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

12 In the Matter of the Accusation Against:

Case No. 5238

13 **Orlando's Fairmont Pharmacy dba**
Fairmont
14 **PIC Orlando Hernandez**
50 Belle Fontaine Street
15 Pasadena, CA 91105
Sterile Compounding Permit Number LSC
16 **99057**

A C C U S A T I O N

17 and

18 **Orlando Hernandez**
173 South Berkeley Avenue
19 Pasadena, California 91107
Pharmacist License Number RPH 37523

20 Respondents.
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24 Complainant alleges:

25 **PARTIES**

26 1. Virginia Herold (Complainant) brings this Accusation solely in her official capacity
27 as the Executive Officer of the Board of Pharmacy, Department of Consumer Affairs.
28

1 examined on a periodic sampling basis as determined by the pharmacist-in-charge to assure that it
2 meets required specifications. The Quality Assurance Program shall include at least the following:

3 (1) Cleaning and sanitization of the parenteral medication preparation area.

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

6 (3) Actions to be taken in the event of a drug recall.

7 (4) Written justification of the chosen expiration dates for compounded sterile injectable
8 products.

9 (b) Each individual involved in the preparation of sterile injectable products must first
10 successfully complete a validation process on technique before being allowed to prepare sterile
11 injectable products. The validation process shall be carried out in the same manner as normal
12 production, except that an appropriate microbiological growth medium is used in place of the
13 actual product used during sterile preparation. The validation process shall be representative of all
14 types of manipulations, products and batch sizes the individual is expected to prepare. The same
15 personnel, procedures, equipment, and materials must be involved. Completed medium samples
16 must be incubated. If microbial growth is detected, then the sterile preparation process must be
17 evaluated, corrective action taken, and the validation process repeated. Personnel competency
18 must be revalidated at least every twelve months, whenever the quality assurance program yields
19 an unacceptable result, when the compounding process changes, equipment used in the
20 compounding of sterile injectable drug products is repaired or replaced, the facility is modified in
21 a manner that affects airflow or traffic patterns, or whenever improper aseptic techniques are
22 observed. Revalidation must be documented.

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

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1 (d) Batch-produced sterile to sterile transfers shall be subject to periodic testing through
2 process validation for sterility as determined by the pharmacist-in-charge and described in the
3 written policies and procedures.”

4 11. California Code of Regulations, title 16, section 1735.3, states:

5 “(a) For each compounded drug product, the pharmacy records shall include:

6 (1) The master formula record.

7 (2) The date the drug product was compounded.

8 (3) The identity of the pharmacy personnel who compounded the drug product.

9 (4) The identity of the pharmacist reviewing the final drug product.

10 (5) The quantity of each component used in compounding the drug product.

11 (6) The manufacturer, expiration date and lot number of each component. If the
12 manufacturer name is demonstrably unavailable, the name of the supplier may be substituted.
13 Exempt from the requirements in this paragraph are sterile products compounded on a one-time
14 basis for administration within seventy-two (72) hours and stored in accordance with standards
15 for "Redispensed CSPS" found in Chapter 797 of the United States Pharmacopeia--National
16 Formulary (USP-NF) (35th Revision, Effective May 1, 2012), hereby incorporated by reference,
17 to an inpatient in a health care facility licensed under section 1250 of the Health and Safety Code.

18 (7) A pharmacy assigned reference or lot number for the compounded drug product.

19 (8) The expiration date of the final compounded drug product.

20 (9) The quantity or amount of drug product compounded.

21 (b) Pharmacies shall maintain records of the proper acquisition, storage, and destruction of
22 chemicals, bulk drug substances, drug products, and components used in compounding.

23 (c) Chemicals, bulk drug substances, drug products, and components used to compound
24 drug products shall be obtained from reliable suppliers. The pharmacy shall acquire and retain any
25 available certificates of purity or analysis for chemicals, bulk drug substances, drug products, and
26 components used in compounding. Certificates of purity or analysis are not required for drug
27 products that are approved by the Food and Drug Administration.

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

3 **COST RECOVERY**

4 12. Section 125.3 of the Code states, in pertinent part, that the Board may request the
5 administrative law judge to direct a licentiate found to have committed a violation or violations of
6 the licensing act to pay a sum not to exceed the reasonable costs of the investigation and
7 enforcement of the case.

