall apply for licensure and renewal on  
2 forms provided by the Board. The Board may require such information as  
3 reasonably necessary to carry out the provisions of A.C.A. § 17-92-401, including,  
4 without limitation, the name, address and position of each officer and director of a  
5 corporation or of the owners if the pharmacy is not a corporation.

6 Provided, however, the Board may grant an exemption from licensing under  
7 A.C.A. § 17-92-401 upon application by any non-resident pharmacy which  
8 confines its dispensing activity to isolated transactions...

9 ...

10 (e) The pharmacy shall maintain records of drugs dispensed to  
11 Arkansas addresses in such a manner so as to be readily retrievable upon request.  
12 These records shall be made available for inspection by the Board or by Arkansas  
13 law enforcement authorities.

14 (f) The pharmacy shall timely respond to any request for information  
15 from the Board or law enforcement authorities.

16 (g) The pharmacy shall maintain an incoming toll free telephone  
17 number for use by Arkansas customers to be answered by a pharmacist with access  
18 to patient records. This service shall be available a minimum of 40 hours a week,  
19 six days per week during normal business hours. This telephone number plus  
20 others available for use shall be printed on each container of drugs dispensed into  
21 Arkansas. The toll free number shall have sufficient extensions to provide  
22 reasonable access to incoming callers.

23 ...

24 (i) The facilities and records of the pharmacy shall be subject to  
25 inspection by the Board; provided, however, the Board may accept in lieu thereof  
26 satisfactory inspection reports by the licensing entity using similar standards of the  
27 state where the pharmacy is located.

28 (j) Each out of state pharmacy doing business in Arkansas by  
dispensing and delivering or causing to be delivered prescription drugs to Arkansas  
consumers shall designate a resident agent in Arkansas for service of process.

(k) Each out of state pharmacy doing business in Arkansas shall  
comply with Board of Pharmacy regulation 09-00-0001 (Patient Information, Drug  
Use Evaluation, and Patient Counseling).

...

The responsibility to ensure compliance with this regulation rests both with  
the Arkansas pharmacist in charge and with the pharmacy owner if they are not the  
same.

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1 **CONNECTICUT PHARMACY LAW**

2 30. At all times relevant to the charges brought herein, section 20-601 of the Connecticut  
3 Pharmacy Practice Act stated in pertinent part:

4 The department shall collect the following nonrefundable fees:

5 ...

6 (12) The fee for issuance of a nonresident pharmacy certificate of  
7 registration is seven hundred fifty dollars.

8 (13) The fee for renewal of a nonresident pharmacy certificate of  
9 registration is one hundred ninety dollars...

10 31. Section 20-605 of the Connecticut Pharmacy Practice Act states:

11 No individual may engage in the practice of pharmacy unless the individual  
12 holds a current license or temporary permit to practice pharmacy issued by the  
13 department.

14 32. At all times relevant to the charges brought herein, section 20-627 of the Connecticut  
15 Pharmacy Practice Act stated:<sup>1</sup>

16 (a) As used in sections 20-627 to 20-630, inclusive, "nonresident  
17 pharmacy" means any pharmacy located outside this state which ships, mails or  
18 delivers, in any manner, legend devices or legend drugs into this state pursuant to a  
19 prescription order.

20 (b) A nonresident pharmacy shall be registered with the department,  
21 upon approval of the commission, and shall:

22 (1) Disclose annually in a report to the commission the location, names  
23 and titles of all principal corporate officers, if applicable, and all pharmacists who  
24 are dispensing drugs or devices to residents of this state. A nonresident pharmacy  
25 shall file an additional report within thirty days after any change of office, corporate  
26 officer or pharmacist.

(2) Submit a statement that the nonresident pharmacy complies with all  
27 lawful directions and requests for information from the regulatory or licensing  
28 agency of the state in which it is licensed as well as comply with all requests for  
information made by the commission pursuant to this section.

(3) Maintain at all times, a valid unexpired license, permit or registration  
to conduct such pharmacy in compliance with the laws of the state in which the  
nonresident pharmacy is located.

(4) Before receiving a certificate of registration from the department,  
submit a copy of the most recent inspection report resulting from an inspection  
conducted by the regulatory or licensing agency of the state in which the  
nonresident pharmacy is located.

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<sup>1</sup> Amended by 2014 Conn. Legis. Serv. P.A. 14-224 (H.B. 5262) (WEST)

1 (c) A nonresident pharmacy shall, during its regular hours of operation,  
2 but not less than six days per week, and for a minimum of forty hours per week,  
3 provide a toll-free telephone number to facilitate communication between patients  
4 in this state and a pharmacist at such nonresident pharmacy who has access to the  
patient's records. Such toll-free telephone number shall be disclosed on a label  
affixed to each container of drugs dispensed to patients in this state.

5 33. At all times relevant to the charges brought herein, section 20-628 of the Connecticut  
6 Pharmacy Practice Act stated:

7 No nonresident pharmacy shall engage in the business of shipping, mailing or  
8 delivering legend devices or legend drugs in this state unless such nonresident  
9 pharmacy has been issued a certificate of registration by the commission and has  
10 paid the fee for issuance or renewal of such certificate of registration required in  
11 section 20-601. Applications for a certificate of registration as a nonresident  
pharmacy shall be made on a form furnished by the commission. The commission  
may require such information as it deems reasonably necessary to carry out the  
purpose of this section.

#### 12 LOUISIANA PHARMACY LAW

13 34. At all times relevant to the charges brought herein, section 1201 of the Louisiana  
14 Pharmacy Practice Act stated:

15 A. Except as otherwise provided in this Chapter, it shall be unlawful  
16 for any individual to engage in the practice of pharmacy unless currently licensed  
or registered to practice under the provisions of this Chapter.

17 B. Licensed practitioners authorized under the laws of this state to  
18 compound drugs and to dispense drugs to their patients in the practice of their  
19 respective professions shall meet the same standards, record keeping requirements,  
and all other requirements for the dispensing of drugs applicable to pharmacists.

20 C. It shall be unlawful for any individual to assist in the practice of  
21 pharmacy unless currently registered or certified by the board.

22 35. At all times relevant to the charges brought herein, section 1221 of the Louisiana  
23 Pharmacy Practice Act stated:

24 A. No person shall open, establish, operate, or maintain a pharmacy  
25 located within this state unless the pharmacy is issued a permit by the board.

26 B. No out-of-state pharmacy providing pharmacy services to residents  
27 of this state shall open, establish, operate, or maintain a pharmacy located out-of-  
28 state unless the pharmacy is issued a permit by the board.

C. No permit to operate a pharmacy shall be granted or renewed unless  
evidence satisfactory to the board ensures that a pharmacist in the state where the  
permit is issued and pharmacy is located will be on duty during normal hours as  
administratively defined.

1           36. At all times relevant to the charges brought herein, section 1232 of the Louisiana  
2 Pharmacy Practice Act stated:

3           A. A pharmacy located outside this state which does business in this  
4 state within the meaning of this Chapter shall hold a current pharmacy permit as  
5 provided in this Chapter. The pharmacy shall be designated a "nonresident  
6 pharmacy" and the permit shall be designated a "nonresident pharmacy permit".

7           B. A nonresident pharmacy granted a nonresident pharmacy permit by  
8 the board shall disclose to the board the location, names, and titles of all principal  
9 corporate officers, as well as the owner's managing officer and pharmacist-in-  
10 charge. A report containing this information shall be made to the board on an  
11 annual basis and within thirty business days after any change of office, corporate  
12 officer, or within ten business days of the departure of the prior owner's managing  
13 officer or pharmacist-in-charge.

14           C. The nonresident pharmacy shall maintain at all times authorization  
15 to conduct the pharmacy in compliance with the laws of the state in which it is a  
16 resident. As a prerequisite to seeking a permit from the board, the nonresident  
17 pharmacy shall submit a copy of the most recent inspection report resulting from  
18 an inspection conducted by the regulatory or licensing agency of the state in which  
19 it is located, as well as any other state pharmacy licensing agency or any agent  
20 thereof, and any inspection reports produced by the federal Food and Drug  
21 Administration or the federal Drug Enforcement Administration. Thereafter, the  
22 nonresident pharmacy granted a permit shall submit to the board a copy of any  
23 subsequent inspection report on the pharmacy conducted by the regulatory or  
24 licensing body of the state in which it is located, or by any other state pharmacy  
25 licensing agency, or any agent thereof, or by the federal Food and Drug  
26 Administration or the federal Drug Enforcement Administration. In addition to or  
27 in lieu of an inspection by the regulatory or licensing body of the state in which it  
28 is a resident, or any agent thereof, the nonresident pharmacy shall be subject to an  
inspection by the board. When the board conducts an inspection of a nonresident  
pharmacy, the board shall recover its expenses from the nonresident pharmacy in  
addition to the applicable permit fee authorized by this Chapter.

          D. A nonresident pharmacy granted a nonresident pharmacy permit by  
the board shall maintain records of any controlled substances or dangerous drugs  
or devices dispensed to patients in this state so that the records are readily  
retrievable from the records of other drugs dispensed.

          E. Records for all prescriptions and products delivered into the state  
shall be readily retrievable from the other prescription records of the nonresident  
pharmacy and shall be in compliance with all federal laws and with regulations as  
may be required by this state.

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1           37. At all times relevant to the charges brought herein, Louisiana Administrative Code,  
2 title 46, section 2301, entitled "Purpose," stated:

3           A. Out-of-State Pharmacies shall comply with the provisions of this  
4 Chapter in order to be and remain permitted to operate in Louisiana as an out-of-  
state pharmacy.

5           B. This Chapter applies to any place physically located outside the  
6 state of Louisiana that provides services in the state of Louisiana where  
7 prescription drugs are dispensed and/or pharmacy care is provided to residents of  
8 the state of Louisiana. This includes, but is not limited to, pharmacies providing  
goods and services via U.S. mail carrier, commercial carrier, the Internet, and/or  
directly to Louisiana residents.

9           38. At all times relevant to the charges brought herein, Louisiana Administrative Code,  
10 title 46, section 2303, entitled "Out-of-State Pharmacy Requirements," stated:

11           A. The out-of-state pharmacy shall hold a current pharmacy permit in  
12 good standing in the state(s) in which it is located and/or practicing pharmacy.

13           B. Each pharmacist dispensing drugs into Louisiana shall be licensed as  
14 a pharmacist in good standing in the state(s) where he practices.

15           C. Every out-of-state pharmacy doing business in Louisiana by  
16 dispensing and delivering prescription drugs and devices to Louisiana residents  
shall designate a resident agent and a registered office in Louisiana for the service  
of process.

17           39. At all times relevant to the charges brought herein, Louisiana Administrative Code,  
18 title 46, section 2305, entitled "Out-of-State Pharmacy Permit Requirements," stated:

19           A. The out-of-state pharmacy shall apply for a permit and annual  
20 permit renewals on forms provided by the board. The board may require such  
21 information as reasonably necessary to carry out the provisions of R.S. 37:1232,  
including, without limitation, the name, address, and position of each officer and  
director of a corporation or of the owners, if the pharmacy is not a corporation.

22           B. The out-of-state pharmacy shall pay an annual permit fee as defined  
23 in R.S. 37:1184.

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**STATEMENT OF FACTS**

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2       46. This First Amended Accusation alleges causes for discipline stemming from five  
3 consumer complaints. The Board received the first complaint on June 9, 2011. In substance, the  
4 complainant alleged that on February 21, 2011, Roxsan Pharmacy substituted an inappropriate  
5 device for injecting a drug marketed under the name "Omnitrope." Omnitrope is indicated for  
6 growth hormone deficiency and has an off-label use of improving female fertility. The Board  
7 investigated the complaint and conducted an inspection of Roxsan Pharmacy on June 23, 2011.  
8 The pertinent findings of the inspection are alleged in Section A, below.

9       47. The second consumer complaint came to the Board on July 27, 2011. The  
10 complainant alleged that Roxsan Pharmacy dispensed Domperidone to nursing mothers to  
11 enhance breast milk production. Domperidone is approved in some countries for gastrointestinal  
12 disorders. The United States Food and Drug Administration, the federal agency responsible for  
13 reviewing new drug applications, has not approved Domperidone for any purpose in this country  
14 and has banned the drug's importation and interstate transfer except for research purposes. The  
15 Board inspected Roxsan Pharmacy on September 15, 2011. The pertinent findings of the  
16 inspection are alleged in Section B, below.

17       48. The Board received the third consumer complaint on February 21, 2013. The  
18 complainant alleged that Roxsan Pharmacy sold dangerous drugs and controlled substances to  
19 Louisiana residents without being licensed in that state, as Louisiana law requires. The Board  
20 inspected Roxsan Pharmacy on June 4, 2013. The relevant findings of the inspection are alleged  
21 in Section C, below.

22       49. The fourth consumer complaint came to the Board on September 24, 2013. The  
23 complainant alleged that Roxsan Pharmacy dispensed prescriptions to consumers in Connecticut  
24 without being licensed in that state, as Connecticut law requires. The Board inspected Roxsan  
25 Pharmacy on November 5, 2013. The relevant findings of the inspection are alleged in Section D,  
26 below.

27       50. The Board learned of the final complaint on September 25, 2013. The Arkansas State  
28 Board of Pharmacy alleged that Roxsan Pharmacy dispensed prescriptions to consumers in

1 Arkansas without being licensed in that state, as Arkansas law requires. The Board inspected  
2 Roxsan Pharmacy on November 5, 2013. The relevant findings of the inspection are alleged in  
3 Section E, below.

4 **A. Omnitrope Complaint and Pharmacy Inspection on June 23, 2011**

5 51. On December 9, 2010, a San Francisco-based fertility doctor prescribed Omnitrope  
6 (somatropin) 5mg per 1.5ml to one of her patients. Omnitrope is a recombinant human growth  
7 hormone indicated for the treatment of adult onset or childhood onset growth hormone  
8 deficiency. It is dispensed in cartridges holding doses of 5mg per 1.5ml or 10mg per 1.5ml. The  
9 cartridges are designed by the manufacturer, Sandoz, to be used with its own dispensing pens,  
10 Pen 5 and Pen 10. Each pen is specific to the prescribed dose—Pen 5 for 5mg prescriptions and  
11 Pen 10 for 10mg prescriptions. Sandoz supplies the pens to patients free of charge upon the  
12 prescriber's request. In Omnitrope's published drug information, Sandoz warns against using  
13 non-proprietary devices to dispense the medication, stating that Omnitrope cartridges "must be  
14 used with the corresponding OMNITROPE® Pen 5 and Pen 10 delivery system, respectively."

15 52. The Follistim Pen is a dispensing device made by Merck. It is designed to inject  
16 precise doses of Merck's Follistim AQ (follitropin beta) drug. Follistim AQ is a gonadotropin  
17 that stimulates reproductive processes in women. Follistim AQ is indicated for the induction of  
18 ovulation and pregnancy and development of multiple follicles for patients in assisted  
19 reproductive programs. Merck sells the drug in cartridges dosed in international units (IU).  
20 Follistim AQ is available in strengths of 175 IU per 0.210ml, 350 IU per 0.420ml, 650 IU per  
21 0.780ml, and 975 IU per 1.170ml. Merck's patient information guide advises patients not to "mix  
22 any other medicines into the cartridge" and directs patients to "[u]se [the] "Follistim AQ  
23 Cartridge only with the Follistim Pen."

24 53. On February 21, 2011, Roxsan Pharmacy received a faxed prescription for  
25 Omnitrope. Pharmacist J.A. (not a party to this action) dispensed the Omnitrope cartridge (5mg  
26 per 1.5ml) that day and substituted a Follistim Pen for the Omnitrope Pen 5. Roxsan Pharmacy  
27 and the dispensing pharmacist did not instruct the patient on how to convert milliliters  
28 (Omnitrope Pen) into international units (Follistim Pen) or otherwise provide adequate use

1 instructions.

2 54. The patient was unable to use the Follistim pen dispensed by Roxsan Pharmacy and  
3 obtained the Omnitrope Pen 5 from her fertility clinic. Roxsan Pharmacy never replaced the  
4 Follistim pen with a suitable dispensing device.

5 55. On June 9, 2011, the patient's partner filed a complaint with the Board over the  
6 substitution of the Follistim pen. On June 23, 2011, a Board inspector conducted a complaint  
7 inspection of Roxsan Pharmacy at its Beverly Hills location. The inspector documented the  
8 following relevant facts:

9 **1. A Pharmacist Falsified a Prescription Record**

10 56. As part of the inspection into the Omnitrope consumer complaint, the inspector asked  
11 for all pharmacy records related to the dispensing of the patient's Omnitrope prescription. The  
12 dispensing pharmacist, J.A., produced records that showed the prescription was written on  
13 December 9, 2010 for "Omnitrope Pen 5 (5mg/1.5ml)" in a quantity of five with one authorized  
14 refill. The prescription was typed and contained instructions to "dispense as written." The words  
15 "Foll Pen #1 per MD" appeared, handwritten, on the right side of the prescription. The  
16 dispensing pharmacist told the inspector that the physician verbally authorized the substitution.

17 57. The inspector noticed that the handwritten portion of the order, which purported to  
18 reflect the physician's order for the substitution, was wet. To test her belief, she ran her finger  
19 across the ink. The order smeared. The dispensing pharmacist admitted that she wrote the order  
20 for the substitution during the inspection.

21 58. By letter dated July 6, 2011, the prescribing doctor denied having authorized the  
22 Follistim Pen's substitution.

23 **2. Pharmacist-in-Charge Shahla Melamed Falsified the DEA Biennial**  
24 **Controlled Substance Inventory**

25 59. Later in the inspection, the Board inspector requested the pharmacy's federal Drug  
26 Enforcement Administration biennial controlled substance inventory. The pharmacist produced a  
27 spiral notebook containing handwritten controlled substance counts. The dates of the inventories  
28 were June 7, 2007, May 6, 2009 and June 1, 2011. For the biennial periods ending in 2007 and

1 2009, the inventories included Schedule II through V controlled substances. For the period  
2 ending in 2011, the inventory recorded only Schedule II controlled substances; missing were drug  
3 counts for Schedule III through V controlled substances.

4 60. At some point during the inspection, Respondent Shahla Melamed, the Pharmacist-in-  
5 Charge, arrived at the pharmacy. The Board inspector asked her for the pharmacy's self  
6 assessment and DEA inventory. Respondent Shahla Melamed produced the same spiral notebook  
7 as before. The inspector noticed that within the 2009 inventory, the header had been changed to  
8 include the date of June 1, 2011 for Scheduled drugs not listed in the 2011 inventory. The Board  
9 inspector asked Respondent Shahla Melamed if she added the 2011 date to the 2009 inventory.  
10 After first denying the charge, Respondent Shahla Melamed admitted adding "6/1/11" to the 2009  
11 controlled substance inventory. The modification gave the appearance that Roxsan Pharmacy  
12 maintained a count of Schedule III through V controlled substances for the biennial reporting  
13 period ending in 2011.

14 **3. Roxsan Pharmacy Did Not Perform End Product Sterility and Pyrogen**  
15 **Testing on Sterile Injectable Products or Keep Temperature Records**

16 61. While evaluating the pharmacy's sterile compounding practice, the Board inspector  
17 discovered that Roxsan Pharmacy compounded injectable alprostadil alcohol solution on March  
18 30, 2011 and June 2, 2011, and also prepared mitomycin injectable solution on February 14,  
19 2011. Roxsan Pharmacy did not conduct end product sterility and pyrogen testing on either  
20 solution to ensure safe use. Nor did the pharmacy maintain temperature records for the freezer  
21 used to store these and other sterile injectable solutions.

22 **4. Roxsan Pharmacy Did Not Verify All Pharmacy Technician Work, Did**  
23 **Not Ensure that Each Pharmacy Technician Was Wearing Identification,**  
24 **and Maintained 17 Expired Ingredients in Active Compounding Stock**

25 62. In addition to having deficient practices concerning sterile injectable products,  
26 Roxsan Pharmacy comingled 17 expired compounding ingredients with active compounding  
27 stock and permitted two of its pharmacy technicians to be present in the compounding area  
28 without wearing identification badges. The Board inspector found 14 medication bubble cards

1 prepared by pharmacy technicians that did not contain a pharmacist's initials indicating that a  
2 pharmacist had verified the technician's work.

3 **B. Domperidone Complaint and Inspection on September 15, 2011**

4 63. On July 28, 2011, the Board received a complaint alleging that Roxsan Pharmacy  
5 dispensed Domperidone. Domperidone is a galactagogue, meaning it increases breast milk  
6 production in lactating women. The drug is not approved in the United States for any purpose  
7 although it is approved in other countries for the treatment of gastrointestinal disorders. The FDA  
8 bans the importation and interstate transportation of finished products and bulk compounding  
9 ingredients containing Domperidone except for use in research and development.

10 64. On September 15, 2011, Board inspectors conducted a complaint inspection at  
11 Roxsan Pharmacy. They discovered compounded Domperidone in the pharmacy's inventory.  
12 The pharmacy possessed 100 10mg capsules, 200 20mg capsules, 200 30mg capsules and 100  
13 40mg capsules of the drug. The pharmacy dispensed 452 prescriptions containing Domperidone  
14 in these various strengths between approximately August 4, 2005 and September 2, 2011.

15 65. Under its authority to embargo misbranded drugs, the Board seized the pharmacy's  
16 stock of Domperidone. (Bus. & Prof. Code, § 4084.)

17 **C. Louisiana Complaint and Pharmacy Inspection on June 4, 2013**

18 66. On February 21, 2013, the Louisiana Board of Pharmacy complained to the Board  
19 that Roxsan Pharmacy was soliciting business from Louisiana physicians and selling dangerous  
20 drugs and controlled substances in that state without proper licensure.

21 67. On June 4, 2013, the Board inspected Roxsan Pharmacy. Respondent Farbod  
22 Melamed was the acting Pharmacist-in-Charge. He admitted to the inspector that Roxsan  
23 pharmacy dispensed and shipped dangerous drugs to patients in Louisiana without being licensed  
24 in that state.

25 68. From July 31, 2012 to June 6, 2013, Roxsan Pharmacy dispensed 22 original  
26 prescriptions and two refills to patients residing in Louisiana. All but one of the prescriptions  
27 contained ketamine, a Schedule III controlled substance.

28 ///

1           69. The inspection further revealed that Roxsan Pharmacy established incorrect beyond  
2 use dates for eight batch compounded drug products. In each case, the compounded drug  
3 product's expiration date exceeded the expiration date of one of its ingredients. Respondent  
4 Shahla Melamed verified the products in question and Roxsan Pharmacy dispensed prescriptions  
5 from the stale batches.

6           **D. Connecticut Complaint and Pharmacy Inspection on November 5, 2013**

7           70. On September 24, 2013, a Connecticut consumer complained to the Board that  
8 Roxsan Pharmacy was dispensing prescriptions to consumers in Connecticut without being  
9 licensed in that state.

10          71. On November 5, 2013, the Board inspected Roxsan Pharmacy. Respondent Farbod  
11 Melamed was the acting Pharmacist-in-Charge.

12          72. From May 21, 2012 to June 14, 2013, Roxsan Pharmacy dispensed 230 prescriptions  
13 to patients residing in Connecticut. During this period, Respondent Roxsan Pharmacy was not  
14 licensed in the state of Connecticut.

15           **E. Arkansas Complaint and Pharmacy Inspection on November 11, 2013**

16          73. On September 25, 2013, the Arkansas Board of Pharmacy complained to the Board  
17 that Roxsan Pharmacy was dispensing prescriptions to consumers in Arkansas without proper  
18 licensure.

19          74. On November 5, 2013, the Board inspected Roxsan Pharmacy. Respondent Farbod  
20 Melamed was the acting Pharmacist-in-Charge. He admitted that Respondent Roxsan Pharmacy  
21 shipped prescriptions into Arkansas without being licensed in that state.

22          75. From January 7, 2013 to June 11, 2013, Roxsan Pharmacy dispensed 16 original  
23 prescriptions to patients residing in Arkansas. During this period, Respondent Roxsan Pharmacy  
24 was not licensed in the state of Arkansas.

25       ///

26       ///

27       ///

28       ///

1 **FIRST CAUSE FOR DISCIPLINE**

2 **(Unprofessional Conduct—Falsification of Pharmacy Records)**

3 **(As to Respondents Roxsan Pharmacy and Shahla Melamed)**

4 76. Respondents Roxsan Pharmacy and Shahla Melamed are subject to discipline under  
5 section 4301, subdivision (g), for knowingly making or signing a document that falsely represents  
6 the existence or nonexistence of a state of facts. On June 23, 2011, Respondent Shahla Melamed  
7 knowingly falsified a DEA biennial controlled substance inventory during an inspection of the  
8 pharmacy. Complainant realleges paragraphs 46, 51–55 and 59–60.

9 **SECOND CAUSE FOR DISCIPLINE**

10 **(Unprofessional Conduct—Falsification of Pharmacy Records)**

11 **(As to Respondent Roxsan Pharmacy)**

12 77. Respondent Roxsan Pharmacy is subject to discipline under section 4301, subdivision  
13 (g), in that on June 23, 2011, one of its pharmacists knowingly falsified a prescription for  
14 Omnitrope 5mg/1.5ml. Complainant realleges paragraphs 46 and 51–58.

15 **THIRD CAUSE FOR DISCIPLINE**

16 **(Unprofessional Conduct—Subverting a Board Investigation)**

17 **(As to Respondents Roxsan Pharmacy and Shahla Melamed)**

18 78. Respondents Roxsan Pharmacy and Shahla Melamed are subject to discipline under  
19 section 4301, subdivision (q), for attempting to subvert an investigation of the Board on June 23,  
20 2011. Complainant realleges paragraphs 46, 51–60 and 76–77.

21 **FOURTH CAUSE FOR DISCIPLINE**

22 **(Unprofessional Conduct—Dishonesty, Fraud or Deceit)**

23 **(As to Respondents Roxsan Pharmacy and Shahla Melamed)**

24 79. Respondents Roxsan Pharmacy and Shahla Melamed are subject to discipline under  
25 section 4301, subdivision (f), for committing an act on June 23, 2011 involving dishonesty, fraud,  
26 deceit or corruption. Complainant realleges paragraphs 46, 51–60 and 76–78.

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1 **FIFTH CAUSE FOR DISCIPLINE**

2 **(Unprofessional Conduct—Violation of Pharmacy Law and Regulations)**

3 **(As to Respondent Roxsan Pharmacy)**

4 80. Respondent Roxsan Pharmacy is subject to discipline under section 4301, subdivision  
5 (o), for violating, or assisting in or abetting the violation of or conspiring to violate a state law  
6 governing pharmacy. In particular, Respondent Roxsan Pharmacy violated Code section 4324,  
7 which section makes it a crime to falsely make or alter a prescription. On June 23, 2011,  
8 a pharmacist employed by Respondent Roxsan Pharmacy knowingly falsified a pharmacy record  
9 during an inspection of the pharmacy. The pharmacist wrote an unauthorized device substitution  
10 (Follistim Pen) on a prescription for Omnitrope 5mg/1.5ml. Complainant realleges paragraphs  
11 46, 51–58 and 77–79.