8 **FIRST CAUSE FOR DISCIPLINE**

9 **(Violation of Compounding Requirements)**

10 13. Respondents are subject to disciplinary action under sections 4300 and 4301,
11 subdivision (o), in that they failed to comply with California Code of Regulations, title 16, section
12 1751.7. The circumstances are that on or about on January 21, 2014, during an inspection of
13 Respondent Pharmacy’s facility, located at 50 Belle Fontaine Street, Pasadena, California, Board
14 inspectors found that Respondents had batch produced Prostaglandin E1 500 mcg/ML injectable
15 stock solution on October 30, 2013, and Papaverine 30 mg/ml injection stock solution on October
16 31, 2013, and December 23, 2013, and did not perform sterility and pyrogen tests prior to using
17 the drugs to compound medications.

18 **SECOND CAUSE FOR DISCIPLINE**

19 **(Nonconforming Compound Drugs)**

20 14. Respondents are subject to disciplinary action under sections 4300, 4301, subdivision
21 (o), and 4342, in that they had produced compound drugs that did not conform to the required
22 standard and tests as to quality and strength. The circumstances are that on or about on January
23 21, 2014, during an inspection of Respondent Pharmacy’s facility, located at 50 Belle Fontaine
24 Street, Pasadena, California, Board inspectors found that Respondents had batch produced
25 Prostaglandin E1 500 mcg/ML injectable stock solution on October 30, 2013, and Papaverine 30
26 mg/ml injection stock solution on October 31, 2013, and December 23, 2013, and did not perform
27 sterility and pyrogen tests prior to using the drugs to compound medications. Respondents used
28 these two drugs to compound the following products on the following days:

| Date Compounded | Compounded Product |
|-----------------|---|
| 11/23/2013 | PPP Trimix 16mg/.55mg/5.5mcg/ml injectable |
| 11/19/2013 | PPP 30-2- 30mg/2mg/20mcg/ml injectable |
| 11/19/2013 | Prostaglandin 20mcg/ml injectable |
| 11/18/2013 | PPP Trimix 16mg/ .55mg/5.5mcg/ml injectable |
| 11/15/2013 | PPP 30-1-60 30mg/1mg/60mcg/ml injectable |
| 11/14/2013 | PPP 30-1-10 30mg/1mg/1 Omcg/ml injectable |
| 11/5/2013 | PPP 30-1-60 30mg/1mg/60mcg/ml injectable |
| 10/31/2013 | PPP Forte 27mg/.45mg/45mcg/ml injectable |
| 10/30/2013 | PPP Forte 27mg/.45mcg/ml Injectable |

THIRD CAUSE FOR DISCIPLINE

(Violation of Compounding Recordkeeping Requirements)

15. Respondents are subject to disciplinary action under sections 4300 and 4301, subdivision (o), in that they failed to comply with California Code of Regulations, title 16, section 1735.3, subdivision (a)(1). The circumstances are that on or about on January 21, 2014, during an inspection of Respondent Pharmacy's facility, located at 50 Belle Fontaine Street, Pasadena, California, Board inspectors found that Respondents' compounding worksheets did not include all the required information for each compounded drug product, as follows:

| Date Compounded | Compounded Product | Incomplete worksheet on one or more ingredients used to compound |
|-----------------|---|--|
| 1/9/2014 | Progesterone 200mg Capsules | No Mfg, lot#, exp date |
| 1/2/2014 | Biestrogen 3mg/0.5mg Cream | No Mfg, lot#, exp date |
| 1/3/2014 | Cyclosporin solution 150mg/ml | No Mfg, lot#, exp date |
| 1/4/2014 | Spironolactone 9mg/ml | No Mfg, lot#, exp date suspension |
| 1/17/2014 | Biestrogen/progesterone 2.5mg/50mg/gm cream | No Mfg, lot#, exp date |
| 1/20/2014 | Mupirocin Nasal Spray 0.01% | No Mfg, lot#, exp date. Mupirocin, Polysorbate, Base C polyglycol were expired according to worksheet |
| 1/21/2014 | Magic mouth wash (diphenhydramine, lidocaine, Maalox, nystatin) | No Mfg, lot#, exp date |
| 1/10/2014 | PPP 30-2-20-30mg/2mg/20mcg/ml injectable | No Mfg, lot#, exp date |
| 1/20/2014 | PPP Trimix 15mg/.55mcg/ml injectable | No Mfg, lot#, exp date |
| 1/8/2014 | PPP Trimix 16mg/.55mcg/ml injectable | No Mfg, lot#, exp date |
| 1/3/2014 | 1/3/2014 Papaverine HCL injection solution 30mg/ml injectable | No Mfg, lot#, exp date |
| 1/17/2014 | 1/17/2014 PPP Trimix 16mg/.55mcg/ml injectable | No Mfg, lot#, exp date |
| 1/7/2014 | Cocaine 4% ophthalmic | No Mfg, lot#, exp date |

| | | | |
|----|------------|--|------------------------|
| 1 | 10/1/2013 | PPP 30-2-80 30mg/2mg/80mcg/ml injectable | No Mfg, lot#, exp date |
| 2 | | | |
| 3 | 10/1/2013 | PPP 30-1.5-50 Super 30/1.5mg/50mcg/ml injectable | No Mfg, lot#, exp date |
| 4 | | | |
| 5 | 11/23/2013 | PPP Trimix 16mg/.55mg/5.5mcg/ml injectable | No Mfg, lot#, exp date |
| 6 | | | |
| 7 | 11/19/2013 | PPP 30-2- 30mg/2mg/20mcg/ml injectable | No Mfg, lot#, exp date |
| 8 | | | |
| 9 | 11/19/2013 | Prostaglandin 20mcg/ml injectable | No Mfg, lot#, exp date |
| 10 | 11/18/2013 | PPP Trimix 16mg/ .5 5mg/5 .5mcg/ml injectable | No Mfg, lot#, exp date |
| 11 | | | |
| 12 | 11/15/2013 | PPP 30-1-60 30mg/1mg/60mcg/ml injectable | No Mfg, lot#, exp date |
| 13 | | | |
| 14 | 11/14/2013 | PPP 30-1-10 30mg/1mg/1 0mcg/ml injectable | No Mfg, lot#, exp date |
| 15 | | | |
| 16 | 11/5/2013 | PPP 30-1-60 30mg/1mg/60mcg/ml injectable | No Mfg, lot#, exp date |
| 17 | | | |
| 18 | 10/31/2013 | PPP Forte 27mg/.45mg/45mcg/ml injectable | No Mfg, lot#, exp date |
| 19 | | | |
| 20 | 10/30/2013 | PPP Forte 27mg/.45mcg/ml Injectable | No Mfg, lot#, exp date |
| 21 | | | |

*mfg=manufacturer name; exp=expiration

DISCIPLINE CONSIDERATIONS

16. To determine the degree of discipline, Complainant alleges that:

a. On or about January 21, 2010, a representative of the Board inspected Respondent Pharmacy's facility and issued to Respondent Pharmacy LSC 99057 administrative Citation No. CI 2008 38908 with \$1,000 fine for violating California Code of Regulations, title 16, sections

1 1716.2(a)(3) (Compounding for Future Use) and 1751.7(c) (Failure to Comply with Sterile
2 Injectable Compounding Quality Assurance and Process Validation). The Citation is final.

3 b. On or about January 21, 2010, a representative of the Board inspected Respondent
4 Pharmacy's facility and issued to Respondent Pharmacy PHY 32744 administrative Citation No.
5 CI 2009 42712 with \$1000 fine for violating Section 4342 and California Code of Regulations,
6 title 16, section 1716 (Variation from Prescriptions). The Citation is final.

7 c. On or about January 21, 2010, a representative of the Board inspected Respondent
8 Pharmacy's facility and issued to Respondent Hernandez, Pharmacist License Number RPH
9 37523 administrative Citation No. CI 2009 42713 with \$2000 fine for violating Business and
10 Professions Code section 4342 and California Code of Regulations, title 16, sections 1716.2(a)(3)
11 (Compounding for Future Use) and 1751.7(c) (Failure to Comply with Sterile Injectable
12 Compounding Quality Assurance and Process Validation Requirements). The Citation is final.

13 **PRAYER**

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

16 1. Revoking or suspending Sterile Compounding Permit Number LSC 99057, issued to
17 Orlando's Fairmont Pharmacy dba Fairmont;

18 2. Revoking or suspending Pharmacist License RPH 37523 to Orlando Hernandez;

19 3. Ordering Respondents to pay the Board of Pharmacy the reasonable costs of the
20 investigation and enforcement of this case, pursuant to Business and Professions Code section
21 125.3;

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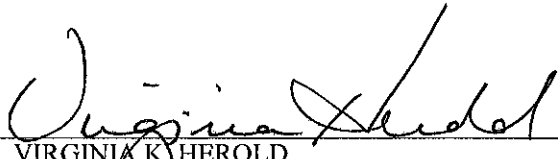
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27 4. Taking such other and further action as deemed necessary and proper.

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DATED: 2/26/15



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

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