12 **SIXTH CAUSE FOR DISCIPLINE**

13 **(Unprofessional Conduct—Violation of Pharmacy Law and Regulations)**

14 **(As to Respondents Roxsan Pharmacy and Shahla Melamed)**

15 81. Respondents Roxsan Pharmacy and Shahla Melamed are subject to discipline under  
16 section 4301, subdivision (o), for violating, or assisting in or abetting the violation of or  
17 conspiring to violate provisions of the Pharmacy Law and state laws and regulations governing  
18 pharmacy, as follows:

19 a. **Section 4342:** Section 4342 empowers the Board to act to prevent the sale of  
20 pharmaceutical preparations and drugs that fail to conform to the standard and tests as to quality  
21 and strength. On June 23, 2011, a Board inspection revealed that Roxsan Pharmacy stored 17  
22 expired ingredients in its active compounding stock, as set forth in the table below. Respondent  
23 Shahla Melamed was the Pharmacist-in-Charge at the time of the acts in question and, under  
24 Code sections 4036.5 and 4113, subdivision (c), she had the responsibility of ensuring that  
25 pharmaceutical preparations and drugs dispensed by the pharmacy conformed to the standard and  
26 tests as to quality and strength. Complainant realleges paragraphs 46 and 62.

27 ///

28 ///

	<b>Drug</b>	<b>Expiration Date</b>	<b>Days Expired at Time of Inspection</b>
1			
2	Sorbitol	5/2/2008	Three years, 52 days
3	Sorbitan Monooleate	10/10/2008	Two years, 256 days
4	Potassium Azelaoyl	11/19/2008	Two years, 216 days
5	Versabase Foam	2/26/2010	One year, 117 days
6	Sardine Flavor	3/1/2010	One year, 114 days
7	Kaolin	4/30/2010	One year, 54 days
8	Rapeseed Oil	6/1/2010	One year, 22 days
9	PCCA <sup>2</sup> Vanpen	10/13/2010	253 days
10	Cocamide DEA	10/14/2010	252 days
11	Dow Corning 1501 Fluid	10/17/2010	249 days
12	Versabase Shampoo	11/6/2010	229 days
13	Gelatin	11/19/2010	216 days
14	Arginine	11/23/2010	212 days
15	PCCA <sup>2</sup> Anhydrous Lipoderm	1/27/2011	147 days
16	Ascorbyl Palmitate	2/11/2011	132 days
17	PCCA <sup>2</sup> Natapres	3/26/2011	89 days
18	Panthenol	4/30/2011	54 days
19			

20       **b. Health and Safety Code section 111400:** Health and Safety Code section 111400  
21 defines as “misbranded” any drug that is dangerous to health when used in the dosage, or with the  
22 frequency or duration prescribed, recommended or suggested in its labeling. From approximately  
23 August 4, 2005 to September 2, 2011, Respondent Roxsan Pharmacy compounded and dispensed  
24 452 misbranded prescriptions containing Domperidone. Domperidone is not approved for any  
25 purpose in the United States and no safe dosage has been established. As the Pharmacist-in-  
26 Charge at the time of the acts in question, Respondent Shahla Melamed was responsible, under

27 \_\_\_\_\_  
28           <sup>2</sup> Professional Compounding Centers of America

1 Code sections 4036.5 and 4113, subdivision (c), for preventing the sale of a drug dangerous to  
2 human health. Complainant realleges paragraphs 47, 63–65.

3 c. **Regulation 1716:** Regulation 1716 prohibits deviation from the requirements of a  
4 prescription except upon the prior consent of the prescriber or in accordance with section 4073 of  
5 the Code. Section 4073 allows a pharmacist to select a generic drug that boasts the same  
6 effectiveness as the brand name drug subject to the prescriber’s order not to substitute. On  
7 February 21, 2011, Respondent Roxsan Pharmacy dispensed a Follistim Pen for injecting  
8 Omnitrope 5mg per 1.5ml and failed to provide appropriate use instructions. The Follistim Pen is  
9 not designed for Omnitrope injectable medication and cannot be substituted for the Omnitrope  
10 Pen 5. Respondent Roxsan Pharmacy deviated from the requirements of the patient’s prescription  
11 without prior prescriber consent and in violation of section 4073. Respondent Shahla Melamed  
12 was the Pharmacist-in-Charge at the time of the conduct in question and had the responsibility,  
13 under Code sections 4036.5 and 4113, subdivision (c), to ensure that the dispensed medication  
14 conformed to the patient’s prescription. Complainant realleges paragraphs 46 and 51–55.

15 d. **Regulation 1751.1, subd. (b):** Regulation 1751.1, subdivision (b), requires  
16 pharmacies to maintain temperature records for all refrigerators and freezers in which sterile  
17 compounded products are stored. An inspection on June 23, 2011 revealed that Respondent  
18 Roxsan Pharmacy did not maintain temperature records for the freezer it used to store sterile  
19 injectable products. As the Pharmacist-in-Charge at the time of the acts in question, Respondent  
20 Shahla Melamed was responsible, under Code sections 4036.5 and 4113, subdivision (c), for  
21 ensuring that adequate temperature readings of the freezer were recorded and maintained for  
22 inspection. Complainant realleges paragraphs 46 and 61.

23 e. **Regulation 1751.7, subd. (c):** Regulation 1751.7, subdivision (c), requires a  
24 compounding pharmacy to perform end product testing for sterility and pyrogens (bacterial  
25 toxins) whenever it compounds sterile injectable drug products from one or more non-sterile  
26 ingredients. The regulation requires the pharmacy to quarantine injectable drug products until  
27 end product testing confirms their sterility and acceptable levels of pyrogens. Respondent  
28 Roxsan Pharmacy prepared sterile injectable drug products from non-sterile sources without

1 subjecting the final product to testing. Specifically, on February 14, 2011, Respondent Roxsan  
 2 Pharmacy prepared mitomycin 0.2% injection solution without testing it. The pharmacy also  
 3 prepared but failed to test alprostadil alcohol injection solution on March 30 and June 2, 2011.  
 4 As the Pharmacist-in-Charge at the time of the acts in question, Respondent Shahla Melamed had  
 5 a duty, under Code sections 4036.5 and 4113, subdivision (c), to ensure that sterile injectable  
 6 products compounded from non-sterile ingredients were quarantined until end product testing  
 7 confirmed their sterility and acceptable levels of pyrogens. Complainant realleges paragraphs 46  
 8 and 61.

9 f. **Regulation 1793.7, subd. (a):** Regulation 1793.7, subdivision (a), requires a  
 10 pharmacist to verify every function performed by a pharmacy technician in connection with the  
 11 dispensing of a prescription, including repackaging from bulk and storage of pharmaceuticals.  
 12 The verification must be documented in writing by the verifying pharmacist on the prescription  
 13 label. Respondents Roxsan Pharmacy and Shahla Melamed failed to verify 14 bubble packs of  
 14 medication that were prepared by a pharmacy technician. As the Pharmacist-in-Charge at the  
 15 time of the acts in question, Respondent Shahla Melamed was responsible, under Code sections  
 16 4036.5 and 4113, subdivision (c), for ensuring that each bubble pack prepared by a pharmacy  
 17 technician was verified by a pharmacist. The prescriptions and dates of preparation for which no  
 18 written verification of technician work appeared on the prescription label are set forth in the table  
 19 below. Complainant realleges paragraphs 46 and 62.

Date	Rx. No.	Drug	No. of Cards Per Rx.
2/1/2011	1238102	Atenolol 25mg	1
3/1/2011	1238102	Atenolol 25mg	1
4/1/2011	1238102	Atenolol 25mg	1
4/7/2011	1284869	Actos 30mg	1
4/11/2011	1285308	Simvastatin 20mg	1

(cont'd...)

	<b>Date</b>	<b>Rx. No.</b>	<b>Drug</b>	<b>No. of Cards Per Rx.</b>
1				
2	4/12/2011	1285427	Metoclopramide 5mg	3
3	4/12/2011	1285430	Omeprazole 20mg	1
4	4/12/2011	1285435	Hydralazine 10mg	2
5	4/19/2011	1285431	Isosorbide 30mg	1
6	4/19/2011	1285437	Aggrenox	1
7	5/1/2011	1238102	Atenolol 25mg	1
8				

9 g. **Regulation 1793.7, subd. (c):** Regulation 1793.7, subdivision (c), requires a  
10 pharmacy technician to wear identification that clearly identifies him as a pharmacy technician.  
11 During an inspection on June 23, 2011, two pharmacy technicians were not wearing identification  
12 clearly identifying them as pharmacy technicians. Respondent Shahla Melamed was the  
13 Pharmacist-in-Charge at the time of the act in question and was responsible, under Code sections  
14 4036.5 and 4113, subdivision (c), for ensuring that pharmacy technicians were wearing proper  
15 identification. Complainant realleges paragraphs 46 and 62.

16 **SEVENTH CAUSE FOR DISCIPLINE**

17 **(Unprofessional Conduct—Violation of Pharmacy Law and Regulations)**

18 **(As to Respondents Roxsan Pharmacy and Farbod Melamed)**

19 82. Respondents Roxsan Pharmacy and Farbod Melamed are subject to discipline under  
20 section 4301, subdivision (o), for violating, or assisting in or abetting the violation of or  
21 conspiring to violate provisions of the Pharmacy Law and state laws and regulations governing  
22 pharmacy, as follows:

23 a. **Regulation 1735.2, subd. (h):** Regulation 1735.2, subdivision (h), states that every  
24 compounded drug product shall be given an expiration date representing the date beyond which,  
25 in the professional judgment of the pharmacist performing or supervising the compounding, it  
26 should not be used. This “beyond use date” of the compounded drug product cannot exceed 180  
27 days from preparation or the shortest expiration date of any component in the compounded drug  
28 product, unless a longer date is supported by stability studies of finished drugs or compounded

1 drug products using the same components and packaging. Respondent Roxsan Pharmacy  
 2 compounded the following drug products and labeled each with an expiration date in excess of  
 3 the expiration date of one of its ingredients. As the Pharmacist-in-Charge at the time of the acts  
 4 in question, Respondent Farbod Melamed had the responsibility, under Code sections 4036.5 and  
 5 4113, subdivision (c), to ensure that each compounded drug product contained a correct beyond  
 6 use date. Complainant realleges paragraphs 48 and 66–69.

Date Compounded	Drug	Ingredient with Expiration Date that is Less Than the Beyond Use Date	Beyond Use Date on Label
2/21/2013	Hydroquinone cream 8%	7/19/2013 Sodium metabisulfite	8/20/2013
2/21/2013	Hydroquinone cream 10%	7/19/2013 Sodium metabisulfite	8/20/2013
1/10/2013	Cream with: Kojic acid (4%) Triamcinolone (4%) Retinoic acid (0.05%)	3/12/2013 Hydroquinone cream 4%	5/10/2013
1/7/2013	Cream with: Kojic acid (2%) Triamcinolone (2%) Tretinoin (0.025%)	4/6/2013 Hydroquinone cream 2%	5/7/2013
5/28/2013	Hydroquinone cream 5% with Salicylic acid 5% solution	7/19/2013 Sodium metabisulfite	11/24/2013
5/17/2013	Hydroquinone cream 2%	7/19/2013 Sodium metabisulfite	11/13/2013
5/20/2013	Hydroquinone cream 5%	7/19/2013 Sodium metabisulfite	11/16/2013

24 b. **Section 4342:** Section 4342 empowers the Board to act to prevent the sale of  
 25 pharmaceutical preparations and drugs that fail to conform to the standard and tests as to quality  
 26 and strength. An inspection on June 4, 2013 revealed that Respondent Roxsan Pharmacy  
 27 compounded seven drug products and labeled them with expiration dates that exceeded the  
 28 expiration dates of their ingredients, as more particularly set forth in paragraph 82 (a), *supra*.

1 Respondent Farbod Melamed was the Pharmacist-in-Charge at the time of the acts in question  
2 and had the responsibility, under Code sections 4036.5 and 4113, subdivision (c), to ensure that  
3 pharmaceutical preparations and drugs dispensed by the pharmacy conformed to the standard and  
4 tests as to quality and strength. Complainant realleges paragraphs 48, 66–69 and 82 (a).

5 **EIGHTH CAUSE FOR DISCIPLINE**

6 **(Unprofessional Conduct—Violation of Pharmacy Law and Regulations)**

7 **(As to All Respondents)**

8 83. Respondents Roxsan Pharmacy, Shahla Melamed and Farbod Melamed are subject to  
9 discipline under section 4301, subdivision (o), for violating, or assisting in or abetting the  
10 violation of or conspiring to violate provisions of the Pharmacy Law and state laws and  
11 regulations governing pharmacy, in particular Code section 4059.5, subdivision (e).

12 84. Business and Professions Code section 4059.5, subdivision (e), prohibits the transfer,  
13 sale or delivery of dangerous drugs and devices to persons outside California unless the transfer,  
14 sale or delivery complies with California law, federal law, and the law of the state into which the  
15 dangerous drug or device is delivered. Respondents Roxsan Pharmacy, Shahla Melamed and  
16 Farbod Melamed violated Code section 4059.5, subdivision (e), by selling dangerous drugs to  
17 patients in Louisiana and Connecticut in contravention of the laws of those states and in violation  
18 of the laws of this State. (Bus. & Prof. Code, § 4059.5, subd. (e); La R.S., §§ 1201, 1221, 1232;  
19 La. Admin. Code, tit. 46, §§ 2301, 2303, 2305, 2307, 2309; Conn. Gen. Stat. Ann., §§ 20-601,  
20 20-605, 20-627, 20-628.)

21 **a. Louisiana Drug Sales**

22 85. From approximately September 28, 2012 to June 6, 2013, Respondent Roxsan  
23 Pharmacy dispensed 22 prescriptions for dangerous drugs and two refills to patients in the state of  
24 Louisiana without proper licensure. Twenty-one of the twenty-two prescriptions contained  
25 ketamine, a Schedule III controlled substance.

26 86. Respondent Roxsan Pharmacy dispensed four of the aforementioned prescriptions  
27 from September 28, 2012 through December 2, 2012, during which time Respondent Shahla  
28 Melamed was the Pharmacist-in-Charge. The remaining 18 prescriptions were dispensed

1 between December 3, 2012 and June 6, 2013, during which time Respondent Farbod Melamed  
2 was the Pharmacist-in-Charge. Under Code sections 4036.5 and 4113, subdivision (c),  
3 Respondents Shahla Melamed and Farbod Melamed had a duty, during the respective times in  
4 which each pharmacist served as the Pharmacist-in-Charge, to ensure that every prescription  
5 dispensed and sold in Louisiana complied with the Pharmacy Law, federal law and the Louisiana  
6 Pharmacy Practice Act. Complainant realleges paragraphs 48 and 66–69.

7 **b. Connecticut Drug Sales**

8 87. From approximately May 21, 2012 to June 14, 2013, Respondent Roxsan Pharmacy  
9 dispensed 230 prescriptions for dangerous drugs to patients in the state of Connecticut without  
10 proper licensure.

11 88. Respondent Roxsan Pharmacy dispensed 128 of the aforementioned prescriptions  
12 between May 21, 2012 and December 2, 2012, during which time Respondent Shahla Melamed  
13 was the Pharmacist-in-Charge. The remaining 102 prescriptions were dispensed between  
14 December 3, 2012 and June 14, 2013, during which time Respondent Farbod Melamed was the  
15 Pharmacist-in-Charge. Under Code sections 4036.5 and 4113, subdivision (c), Respondents  
16 Shahla Melamed and Farbod Melamed had a duty, during the respective times in which each  
17 pharmacist served as the Pharmacist-in-Charge, to ensure that every prescription dispensed and  
18 sold in Connecticut complied with the Pharmacy Law, federal law and the Connecticut Pharmacy  
19 Practice Act. Complainant realleges paragraphs 49 and 70–72.

20 **c. Respondent Shahla Melamed Knew About the Out-of-State Drug Sales**

21 89. When Respondent Farbod Melamed became the Pharmacist-in-Charge, Respondent  
22 Shahla Melamed remained the pharmacy's President, Chief Executive Officer and Secretary. As  
23 a corporate officer, she had knowledge that Roxsan Pharmacy continued to dispense dangerous  
24 drugs to Louisiana and Connecticut residents without being licensed in those states, even after she  
25 ceased being the Pharmacist-in-Charge. Complainant realleges paragraphs 48–49, 66–72 and  
26 83–88.

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1 **NINTH CAUSE FOR DISCIPLINE**

2 **(Unprofessional Conduct—Violation of Pharmacy Law and Regulations)**

3 **(As to Respondents Roxsan Pharmacy and Farbod Melamed)**

4 90. Respondents Roxsan Pharmacy and Farbod Melamed are subject to discipline under  
5 section 4301, subdivision (o), for violating, or assisting in or abetting the violation of or  
6 conspiring to violate provisions of the Pharmacy Law and state laws and regulations governing  
7 pharmacy, in particular Code section 4059.5, subdivision (e).

8 91. Business and Professions Code section 4059.5, subdivision (e), prohibits the transfer,  
9 sale or delivery of dangerous drugs and devices to persons outside of California unless the  
10 transfer, sale or delivery complies with California law, federal law, and the law of the state into  
11 which the dangerous drug or device is delivered. Respondents Roxsan Pharmacy and Farbod  
12 Melamed violated Code section 4059.5, subdivision (e) by dispensing medications to patients in  
13 the state of Arkansas in contravention of California and Arkansas law. (Bus. & Prof. Code, §  
14 4059.5, subd. (e); .)

15 92. From approximately January 7, 2013 to June 11, 2013, Respondent Roxsan Pharmacy  
16 dispensed 16 prescriptions to patients in the state of Arkansas without proper licensure.

17 93. During that time period, Respondent Farbod Melamed was the Pharmacist-in-Charge  
18 and had a duty to ensure that every prescription dispensed and sold in Arkansas complied with the  
19 Pharmacy Law, federal law and Arkansas law. Complainant realleges paragraphs 50, 73–75.

20 **TENTH CAUSE FOR DISCIPLINE**

21 **(Unprofessional Conduct—Violation of State and Federal Statutes Regulating Controlled  
22 Substances and Dangerous Drugs)**

23 **(As to All Respondents)**

24 94. Respondents Roxsan Pharmacy, Shahla Melamed and Farbod Melamed are subject to  
25 discipline under section 4301, subdivision (j), for violating statutes of this State and other states  
26 regulating controlled substances and dangerous drugs. Complainant realleges paragraphs 46–93.

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1 **ELEVENTH CAUSE FOR DISCIPLINE**

2 **(Unprofessional Conduct—Conduct Which Would Warrant Denial of an Application)**

3 **(As to All Respondents)**

4 95. Respondents Roxsan Pharmacy, Shahla Melamed and Farbod Melamed are subject to  
5 discipline under section 4301, subdivision (p), for engaging in conduct that would have warranted  
6 denial of a license. Complainant realleges paragraphs 46–94.

7 **DISCIPLINARY CONSIDERATIONS**

8 Complainant alleges as a disciplinary consideration the following prior violations:

9

Section Violated	Offense	Cited Person/Entity, Citation No. and Date of Issuance
Code Fed. Regs., tit. 21, § 1304.04 (f)	Failure to maintain separate inventories and records of controlled substances	<u>Roxsan Pharmacy</u> CI 2007 35352 (6/5/08)  <u>PIC Shahla Melamed</u> CI 2007 36251 (6/5/08)
Code Fed. Regs., tit. 21, § 1304.11 (c)	Failure to maintain complete inventory of controlled substances	<u>Roxsan Pharmacy</u> CI 2001 22642 (3/3/03) CI 2004 27776 (10/26/04)  <u>PIC Shahla Melamed</u> CI 2001 22642 (3/3/03) CI 2004 27776 (10/26/04)
Code, § 4052 (a)	Scope of practice	<u>Roxsan Pharmacy</u> CI 2002 24424 (9/8/03)
Code, § 4059	Furnishing dangerous drug or device other than upon the prescription of a person authorized to prescribe dangerous drugs and devices	<u>Roxsan Pharmacy</u> CI 2002 24424 (9/8/03)  <u>PIC Shahla Melamed</u> CI 2002 24424 (9/8/03)

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Section Violated	Offense	Cited Person/Entity, Citation No. and Date of Issuance
Code, § 4076	Failure to dispense prescription in a container that meets the requirements of state and federal law and is correctly labeled	<u>Roxsan Pharmacy</u> CI 2001 22642 (3/3/03)  <u>PIC Shahla Melamed</u> CI 2001 22642 (3/3/03)
Code, § 4076 (a) Code, § 4076 (a)(11)(A)	Mislabeling of physical description of the dispensed medication	<u>Roxsan Pharmacy</u> CI 2007 35352 (6/5/08) CI 2007 36248 (10/1/09) CI 2009 41104 (6/4/10)  <u>PIC Shahla Melamed</u> CI 2007 36251 (6/5/08) CI 2009 41471 (10/1/09) CI 2009 44011 (6/24/10)
Code, § 4077 (d)	Failure of pharmacist to affix warning label on products containing dimethyl sulfoxide	<u>Roxsan Pharmacy</u> CI 2007 36248 (10/1/09)  <u>PIC Shahla Melamed</u> CI 2009 41471 (10/1/09)
Code, § 4081 (a)	Failure of pharmacy to maintain a current inventory of dangerous drugs and to have that inventory available for inspection	<u>Roxsan Pharmacy</u> CI 2004 27776 (10/26/04) CI 2007 35352 (6/5/08)  <u>PIC Shahla Melamed</u> CI 2004 27776 (10/26/04) CI 2007 36251 (6/5/08)

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Section Violated	Offense	Cited Person/Entity, Citation No. and Date of Issuance
Code, § 4104 (a)	Failure to have in place procedures for taking action to protect the public when a licensed individual employed by or with the pharmacy is discovered or known to be chemically, mentally or physically impaired to the extent it affects his ability to practice the profession or is discovered to have engaged in the theft, diversion or self-use of dangerous drugs	<u>Roxsan Pharmacy</u> CI 2007 35352 (6/5/08)  <u>PIC Shahla Melamed</u> CI 2007 36251 (6/5/08)
Code, § 4115 (g)	Failure of pharmacist to supervise pharmacy technician in reviewing work completed during pharmacist's temporary absence	<u>Roxsan Pharmacy</u> CI 2001 22642 (3/3/03)  <u>PIC Shahla Melamed</u> CI 2007 36251 (6/5/08)
Code, § 4125 (a) Regulation 1711 (e)	Failure of pharmacy to complete and maintain quality assurance review following medication error	<u>Roxsan Pharmacy</u> CI 2002 24424 (9/8/03) CI 2009 41104 (6/4/10)  <u>PIC Shahla Melamed</u> CI 2002 24424 (9/8/03) CI 2009 44011 (6/24/10)

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Section Violated	Offense	Cited Person/Entity, Citation No. and Date of Issuance
Code, § 4342 Regulation 1716.2 (a)(3)	Failure to ensure pharmaceutical preparations and drugs dispensed by the pharmacy conform to the standard and tests as to quality and strength	<u>Roxsan Pharmacy</u> CI 2001 22642 (3/3/03) CI 2002 24424 (9/8/03) CI 2004 27776 (10/26/04) CI 2007 35352 (6/5/08) CI 2007 36248 (10/1/09) CI 2009 41104 (6/24/10)  <u>PIC Shahla Melamed</u> CI 2001 22642 (3/3/03) CI 2002 24424 (9/8/03) CI 2004 27775 (10/26/04) CI 2007 36251 (6/5/08) CI 2009 41471 (10/1/09) CI 2009 44011 (6/24/10)
Regulation 1707.3	Failure of pharmacist to review patient's drug therapy and medication record before dispensing prescription	<u>Roxsan Pharmacy</u> CI 2009 41104 (6/4/10)  <u>PIC Shahla Melamed</u> CI 2009 44011 (6/24/10)
Regulation 1714 (c)	Failure to maintain pharmacy and fixtures and equipment in clean and orderly condition	<u>Roxsan Pharmacy</u> CI 2001 22642 (3/3/03)  <u>PIC Shahla Melamed</u> CI 2001 22642 (3/3/03)
Regulation 1715 (a)	Failure of pharmacy to maintain current pharmacy self-assessment form	<u>Roxsan Pharmacy</u> CI 2007 35352 (6/5/08)  <u>PIC Shahla Melamed</u> CI 2007 36251 (6/5/08)

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<b>Section Violated</b>	<b>Offense</b>	<b>Cited Person/Entity, Citation No. and Date of Issuance</b>
Regulation 1716.2 (a)(4)	Failure of pharmacy to maintain records that include the signature or initials of the pharmacists performing the compounding	<u>Roxsan Pharmacy</u> CI 2004 27776 (10/26/04) CI 2007 35352 (6/5/08) CI 2009 41104 (6/24/10)  <u>PIC Shahla Melamed</u> CI 2004 27776 (10/26/04) CI 2007 36251 (6/5/08) CI 2009 44011 (6/24/10) (cont'd...)
Regulation 1718	Failure to maintain complete inventory of all dangerous drugs	<u>Roxsan Pharmacy</u> CI 2001 22642 (3/3/03)  <u>PIC Shahla Melamed</u> CI 2007 36251 (6/5/08)
Regulation 1761 (a) Regulation 1716	Variation from prescription	<u>Roxsan Pharmacy</u> CI 2004 27776 (10/26/04) CI 2007 35352 (6/5/08) CI 2009 41104 (6/4/10)  <u>PIC Shahla Melamed</u> CI 2004 27776 (10/26/04) CI 2007 36251 (6/5/08) CI 2009 44011 (6/24/10)
Regulation 1793.7	Failure to have policies and procedures and a job description for pharmacy technicians in place in the pharmacy.	<u>Roxsan Pharmacy</u> CI 2004 27776 (10/26/04)  <u>PIC Shahla Melamed</u> CI 2004 27776 (10/26/04)

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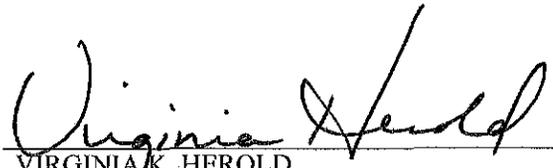
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**PRAYER**

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Board of Pharmacy issue a decision:

1. Revoking or suspending Pharmacy Permit Number PHY 38297, issued to Roxsan Pharmacy, Inc. with Shahla Keyvanfar Melamed as its CEO and President;
2. Revoking or suspending Pharmacist License Number RPH 42096, issued to Shahla Keyvanfar Melamed;
3. Revoking or suspending Pharmacist License Number RPH 68252, issued to Farbod Melamed;
4. Prohibiting Shahla Keyvanfar Melamed from serving as a manager, administrator, owner, member, officer, director, associate, or partner of a licensee during the period in which discipline is imposed on Pharmacy Permit Number PHY 38297, issued to Roxsan Pharmacy, Inc. with Shahla Keyvanfar Melamed as its CEO and President.
5. Ordering Roxsan Pharmacy, Inc., Shahla Keyvanfar Melamed and Farbod Melamed to pay the reasonable costs of the investigation and enforcement of this case pursuant to Business and Professions Code section 125.3; and
6. Taking such other and further action as deemed necessary and proper.

DATED: 6/20/14



VIRGINIA K. HEROLD  
Executive Officer  
Board of Pharmacy  
State of California  
*Complainant*

LA2012507538

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6 (213) 897-7446

7 *Attorneys for Complainant*

8 **BEFORE THE**  
9 **BOARD OF PHARMACY**  
10 **DEPARTMENT OF CONSUMER AFFAIRS**  
11 **STATE OF CALIFORNIA**

11 In the Matter of the Accusation Against:

Case No. 4276

12 **ROXSAN PHARMACY, INC.; FARBOD**  
13 **MELAMED, Pharmacist-in-Charge,**  
14 **SHAHLA KEYVANFAR MELAMED,**  
15 **CEO, President, Secretary**  
16 465 N. Roxbury Dr.  
17 Beverly Hills, CA 90210

**A C C U S A T I O N**

[Gov. Code, § 11503.]

18 **Pharmacy Permit No. PHY 38297,**

19 **SHAHLA KEYVANFAR MELAMED**  
20 465 N. Roxbury Dr.  
21 Beverly Hills, CA 90210)

22 **Pharmacist License No. RPH 42096,**

23 And

24 **FARBOD MELAMED**  
25 411 North Palm Dr. #11  
26 Beverly Hills, CA 90210

27 **Pharmacist License No. RPH 68252**

28 Respondents.

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1 Complainant alleges:

2 **PARTIES**

3 1. Complainant Virginia K. Herold brings this Accusation solely in her official capacity  
4 as the Executive Officer of the Board of Pharmacy.

5 2. On November 3, 1992, the Board issued Pharmacy Permit Number PHY 38297 to  
6 Shahla Keyvanfar Melamed to do business as Rox San Pharmacy. On September 30, 2003, the  
7 license holder's name was changed to Roxsan Pharmacy, Inc. The Pharmacy Permit was in full  
8 force and effect at all times relevant to the charges brought herein and will expire on  
9 November 1, 2014 unless it is renewed.

10 3. On August 19, 1988, the Board issued Pharmacist License Number RPH 42096 to  
11 Shahla Keyvanfar Melamed. Said license was in full force and effect at all times relevant to the  
12 charges brought herein and will expire on July 31, 2014 unless it is renewed. Shahla Keyvanfar  
13 Melamed was the Pharmacist-in-Charge of Roxsan Pharmacy, formerly known as Rox San  
14 Pharmacy, from November 3, 1992 to December 3, 2012. Respondent Melamed is and has been  
15 the President, Secretary and Chief Executive Officer of Roxsan Pharmacy since August 5, 2003.

16 4. On October 5, 2012, the Board issued Pharmacist License Number RPH 68252 to  
17 Farbod Melamed. Said license was in full force and effect at all times relevant to the charges  
18 brought herein and will expire on December 31, 2015 unless it is renewed. Respondent Farbod  
19 Melamed has been the Pharmacist-in-Charge of Roxsan Pharmacy since December 3, 2012.

20 **JURISDICTION**

21 5. This Accusation is brought before the Board under the authority of the following  
22 laws. All section references are to the Business and Professions Code (Code) and all regulatory  
23 references (Regulation) are to title 16 of the California Code of Regulations unless otherwise  
24 indicated.

25 6. Section 4300 states, in relevant part, that the Board has the authority to suspend or  
26 revoke any license issued pursuant to the Pharmacy Law, and that the proceedings to suspend or  
27 revoke a license must be conducted in accordance with the Administrative Procedure Act (Gov.  
28 Code, §§ 11500, *et seq.*).



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13. Section 4301 relevantly states:

The board shall take action against any holder of a license who is guilty of unprofessional conduct or whose license has been procured by fraud or misrepresentation or issued by mistake. Unprofessional conduct shall include, but is not limited to, any of the following:

...

(f) The commission of any act involving moral turpitude, dishonesty, fraud, deceit, or corruption, whether the act is committed in the course of relations as a licensee or otherwise, and whether the act is a felony or misdemeanor or not.

(g) Knowingly making or signing any certificate or other document that falsely represents the existence or nonexistence of a state of facts.

...

(j) The violation of any of the statutes of this state, of any other state, or of the United States regulating controlled substances and dangerous drugs.

...

(o) Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of or conspiring to violate any provision or term of this chapter or of the applicable federal and state laws and regulations governing pharmacy, including regulations established by the board or by any other state or federal regulatory agency.

(p) Actions or conduct that would have warranted denial of a license.

(q) Engaging in any conduct that subverts or attempts to subvert an investigation of the board...

14. Section 4302 states:

The board may deny, suspend, or revoke any license of a corporation where conditions exist in relation to any person holding 10 percent or more of the corporate stock of the corporation, or where conditions exist in relation to any officer or director of the corporation that would constitute grounds for disciplinary action against a licensee.

15. Section 4306 states:

It shall constitute unprofessional conduct and a violation of this chapter for any person licensed under this chapter to violate, attempt to violate, directly or indirectly, or assist in or abet the violation of, or conspire to violate, any provision or term of this article, the Moscone-Knox Professional Corporation Act, or any regulations duly adopted under those laws.

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1 (c) The provisions of subdivision (a) may be alleged in any pleading filed  
2 pursuant to Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of  
3 the Government Code. However, no order may be issued in that case except as to a  
4 person who is named in the caption, as to whom the pleading alleges the  
5 applicability of this section, and where the person has been given notice of the  
6 proceeding as required by Chapter 5 (commencing with Section 11500) of Part 1 of  
7 Division 3 of the Government Code. The authority to proceed as provided by this  
8 subdivision shall be in addition to the board's authority to proceed under Section  
9 4339 or any other provision of law.

10 18. Section 4324 relevantly states:

11 (a) Every person who...falsely makes, alters, forges, utters, publishes, passes,  
12 or attempts to pass, as genuine, any prescription for any drugs is guilty of forgery  
13 and upon conviction thereof shall be punished by imprisonment pursuant to  
14 subdivision (h) of Section 1170 of the Penal Code, or by imprisonment in a county  
15 jail for not more than one year...

16 19. Section 4342 relevantly states:

17 (a) The board may institute any action or actions as may be provided by law  
18 and that, in its discretion, are necessary, to prevent the sale of pharmaceutical  
19 preparations and drugs that do not conform to the standard and tests as to quality  
20 and strength, provided in the latest edition of the United States Pharmacopoeia or  
21 the National Formulary, or that violate any provision of the Sherman Food, Drug  
22 and Cosmetic Law (Part 5 (commencing with Section 109875) of Division 104 of  
23 the Health and Safety Code).

24 20. Section 111400 of the Sherman Food, Drug, and Cosmetic Law (Health & Saf. Code,  
25 §§ 109875, *et seq.*) defines a misbranded drug or device as one that “is dangerous to health when  
26 used in the dosage, or with the frequency or duration prescribed, recommended, or suggested in  
27 its labeling.”

### 28 **REGULATORY PROVISIONS**

21. California Code of Regulations, title 16, section 1716, states:

Pharmacists shall not deviate from the requirements of a prescription except  
upon the prior consent of the prescriber or to select the drug product in accordance  
with Section 4073 of the Business and Professions Code.

Nothing in this regulation is intended to prohibit a pharmacist from  
exercising commonly-accepted pharmaceutical practice in the compounding or  
dispensing of a prescription.

///

1 22. California Code of Regulations, title 16, section 1735, states:

2 (a) ‘Compounding’ means any of the following activities occurring in a  
3 licensed pharmacy, by or under the supervision of a licensed pharmacist, pursuant  
4 to a prescription:

4 (1) Altering the dosage form or delivery system of a drug

5 (2) Altering the strength of a drug

6 (3) Combining components or active ingredients

7 (4) Preparing a drug product from chemicals or bulk drug substances

8 (b) ‘Compounding’ does not include reconstitution of a drug pursuant to a  
9 manufacturer's direction(s) for oral, rectal topical, or injectable administration, nor  
10 does it include tablet splitting or the addition of flavoring agent(s) to enhance  
11 palatability.

11 (c) ‘Compounding’ does not include, except in small quantities under limited  
12 circumstances as justified by a specific, documented, medical need, preparation of  
13 a compounded drug product that is commercially available in the marketplace or  
14 that is essentially a copy of a drug product that is commercially available in the  
15 marketplace.

14 (d) The parameters and requirements stated by this Article 4.5 (Section 1735  
15 et seq.) apply to all compounding practices. Additional parameters and  
16 requirements applicable solely to sterile injectable compounding are stated by  
17 Article 7 (Section 1751 et seq.).

17 23. California Code of Regulations, title 16, section 1735.2, relevantly states:

18 (h) Every compounded drug product shall be given an expiration date  
19 representing the date beyond which, in the professional judgment of the pharmacist  
20 performing or supervising the compounding, it should not be used. This “beyond  
21 use date” of the compounded drug product shall not exceed 180 days from  
22 preparation or the shortest expiration date of any component in the compounded  
23 drug product, unless a longer date is supported by stability studies of finished  
24 drugs or compounded drug products using the same components and packaging.

22 Shorter dating than set forth in this subsection may be used if it is deemed  
23 appropriate in the professional judgment of the responsible pharmacist.

24 (i) The pharmacist performing or supervising compounding is responsible for  
25 the proper preparation, labeling, storage, and delivery of the compounded drug  
26 product...

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1 24. California Code of Regulations, title 16, section 1751, relevantly states:

2 (a) Any pharmacy engaged in compounding sterile injectable drug products  
3 shall conform to the parameters and requirements stated by Article 4.5 (Section  
4 1735 et seq.), applicable to all compounding, and shall also conform to the  
5 parameters and requirements stated by this Article 7 (Section 1751 et seq.),  
6 applicable solely to sterile injectable compounding.

7 ...

8 (c) Any pharmacy compounding a sterile injectable product from one or more non-  
9 sterile ingredients shall comply with Business and Professions Code section  
10 4127.7.

11 25. California Code of Regulations, title 16, section 1751.1, states:

12 (a) Pharmacies compounding sterile injectable products for future use  
13 pursuant to section 1735.2 shall, in addition to those records required by section  
14 1735.3, make and keep records indicating the name, lot number, amount, and date  
15 on which the products were provided to a prescriber.

16 (b) In addition to the records required by section 1735.3 and subdivision (a),  
17 for sterile products compounded from one or more non-sterile ingredients, the  
18 following records must be made and kept by the pharmacy:

19 ...

20 (2) Refrigerator and freezer temperatures.

21 ...

22 (c) Pharmacies shall maintain and retain all records required by this article in  
23 the pharmacy in a readily retrievable form for at least three years from the date  
24 the record was created.

25 26. California Code of Regulations, title 16, section 1751.7, states:

26 (a) Any pharmacy engaged in compounding sterile injectable drug products  
27 shall maintain, as part of its written policies and procedures, a written quality  
28 assurance plan including, in addition to the elements required by section 1735.8, a  
documented, ongoing quality assurance program that monitors personnel  
performance, equipment, and facilities. The end product shall be examined on a  
periodic sampling basis as determined by the pharmacist-in-charge to assure that it  
meets required specifications. The Quality Assurance Program shall include at  
least the following:

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(2) The storage of compounded sterile injectable products in the pharmacy and periodic documentation of refrigerator temperature.

...

(c) Batch-produced sterile injectable drug products compounded from one or more non-sterile ingredients shall be subject to documented end product testing for sterility and pyrogens and shall be quarantined until the end product testing confirms sterility and acceptable levels of pyrogens.

27. California Code of Regulations, title 16, section 1770, states:

For the purpose of denial, suspension, or revocation of a personal or facility license pursuant to Division 1.5 (commencing with Section 475) of the Business and Professions Code, a crime or act shall be considered substantially related to the qualifications, functions or duties of a licensee or registrant if to a substantial degree it evidences present or potential unfitness of a licensee or registrant to perform the functions authorized by his license or registration in a manner consistent with the public health, safety, or welfare.

28. California Code of Regulations, title 16, section 1793.7, relevantly states:

(a) Except as otherwise provided in section 1793.8, any function performed by a pharmacy technician in connection with the dispensing of a prescription, including repackaging from bulk and storage of pharmaceuticals, must be verified and documented in writing by a pharmacist. Except for the preparation of prescriptions for an inpatient of a hospital and for an inmate of a correctional facility, the pharmacist shall indicate verification of the prescription by initialing the prescription label before the medication is provided to the patient.

...

(c) A pharmacy technician must wear identification clearly identifying him or her as a pharmacy technician...

**LOUISIANA PHARMACY LAW**

29. Section 1201 of the Louisiana Pharmacy Practice Act states:

A. Except as otherwise provided in this Chapter, it shall be unlawful for any individual to engage in the practice of pharmacy unless currently licensed or registered to practice under the provisions of this Chapter.

B. Licensed practitioners authorized under the laws of this state to compound drugs and to dispense drugs to their patients in the practice of their respective professions shall meet the same standards, record keeping requirements, and all other requirements for the dispensing of drugs applicable to pharmacists.

C. It shall be unlawful for any individual to assist in the practice of pharmacy unless currently registered or certified by the board.

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30. Section 1221 of the Louisiana Pharmacy Practice Act states:

A. No person shall open, establish, operate, or maintain a pharmacy located within this state unless the pharmacy is issued a permit by the board.

B. No out-of-state pharmacy providing pharmacy services to residents of this state shall open, establish, operate, or maintain a pharmacy located out-of-state unless the pharmacy is issued a permit by the board.

C. No permit to operate a pharmacy shall be granted or renewed unless evidence satisfactory to the board ensures that a pharmacist in the state where the permit is issued and pharmacy is located will be on duty during normal hours as administratively defined.

31. Section 1232 of the Louisiana Pharmacy Practice Act states:

A. A pharmacy located outside this state which does business in this state within the meaning of this Chapter shall hold a current pharmacy permit as provided in this Chapter. The pharmacy shall be designated a “nonresident pharmacy” and the permit shall be designated a “nonresident pharmacy permit”.

B. A nonresident pharmacy granted a nonresident pharmacy permit by the board shall disclose to the board the location, names, and titles of all principal corporate officers, as well as the owner's managing officer and pharmacist-in-charge. A report containing this information shall be made to the board on an annual basis and within thirty business days after any change of office, corporate officer, or within ten business days of the departure of the prior owner's managing officer or pharmacist-in-charge.

C. The nonresident pharmacy shall maintain at all times authorization to conduct the pharmacy in compliance with the laws of the state in which it is a resident. As a prerequisite to seeking a permit from the board, the nonresident pharmacy shall submit a copy of the most recent inspection report resulting from an inspection conducted by the regulatory or licensing agency of the state in which it is located, as well as any other state pharmacy licensing agency or any agent thereof, and any inspection reports produced by the federal Food and Drug Administration or the federal Drug Enforcement Administration. Thereafter, the nonresident pharmacy granted a permit shall submit to the board a copy of any subsequent inspection report on the pharmacy conducted by the regulatory or licensing body of the state in which it is located, or by any other state pharmacy licensing agency, or any agent thereof, or by the federal Food and Drug Administration or the federal Drug Enforcement Administration. In addition to or in lieu of an inspection by the regulatory or licensing body of the state in which it is a resident, or any agent thereof, the nonresident pharmacy shall be subject to an inspection by the board. When the board conducts an inspection of a nonresident pharmacy, the board shall recover its expenses from the nonresident pharmacy in addition to the applicable permit fee authorized by this Chapter.

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1 D. A nonresident pharmacy granted a nonresident pharmacy permit by the  
2 board shall maintain records of any controlled substances or dangerous drugs or  
3 devices dispensed to patients in this state so that the records are readily retrievable  
4 from the records of other drugs dispensed.

5 E. Records for all prescriptions and products delivered into the state shall  
6 be readily retrievable from the other prescription records of the nonresident  
7 pharmacy and shall be in compliance with all federal laws and with regulations as  
8 may be required by this state.

9 32. Louisiana Administrative Code, title 46, section 2301, entitled "Purpose," states:

10 A. Out-of-State Pharmacies shall comply with the provisions of this  
11 Chapter in order to be and remain permitted to operate in Louisiana as an out-of-  
12 state pharmacy.

13 B. This Chapter applies to any place physically located outside the  
14 state of Louisiana that provides services in the state of Louisiana where  
15 prescription drugs are dispensed and/or pharmacy care is provided to residents of  
16 the state of Louisiana. This includes, but is not limited to, pharmacies providing  
17 goods and services via U.S. mail carrier, commercial carrier, the Internet, and/or  
18 directly to Louisiana residents.

19 33. Louisiana Administrative Code, title 46, section 2303, entitled "Out-of-State  
20 Pharmacy Requirements," states:

21 A. The out-of-state pharmacy shall hold a current pharmacy permit in  
22 good standing in the state(s) in which it is located and/or practicing pharmacy.

23 B. Each pharmacist dispensing drugs into Louisiana shall be licensed  
24 as a pharmacist in good standing in the state(s) where he practices.

25 C. Every out-of-state pharmacy doing business in Louisiana by  
26 dispensing and delivering prescription drugs and devices to Louisiana residents  
27 shall designate a resident agent and a registered office in Louisiana for the service  
28 of process.

34. Louisiana Administrative Code, title 46, section 2305, entitled "Out-of-State  
Pharmacy Permit Requirements," states:

A. The out-of-state pharmacy shall apply for a permit and annual  
permit renewals on forms provided by the board. The board may require such  
information as reasonably necessary to carry out the provisions of R.S. 37:1232,  
including, without limitation, the name, address, and position of each officer and  
director of a corporation or of the owners, if the pharmacy is not a corporation.

B. The out-of-state pharmacy shall pay an annual permit fee as  
defined in R.S. 37:1184.

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1 **STATEMENT OF FACTS**

2 41. This Accusation alleges causes for discipline stemming from three consumer  
3 complaints. The Board received the first complaint on June 9, 2011. In substance, the  
4 complainant alleged that on February 21, 2011, Roxsan Pharmacy substituted an inappropriate  
5 device for injecting a drug marketed under the name “Omnitrope.” Omnitrope is indicated for  
6 growth hormone deficiency and has an off-label use of improving female fertility. The Board  
7 investigated the complaint and conducted an inspection of Roxsan Pharmacy on June 23, 2011.  
8 The pertinent findings are alleged in Section A, below.

9 42. The second consumer complaint came to the Board on July 27, 2011. The  
10 complainant alleged that Roxsan Pharmacy dispensed Domperidone to nursing mothers to  
11 enhance breast milk production. Domperidone is approved in some countries for gastrointestinal  
12 disorders. The United States Food and Drug Administration, the federal agency responsible for  
13 reviewing new drug applications, has not approved Domperidone for any purpose in this country  
14 and has banned the drug’s importation and interstate transfer except for research purposes. The  
15 Board inspected Roxsan Pharmacy on September 15, 2011. The pertinent findings of the  
16 inspection are alleged in Section B, below.

17 43. The Board received the last consumer complaint that is the subject of this  
18 Accusation on February 21, 2013. The complainant alleged that Roxsan Pharmacy sold  
19 dangerous drugs and controlled substances to Louisiana residents without being licensed, as  
20 Louisiana law requires. The Board inspected Roxsan Pharmacy on June 4, 2013. The relevant  
21 findings of the inspection are alleged in Section C, below.

22 **A. Omnitrope Complaint and Pharmacy Inspection on June 23, 2011**

23 44. On December 9, 2010, a San Francisco-based fertility doctor prescribed Omnitrope  
24 (somatropin) 5mg per 1.5ml to one of her patients. Omnitrope is a recombinant human growth  
25 hormone indicated for the treatment of adult onset or childhood onset growth hormone  
26 deficiency. It is dispensed in cartridges holding doses of 5mg per 1.5ml or 10mg per 1.5ml. The  
27 cartridges are designed by the manufacturer, Sandoz, to be used with its own dispensing pens,  
28 Pen 5 and Pen 10. Each pen is specific to the prescribed dose—Pen 5 for 5mg prescriptions and

1 Pen 10 for 10mg prescriptions. Sandoz supplies the pens to patients free of charge upon the  
2 prescriber's request. In Omnitrope's published drug information, Sandoz warns against using  
3 non-proprietary devices to dispense the medication, stating that Omnitrope cartridges "must be  
4 used with the corresponding OMNITROPE® Pen 5 and Pen 10 delivery system, respectively."

5 45. The Follistim Pen is a dispensing device made by Merck. It is designed to inject  
6 precise doses of Merck's Follistim AQ (follitropin beta) drug. Follistim AQ is a gonadotropin  
7 that stimulates reproductive processes in women. Follistim AQ is indicated for the induction of  
8 ovulation and pregnancy and development of multiple follicles for patients in assisted  
9 reproductive programs. Merck sells the drug in cartridges dosed in international units (IU).  
10 Follistim AQ is available in strengths of 175 IU per 0.210ml, 350 IU per 0.420ml, 650 IU per  
11 0.780ml, and 975 IU per 1.170ml. Merck's patient information guide advises patients not to "mix  
12 any other medicines into the cartridge" and directs patients to "[u]se [the] "Follistim AQ  
13 Cartridge only with the Follistim Pen."

14 46. On February 21, 2011, Roxsan Pharmacy received a faxed prescription for  
15 Omnitrope. Pharmacist J.A. (not a party to this action) dispensed the Omnitrope cartridge (5mg  
16 per 1.5ml) that day and substituted a Follistim Pen for the Omnitrope Pen 5. Roxsan Pharmacy  
17 and the dispensing pharmacist did not instruct the patient on how to convert milliliters  
18 (Omnitrope Pen) into international units (Follistim Pen) or otherwise provide adequate use  
19 instructions.

20 47. The patient was unable to use the Follistim pen dispensed by Roxsan Pharmacy and  
21 obtained the Omnitrope Pen 5 from her fertility clinic. Roxsan Pharmacy never replaced the  
22 Follistim pen with a suitable dispensing device.

23 48. On June 9, 2011, the patient's partner filed a complaint with the Board over the  
24 substitution of the Follistim pen. On June 23, 2011, a Board inspector conducted a complaint  
25 inspection of Roxsan Pharmacy at its Beverly Hills location. The inspector documented the  
26 following relevant facts:

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1                   **1. A Pharmacist Falsified a Prescription Record**

2           49. As part of the inspection into the Omnitrope consumer complaint, the inspector asked  
3 for all pharmacy records related to the dispensing of the patient’s Omnitrope prescription. The  
4 dispensing pharmacist produced records that showed the prescription was written on December 9,  
5 2010 for “Omnitrope Pen 5 (5mg/1.5ml)” in a quantity of five with one authorized refill. The  
6 prescription was typed and contained instructions to “dispense as written.” The words “Foll Pen  
7 #1 per MD” appeared, handwritten, on the right side of the prescription. The dispensing  
8 pharmacist told the inspector that the physician verbally authorized the substitution.

9           50. The inspector noticed that the handwritten portion of the order, which purported to  
10 reflect the physician’s order for the substitution, was wet. To test her belief, she ran her finger  
11 across the ink. The order smeared. The dispensing pharmacist admitted that she wrote the order  
12 for the substitution during the inspection.

13           51. By letter dated July 6, 2011, the prescribing doctor denied having authorized the  
14 Follistim Pen’s substitution.

15                   **2. Pharmacist-in-Charge Shahla Melamed Falsified the DEA Biennial**  
16                   **Controlled Substance Inventory**

17           52. Later in the inspection, the Board inspector requested the pharmacy’s federal Drug  
18 Enforcement Administration biennial controlled substance inventory. The pharmacist produced a  
19 spiral notebook containing handwritten controlled substance counts. The dates of the inventories  
20 were June 7, 2007, May 6, 2009 and June 1, 2011. For the biennial periods ending in 2007 and  
21 2009, the inventories included Schedule II through V controlled substances. For the period  
22 ending in 2011, the inventory recorded only Schedule II controlled substances; missing were drug  
23 counts for Schedule III through V controlled substances.

24           53. At some point during the inspection, Respondent Shahla Melamed, the Pharmacist-in-  
25 Charge, arrived at the pharmacy. The Board inspector asked her for the pharmacy’s self  
26 assessment and DEA inventory. Respondent Shahla Melamed produced the same spiral notebook  
27 as before. The inspector noticed that within the 2009 inventory, the header had been changed to  
28 include the date of June 1, 2011 for Scheduled drugs not listed in the 2011 inventory. The Board

1 inspector asked Respondent Shahla Melamed if she added the 2011 date to the 2009 inventory.  
2 After first denying the charge, Respondent Shahla Melamed admitted adding “6/1/11” to the 2009  
3 controlled substance inventory. The modification gave the appearance that Roxsan Pharmacy  
4 maintained a count of Schedule III through V controlled substances for the biennial reporting  
5 period ending in 2011.

6 **3. Roxsan Pharmacy Did Not Perform End Product Sterility and Pyrogen**  
7 **Testing on Sterile Injectable Products or Keep Temperature Records**

8 54. While evaluating the pharmacy’s sterile compounding practice, the Board inspector  
9 discovered that Roxsan Pharmacy compounded injectable alprostadil alcohol solution on March  
10 30, 2011 and June 2, 2011, and also prepared mitomycin injectable solution on February 14,  
11 2011. Roxsan Pharmacy did not conduct end product sterility and pyrogen testing on either  
12 solution to ensure safe use. Nor did the pharmacy maintain temperature records for the freezer  
13 used to store these and other sterile injectable solutions.

14 **4. Roxsan Pharmacy Did Not Verify All Pharmacy Technician Work, Did Not**  
15 **Ensure that Each Pharmacy Technician Was Wearing Identification, and**  
16 **Maintained 17 Expired Ingredients in Active Compounding Stock**

17 55. In addition to having deficient practices concerning sterile injectable products,  
18 Roxsan Pharmacy comingled 17 expired compounding ingredients with active compounding  
19 stock and permitted two of its pharmacy technicians to be present in the compounding area  
20 without wearing identification badges. The Board inspector found fourteen medication bubble  
21 cards prepared by pharmacy technicians that did not contain a pharmacist’s initials indicating that  
22 a pharmacist had verified the technician’s work.

23 **B. Domperidone Complaint and Inspection on September 15, 2011**

24 56. On July 28, 2011, the Board received a complaint alleging that Roxsan Pharmacy  
25 dispensed Domperidone. Domperidone is a galactagogue, meaning it increases breast milk  
26 production in lactating women. The drug is not approved in the United States for any purpose  
27 although it is approved in other countries for the treatment of gastrointestinal disorders. The FDA  
28 bans the importation and interstate transportation of finished products and bulk compounding  
ingredients containing Domperidone except for use in research and development.

1           57. On September 15, 2011, Board inspectors conducted a complaint inspection at  
2 Roxsan Pharmacy. They discovered compounded Domperidone in the pharmacy's inventory.  
3 The pharmacy possessed 100 10mg capsules, 200 20mg capsules, 200 30mg capsules and 100  
4 40mg capsules of the drug. The pharmacy dispensed 452 prescriptions containing Domperidone  
5 in these various strengths between approximately August 4, 2005 and September 2, 2011.

6           58. Under its authority to embargo misbranded drugs, the Board seized the pharmacy's  
7 stock of Domperidone. (Bus. & Prof. Code, § 4084.)

8           **C. Louisiana Complaint and Pharmacy Inspection on June 4, 2013**

9           59. On February 21, 2013, the Louisiana Board of Pharmacy complained to the Board  
10 that Roxsan Pharmacy was soliciting business from Louisiana physicians and selling dangerous  
11 drugs and controlled substances in that state without proper licensure.

12           60. On June 4, 2013, the Board inspected Roxsan Pharmacy. Respondent Farbod  
13 Melamed was the acting Pharmacist-in-Charge. He admitted to the inspector that Roxsan  
14 pharmacy dispensed and shipped dangerous drugs to patients in Louisiana without being licensed  
15 in that state.

16           61. From July 31, 2012 to June 6, 2013, Roxsan Pharmacy dispensed 22 original  
17 prescriptions and two refills to patients residing in Louisiana. All but one of the prescriptions  
18 contained ketamine, a Schedule III controlled substance.

19           62. The inspection further revealed that Roxsan Pharmacy established incorrect beyond-  
20 use dates for eight batch compounded drug products. In each case, the compounded drug  
21 product's expiration date exceeded the expiration date of one of its ingredients. Respondent  
22 Shahla Melamed verified the products in question and Roxsan Pharmacy dispensed prescriptions  
23 from the stale batches.

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1 **FIRST CAUSE FOR DISCIPLINE**

2 **(Unprofessional Conduct—Falsification of Pharmacy Records)**

3 **(As to Respondents Roxsan Pharmacy and Shahla Melamed)**

4 63. Respondents Roxsan Pharmacy and Shahla Melamed are subject to discipline under  
5 section 4301, subdivision (g), for knowingly making or signing a document that falsely represents  
6 the existence or nonexistence of a state of facts. On June 23, 2011, Respondent Shahla Melamed  
7 knowingly falsified a DEA biennial controlled substance inventory during an inspection of the  
8 pharmacy. Complainant realleges paragraphs 41, 44–48 and 52–53.

9 **SECOND CAUSE FOR DISCIPLINE**

10 **(Unprofessional Conduct—Falsification of Pharmacy Records)**

11 **(As to Respondent Roxsan Pharmacy)**

12 64. Respondent Roxsan Pharmacy is subject to discipline under section 4301, subdivision  
13 (g), in that on June 23, 2011, one of its pharmacists knowingly falsified a prescription for  
14 Omnitrope 5mg/1.5ml. Complainant realleges paragraphs 41 and 44–51.

15 **THIRD CAUSE FOR DISCIPLINE**

16 **(Unprofessional Conduct—Subverting a Board Investigation)**

17 **(As to Respondents Roxsan Pharmacy and Shahla Melamed)**

18 65. Respondents Roxsan Pharmacy and Shahla Melamed are subject to discipline under  
19 section 4301, subdivision (q), for attempting to subvert an investigation of the Board on June 23,  
20 2011. Complainant realleges paragraphs 41, 44–53 and 63–64.

21 **FOURTH CAUSE FOR DISCIPLINE**

22 **(Unprofessional Conduct—Dishonesty, Fraud or Deceit)**

23 **(As to Respondents Roxsan Pharmacy and Shahla Melamed)**

24 66. Respondents Roxsan Pharmacy and Shahla Melamed are subject to discipline under  
25 section 4301, subdivision (f), for committing an act on June 23, 2011 involving dishonesty, fraud,  
26 deceit or corruption. Complainant realleges paragraphs 41, 44–53 and 64–65.

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1 **FIFTH CAUSE FOR DISCIPLINE**

2 **(Unprofessional Conduct—Violation of Pharmacy Law and Regulations)**

3 **(As to Respondent Roxsan Pharmacy)**

4 67. Respondent Roxsan Pharmacy is subject to discipline under section 4301, subdivision  
5 (o), for violating, or assisting in or abetting the violation of or conspiring to violate a state law  
6 governing pharmacy. In particular, Respondent Roxsan Pharmacy violated Code section 4324,  
7 which section makes it a crime to falsely make or alter a prescription. On June 23, 2011,  
8 a pharmacist employed by Respondent Roxsan Pharmacy knowingly falsified a pharmacy record  
9 during an inspection of the pharmacy. The pharmacist wrote an unauthorized device substitution  
10 (Follistim Pen) on a prescription for Omnitrope 5mg/1.5ml. Complainant realleges paragraphs  
11 41, 44–51 and 64–65.

12 **SIXTH CAUSE FOR DISCIPLINE**

13 **(Unprofessional Conduct—Violation of Pharmacy Law and Regulations)**

14 **(As to Respondents Roxsan Pharmacy and Shahla Melamed)**

15 68. Respondents Roxsan Pharmacy and Shahla Melamed are subject to discipline under  
16 section 4301, subdivision (o), for violating, or assisting in or abetting the violation of or  
17 conspiring to violate provisions of the Pharmacy Law and state laws and regulations governing  
18 pharmacy, as follows:

19 a. **Section 4342:** Section 4342 empowers the Board to act to prevent the sale of  
20 pharmaceutical preparations and drugs that fail to conform to the standard and tests as to quality  
21 and strength. On June 23, 2011, a Board inspection revealed that Roxsan Pharmacy stored 17  
22 expired ingredients in its active compounding stock, as set forth in the table below. Respondent  
23 Shahla Melamed was the Pharmacist-in-Charge at the time of the acts in question and, under  
24 Code sections 4036.5 and 4113, subdivision (c), had the responsibility of ensuring that  
25 pharmaceutical preparations and drugs dispensed by the pharmacy conformed to the standard and  
26 tests as to quality and strength. Complainant realleges paragraph 55.

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<b>Drug</b>	<b>Expiration Date</b>	<b>Days Expired at Time of Inspection</b>
Sorbitol	5/2/2008	Three years, 52 days
Sorbitan Monooleate	10/10/2008	Two years, 256 days
Potassium Azelaoyl	11/19/2008	Two years, 216 days
Versabase Foam	2/26/2010	One year, 117 days
Sardine Flavor	3/1/2010	One year, 114 days
Kaolin	4/30/2010	One year, 54 days
Rapeseed Oil	6/1/2010	One year, 22 days
Professional Compounding Centers of America (PCCA) Vanpen	10/13/2010	253 days
Cocamide DEA	10/14/2010	252 days
Dow Corning 1501 Fluid	10/17/2010	249 days
Versabase Shampoo	11/6/2010	229 days
Gelatin	11/19/2010	216 days
Arginine	11/23/2010	212 days
PCCA Anhydrous Lipoderm	1/27/2011	147 days
Ascorbyl Palmitate	2/11/2011	132 days
PCCA Natapres	3/26/2011	89 days
Panthenol	4/30/2011	54 days

b. **Health and Safety Code section 111400:** Health and Safety Code section 111400 defines as “misbranded” any drug that is dangerous to health when used in the dosage, or with the frequency or duration prescribed, recommended or suggested in its labeling. From approximately August 4, 2005 to September 2, 2011, Respondent Roxsan Pharmacy compounded and dispensed 452 misbranded prescriptions containing Domperidone to nursing mothers for the purpose of increasing breast milk production. Domperidone is not approved for any purpose in the United States and no safe dosage has been established. As the Pharmacist-in-Charge at the time of the

1 acts in question, Respondent Shahla Melamed was responsible, under Code sections 4036.5 and  
2 4113, subdivision (c), for preventing the sale of a drug dangerous to human health. Complainant  
3 realleges paragraphs 42, 56–58.

4 c. **Regulation 1716:** Regulation 1716 prohibits deviation from the requirements of a  
5 prescription except upon the prior consent of the prescriber or in accordance with section 4073 of  
6 the Code. Section 4073 allows a pharmacist to select a generic drug that boasts the same  
7 effectiveness as the brand name drug subject to the prescriber’s order not to substitute. On  
8 February 21, 2011, Respondent Roxsan Pharmacy dispensed a Follistim Pen for injecting  
9 Omnitrope 5mg per 1.5ml and failed to provide appropriate use instructions. The Follistim Pen is  
10 not designed for Omnitrope injectable medication and cannot be substituted for the Omnitrope  
11 Pen 5. Respondent Roxsan Pharmacy deviated from the requirements of the patient’s prescription  
12 without prior prescriber consent and in violation of section 4073. Respondent Shahla Melamed  
13 was the Pharmacist-in-Charge at the time of the conduct in question and had the responsibility,  
14 under Code sections 4036.5 and 4113, subdivision (c), to ensure that the dispensed medication  
15 conformed to the patient’s prescription. Complainant realleges paragraphs 41, 44–48.

16 d. **Regulation 1751.1, subd. (b):** Regulation 1751.1, subdivision (b), requires  
17 pharmacies to maintain temperature records for all refrigerators and freezers in which sterile  
18 compounded products are stored. An inspection on June 23, 2011 revealed that Respondent  
19 Roxsan Pharmacy did not maintain temperature records for the freezer it used to store sterile  
20 injectable products. As the Pharmacist-in-Charge at the time of the acts in question, Respondent  
21 Shahla Melamed was responsible, under Code sections 4036.5 and 4113, subdivision (c), for  
22 ensuring that adequate temperature readings of the freezer were recorded and maintained for  
23 inspection. Complainant realleges paragraph 54.

24 e. **Regulation 1751.7, subd. (c):** Regulation 1751.7, subdivision (c), requires a  
25 compounding pharmacy to perform end product testing for sterility and pyrogens (bacterial  
26 toxins) whenever it compounds sterile injectable drug products from one or more non-sterile  
27 ingredients. The regulation requires the pharmacy to quarantine injectable drug products until  
28 end product testing confirms their sterility and acceptable levels of pyrogens. Respondent

1 Roxsan Pharmacy prepared sterile injectable drug products from non-sterile sources without  
 2 subjecting the final product to testing. Specifically, on February 14, 2011, Respondent Roxsan  
 3 Pharmacy prepared mitomycin 0.2% injection solution without testing it. The pharmacy also  
 4 prepared but failed to test alprostadil alcohol injection solution on March 30 and June 2, 2011.  
 5 As the Pharmacist-in-Charge at the time of the acts in question, Respondent Shahla Melamed had  
 6 a duty, under Code sections 4036.5 and 4113, subdivision (c), to ensure that sterile injectable  
 7 products compounded from non-sterile ingredients were quarantined until end product testing  
 8 confirmed their sterility and acceptable levels of pyrogens. Complainant realleges paragraph 54.

9 f. **Regulation 1793.7, subd. (a):** Regulation 1793.7, subdivision (a), requires a  
 10 pharmacist to verify every function performed by a pharmacy technician in connection with the  
 11 dispensing of a prescription, including repackaging from bulk and storage of pharmaceuticals.  
 12 The verification must be documented in writing by the verifying pharmacist on the prescription  
 13 label. Respondents Roxsan Pharmacy and Shahla Melamed failed to verify 14 bubble packs of  
 14 medication that were prepared by a pharmacy technician. As the Pharmacist-in-Charge at the  
 15 time of the acts in question, Respondent Shahla Melamed was responsible, under Code sections  
 16 4036.5 and 4113, subdivision (c), for ensuring that each bubble pack prepared by a pharmacy  
 17 technician was verified by a pharmacist. The prescriptions and dates of preparation for which no  
 18 written verification of technician work appeared on the prescription label are set forth in the table  
 19 below. Complainant realleges paragraph 55.

<b>Date</b>	<b>Rx. No.</b>	<b>Drug</b>	<b>No. of Cards Per Rx.</b>
2/1/2011	1238102	Atenolol 25mg	1
3/1/2011	1238102	Atenolol 25mg	1
4/1/2011	1238102	Atenolol 25mg	1
4/7/2011	1284869	Actos 30mg	1
4/11/2011	1285308	Simvastatin 20mg	1
4/12/2011	1285427	Metoclopramide 5mg	3

(cont'd...)

1	4/12/2011	1285430	Omeprazole 20mg	1
2	4/12/2011	1285435	Hydralazine 10mg	2
3	4/19/2011	1285431	Isosorbide 30mg	1
4	4/19/2011	1285437	Aggrenox	1
5	5/1/2011	1238102	Atenolol 25mg	1

6 g. **Regulation 1793.7, subd. (c):** Regulation 1793.7, subdivision (c), requires a  
7 pharmacy technician to wear identification that clearly identifies him as a pharmacy technician.  
8 During an inspection on June 23, 2011, two pharmacy technicians were not wearing identification  
9 clearly identifying them as pharmacy technicians. Respondent Shahla Melamed was the  
10 Pharmacist-in-Charge at the time of the act in question and was responsible, under Code sections  
11 4036.5 and 4113, subdivision (c), for ensuring that pharmacy technicians were wearing proper  
12 identification. Complainant realleges paragraph 55.

13 **SEVENTH CAUSE FOR DISCIPLINE**

14 **(Unprofessional Conduct—Violation of Pharmacy Law and Regulations)**

15 **(As to Respondents Roxsan Pharmacy and Farbod Melamed)**

16 69. Respondents Roxsan Pharmacy and Farbod Melamed are subject to discipline under  
17 section 4301, subdivision (o), for violating, or assisting in or abetting the violation of or  
18 conspiring to violate provisions of the Pharmacy Law and state laws and regulations governing  
19 pharmacy, as follows:

20 a. **Regulation 1735.2, subd. (h):** Regulation 1735.2, subdivision (h), states that every  
21 compounded drug product shall be given an expiration date representing the date beyond which,  
22 in the professional judgment of the pharmacist performing or supervising the compounding, it  
23 should not be used. This “beyond use date” of the compounded drug product cannot exceed 180  
24 days from preparation of the shortest expiration date of any component in the compounded drug  
25 product, unless a longer date is supported by stability studies of finished drugs or compounded  
26 drug products using the same components and packaging. Respondent Roxsan Pharmacy  
27 compounded the following drug products and labeled each with an expiration date in excess of  
28 the expiration date of one of its ingredients. As the Pharmacist-in-Charge at the time of the acts

1 in question, Respondent Farbod Melamed had the responsibility, under Code sections 4036.5 and  
 2 4113, subdivision (c), to ensure that each compounded drug product contained a correct beyond  
 3 use date. Complainant realleges paragraphs 59–62.

<b>Date Compounded</b>	<b>Drug</b>	<b>Ingredient with Expiration Date that is Less Than the Beyond Use Date</b>	<b>Beyond Use Date on Label</b>
2/21/2013	Hydroquinone cream 8%	7/19/2013 Sodium metabisulfite	8/20/2013
2/21/2013	Hydroquinone cream 10%	7/19/2013 Sodium metabisulfite	8/20/2013
1/10/2013	Cream with: Kojic acid (4%) Triamcinolone (4%) Retinoic acid (0.05%)	3/12/2013 Hydroquinone cream 4%	5/10/2013
1/7/2013	Cream with: Kojic acid (2%) Triamcinolone (2%) Tretinoin (0.025%)	4/6/2013 Hydroquinone cream 2%	5/7/2013
5/28/2013	Hydroquinone cream 5% with Salicylic acid 5% solution	7/19/2013 Sodium metabisulfite	11/24/2013
5/17/2013	Hydroquinone cream 2%	7/19/2013 Sodium metabisulfite	11/13/2013
5/20/2013	Hydroquinone cream 5%	7/19/2013 Sodium metabisulfite	11/16/2013

20 b. **Section 4342:** Section 4342 empowers the Board to act to prevent the sale of  
 21 pharmaceutical preparations and drugs that fail to conform to the standard and tests as to quality  
 22 and strength. An inspection on June 4, 2013 revealed that Respondent Roxsan Pharmacy  
 23 compounded seven drug products and labeled them with expiration dates that exceeded the  
 24 expiration dates of their ingredients, as more particularly set forth in paragraph 69 (a), *supra*.  
 25 Respondent Farbod Melamed was the Pharmacist-in-Charge at the time of the acts in question  
 26 and had the responsibility, under Code sections 4036.5 and 4113, subdivision (c), to ensure that  
 27 pharmaceutical preparations and drugs dispensed by the pharmacy conformed to the standard and  
 28 tests as to quality and strength. Complainant realleges paragraph 59–62 and 69 (a).

**EIGHTH CAUSE FOR DISCIPLINE**

**(Unprofessional Conduct—Violation of Pharmacy Law and Regulations)**

**(As to All Respondents)**

70. Respondents Roxsan Pharmacy, Shahla Melamed and Farbod Melamed are subject to discipline under section 4301, subdivision (o), for violating, or assisting in or abetting the violation of or conspiring to violate provisions of the Pharmacy Law and state laws and regulations governing pharmacy, in particular Code section 4059.5, subdivision (e).

71. Business and Professions Code section 4059.5, subdivision (e), prohibits the transfer, sale or delivery of dangerous drugs and devices to persons outside California unless the transfer, sale or delivery complies with California law, federal law, and the law of the state into which the dangerous drug or device is delivered. Respondents Roxsan Pharmacy, Shahla Melamed and Farbod Melamed violated Code section 4059.5, subdivision (e), by selling dangerous drugs to patients in the State of Louisiana in contravention of California and Louisiana law. (Bus. & Prof. Code, § 4059.5, subd. (e); La R.S., §§ 1201, 1221, 1232; La. Admin. Code, tit. 46, §§ 2301, 2303, 2305, 2307, 2309.)

72. From approximately September 28, 2012 to June 6, 2013, Respondent Roxsan Pharmacy dispensed 22 prescriptions for dangerous drugs and two refills to patients in the state of Louisiana without proper licensure. Twenty-one of the twenty-two prescriptions contained ketamine, a Schedule III controlled substance.

73. Respondent Roxsan Pharmacy dispensed four of the aforementioned prescriptions between September 28, 2012 and December 3, 2012, during which time Respondent Shahla Melamed was the Pharmacist-in-Charge. The remaining 18 prescriptions were dispensed between December 3, 2012 and June 6, 2013, during which time Respondent Farbod Melamed was the Pharmacist-in-Charge. Under Code sections 4036.5 and 4113, subdivision (c), Respondents Shahla Melamed and Farbod Melamed had a duty, during the respective times in which each pharmacist served as the Pharmacist-in-Charge, to ensure that every prescription dispensed and sold in Louisiana complied with Pharmacy Law, federal law and the Louisiana Pharmacy Practice Act.

1 74. When Respondent Farbod Melamed became the Pharmacist-in-Charge, Respondent  
2 Shahla Melamed remained the pharmacy's President, Chief Executive Officer and Secretary. As  
3 a corporate officer, she had knowledge that Roxsan Pharmacy continued to dispense dangerous  
4 drugs and controlled substances to Louisiana residents without being licensed in that state, even  
5 after she ceased being the Pharmacist-in-Charge. Complainant realleges paragraphs 59–62.

6 **NINTH CAUSE FOR DISCIPLINE**

7 **(Unprofessional Conduct—Violation of State and Federal Statutes Regulating Controlled**  
8 **Substances and Dangerous Drugs)**  
9 **(As to All Respondents)**

10 75. Respondents Roxsan Pharmacy, Shahla Melamed and Farbod Melamed are subject to  
11 discipline under section 4301, subdivision (j), for violating, or assisting in or abetting the  
12 violation of or conspiring to violate provisions of the Pharmacy Law and state laws and  
13 regulations governing pharmacy. Complainant realleges paragraphs 41–74.

14 **TENTH CAUSE FOR DISCIPLINE**

15 **(Unprofessional Conduct—Conduct Which Would Warrant Denial of an Application)**  
16 **(As to All Respondents)**

17 76. Respondents Roxsan Pharmacy, Shahla Melamed and Farbod Melamed are subject to  
18 discipline under section 4301, subdivision (p), for engaging in conduct that would have warranted  
19 denial of a license. Complainant realleges paragraphs 41–75.

20 **DISCIPLINARY CONSIDERATIONS**

21 Complainant alleges as a disciplinary consideration the following prior violations:

22 <b>Sections Violated</b>	<b>Offense</b>	<b>Cited Person/Entity, Citation No. and Date of Issuance</b>
24 Code Fed. Regs., tit. 21, § 1304.04 (f)	25 Failure to maintain separate inventories and records of controlled substances	26 <u>Roxsan Pharmacy</u> CI 2007 35352 (6/5/08)  <u>PIC Shahla Melamed</u> CI 2007 36251 (6/5/08) <i>(cont'd...)</i>

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Code Fed. Regs., tit. 21, § 1304.11 (c)	Failure to maintain complete inventory of controlled substances	<u>Roxsan Pharmacy</u> CI 2001 22642 (3/3/03) CI 2004 27776 (10/26/04)  <u>PIC Shahla Melamed</u> CI 2001 22642 (3/3/03) CI 2004 27776 (10/26/04)
Code, § 4052 (a)	Scope of practice	<u>Roxsan Pharmacy</u> CI 2002 24424 (9/8/03)
Code, § 4059	Furnishing dangerous drug or device other than upon the prescription of a person authorized to prescribe dangerous drugs and devices	<u>Roxsan Pharmacy</u> CI 2002 24424 (9/8/03)  <u>PIC Shahla Melamed</u> CI 2002 24424 (9/8/03)
Code, § 4076	Failure to dispense prescription in a container that meets the requirements of state and federal law and is correctly labeled	<u>Roxsan Pharmacy</u> CI 2001 22642 (3/3/03)  <u>PIC Shahla Melamed</u> CI 2001 22642 (3/3/03)
Code, § 4076 (a) Code, § 4076 (a)(11)(A)	Mislabeling of physical description of the dispensed medication	<u>Roxsan Pharmacy</u> CI 2007 35352 (6/5/08) CI 2007 36248 (10/1/09) CI 2009 41104 (6/4/10)  <u>PIC Shahla Melamed</u> CI 2007 36251 (6/5/08) CI 2009 41471 (10/1/09) CI 2009 44011 (6/24/10)
Code, § 4077 (d)	Failure of pharmacist to affix warning label on products containing dimethyl sulfoxide	<u>Roxsan Pharmacy</u> CI 2007 36248 (10/1/09)  <u>PIC Shahla Melamed</u> CI 2009 41471 (10/1/09)  <i>(cont'd...)</i>

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Code, § 4081 (a)	Failure of pharmacy to maintain a current inventory of dangerous drugs and to have that inventory available for inspection	<u>Roxsan Pharmacy</u> CI 2004 27776 (10/26/04) CI 2007 35352 (6/5/08)  <u>PIC Shahla Melamed</u> CI 2004 27776 (10/26/04) CI 2007 36251 (6/5/08)
Code, § 4104 (a)	Failure to have in place procedures for taking action to protect the public when a licensed individual employed by or with the pharmacy is discovered or known to be chemically, mentally or physically impaired to the extent it affects his ability to practice the profession or is discovered to have engaged in the theft, diversion or self-use of dangerous drugs	<u>Roxsan Pharmacy</u> CI 2007 35352 (6/5/08)  <u>PIC Shahla Melamed</u> CI 2007 36251 (6/5/08)
Code, § 4115 (g)	Failure of pharmacist to supervise pharmacy technician in reviewing work completed during pharmacist's temporary absence	<u>Roxsan Pharmacy</u> CI 2001 22642 (3/3/03)  <u>PIC Shahla Melamed</u> CI 2007 36251 (6/5/08)
Code, § 4125 (a) Regulation 1711 (e)	Failure of pharmacy to complete and maintain quality assurance review following medication error	<u>Roxsan Pharmacy</u> CI 2002 24424 (9/8/03) CI 2009 41104 (6/4/10)  <u>PIC Shahla Melamed</u> CI 2002 24424 (9/8/03) CI 2009 44011 (6/24/10)  <i>(cont'd...)</i>

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<p>Code, § 4342 Regulation 1716.2 (a)(3)</p>	<p>Failure to ensure pharmaceutical preparations and drugs dispensed by the pharmacy conform to the standard and tests as to quality and strength</p>	<p><u>Roxsan Pharmacy</u> CI 2001 22642 (3/3/03) CI 2002 24424 (9/8/03) CI 2004 27776 (10/26/04) CI 2007 35352 (6/5/08) CI 2007 36248 (10/1/09) CI 2009 41104 (6/24/10)</p> <p><u>PIC Shahla Melamed</u> CI 2001 22642 (3/3/03) CI 2002 24424 (9/8/03) CI 2004 27775 (10/26/04) CI 2007 36251 (6/5/08) CI 2009 41471 (10/1/09) CI 2009 44011 (6/24/10)</p>
<p>Regulation 1707.3</p>	<p>Failure of pharmacist to review patient's drug therapy and medication record before dispensing prescription</p>	<p><u>Roxsan Pharmacy</u> CI 2009 41104 (6/4/10)</p> <p><u>PIC Shahla Melamed</u> CI 2009 44011 (6/24/10)</p>
<p>Regulation 1714 (c)</p>	<p>Failure to maintain pharmacy and fixtures and equipment in clean and orderly condition</p>	<p><u>Roxsan Pharmacy</u> CI 2001 22642 (3/3/03)</p> <p><u>PIC Shahla Melamed</u> CI 2001 22642 (3/3/03)</p>
<p>Regulation 1715 (a)</p>	<p>Failure of pharmacy to maintain current pharmacy self-assessment form</p>	<p><u>Roxsan Pharmacy</u> CI 2007 35352 (6/5/08)</p> <p><u>PIC Shahla Melamed</u> CI 2007 36251 (6/5/08)</p>
<p>Regulation 1716.2 (a)(4)</p>	<p>Failure of pharmacy to maintain records that include the signature or initials of the pharmacists performing the compounding</p>	<p><u>Roxsan Pharmacy</u> CI 2004 27776 (10/26/04) CI 2007 35352 (6/5/08) CI 2009 41104 (6/24/10)</p> <p><u>PIC Shahla Melamed</u> CI 2004 27776 (10/26/04) CI 2007 36251 (6/5/08) CI 2009 44011 (6/24/10) <i>(cont'd...)</i></p>

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Regulation 1718	Failure to maintain complete inventory of all dangerous drugs	<u>Roxsan Pharmacy</u> CI 2001 22642 (3/3/03)  <u>PIC Shahla Melamed</u> CI 2007 36251 (6/5/08)
Regulation 1761 (a) Regulation 1716	Variation from prescription	<u>Roxsan Pharmacy</u> CI 2004 27776 (10/26/04) CI 2007 35352 (6/5/08) CI 2009 41104 (6/4/10)  <u>PIC Shahla Melamed</u> CI 2004 27776 (10/26/04) CI 2007 36251 (6/5/08) CI 2009 44011 (6/24/10)
Regulation 1793.7	Failure to have policies and procedures and a job description for pharmacy technicians in place in the pharmacy	<u>Roxsan Pharmacy</u> CI 2004 27776 (10/26/04)  <u>PIC Shahla Melamed</u> CI 2004 27776 (10/26/04)
Regulation 1793.7 (a)	Failure of pharmacist to verify and document work of pharmacy technician in connection with the dispensing of a prescription, including repackaging from bulk and storage of pharmaceuticals	<u>Roxsan Pharmacy</u> CI 2004 27776 (10/26/04) CI 2009 41104 (6/24/10)  <u>PIC Shahla Melamed</u> CI 2004 27776 (10/26/04) CI 2009 44011 (6/24/10)
Regulation 1793.7 (a), (c), (d)	Pharmacy technician not wearing identification	<u>Roxsan Pharmacy</u> CI 2007 35352 (6/5/08) CI 2007 36248 (10/1/09)  <u>PIC Shahla Melamed</u> CI 2007 36251 (6/5/08) CI 2009 41471 (10/1/09)

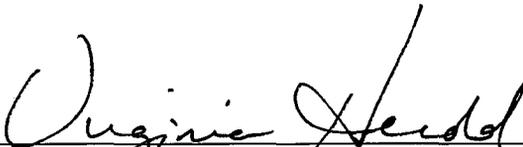
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PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Board of Pharmacy issue a decision:

1. Revoking or suspending Pharmacy Permit Number PHY 38297, issued to Roxsan Pharmacy, Inc. with Shahla Keyvanfar Melamed as its CEO and President;
2. Revoking or suspending Pharmacist License Number RPH 42096, issued to Shahla Keyvanfar Melamed;
3. Revoking or suspending Pharmacist License Number RPH 68252, issued to Farbod Melamed;
4. Prohibiting Shahla Keyvanfar Melamed from serving as a manager, administrator, owner, member, officer, director, associate, or partner of a licensee during the period in which discipline is imposed on Pharmacy Permit Number PHY 38297, issued to Roxsan Pharmacy, Inc. with Shahla Keyvanfar Melamed as its CEO and President.
5. Ordering Roxsan Pharmacy, Inc., Shahla Keyvanfar Melamed and Farbod Melamed to pay the reasonable costs of the investigation and enforcement of this case pursuant to Business and Professions Code section 125.3; and
6. Taking such other and further action as deemed necessary and proper.

DATED: 2/3/14

  
VIRGINIA K. HEROLD  
Executive Officer  
Board of Pharmacy  
State of California  
Complainant

LA2012507538