



BE AWARE & TAKE CARE:
Talk to your pharmacist!

The Script

CALIFORNIA BOARD OF PHARMACY MARCH 2013

FDA Guidelines for Medication Guide Distribution



Food and Drug Administration (FDA) Medication Guides (MedGuides) contain information for patients on how to safely use a medication and must be dispensed to patients by pharmacists at the time a prescription is filled.

On November 11, 2011, the FDA published new guidelines/recommendations for MedGuides distribution, and portions of the guidelines are mentioned here. However, to gain a thorough understanding of the FDA's complete recommendations, the guidelines should be reviewed: www.fda.gov/downloads/Drugs/.../Guidances/UCM244570.pdf.

A summary of the guidelines indicates that MedGuides **must be provided** (i.e., FDA does not intend to exercise enforcement discretion concerning distribution of a MedGuide to a patient) to the patient or the patient's agent in the following situations:

- When the patient or patient's agent requests a MedGuide;
- When a drug is dispensed in an outpatient setting (e.g., community retail pharmacy, hospital ambulatory pharmacy), and the product will then be used by the patient without direct supervision by a healthcare professional;
- The first time a drug is dispensed to a healthcare professional for

administration to a patient in an outpatient setting, such as in a clinic or dialysis or infusion center.

- The first time a drug is dispensed in an outpatient setting of any kind, after a MedGuide is materially changed (e.g., after addition of a new indication, new safety information). FDA plans to specify in the letter approving a revised MedGuide when a change is considered to be a material change, and applicants will be directed to notify healthcare professionals that a material change was made (i.e., a new indication, new safety information).
- When a drug is subject to a Risk Evaluation and Mitigation Strategy (REMS) that includes specific requirements for reviewing or providing a MedGuide as part of an element to assure safe use (possibly in conjunction with distribution), the MedGuide must be provided in accordance with the terms of the REMS, as when healthcare providers are required to review the MedGuide with patients before patients are enrolled in the REMS program.

Additionally, the MedGuide must be provided in outpatient settings, even when the drug is dispensed to a healthcare professional for administration to the patient, the first time the drug is dispensed, and if the MedGuide is materially changed. In these instances, the MedGuide is expected to assist the healthcare professional in communicating important information about the drug to the patient.

MedGuides **need not be provided** (i.e., FDA intends to exercise enforcement discretion) when a drug is dispensed:

- To a healthcare professional for administration to a patient in an inpatient setting, unless under the circumstances described in one of the bulleted items above; and
- To a healthcare professional for administration to a patient in an outpatient setting, such as in a clinic or dialysis or infusion center, unless under the circumstances described in one of the bulleted items above.

In these settings the drug will be administered by a healthcare professional, who should provide the patient instructions on appropriate use of the drug, including what potential side effects may occur or follow-up that may be required as appropriate and answer any questions the patient may have.

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President's Message

By Stanley C. Weisser, R.Ph.
President, Board of Pharmacy

I wish to congratulate California's newest school of pharmacy, California Northstate University College of Pharmacy, which recently graduated its first class of students, many of whom are now licensed pharmacists.

My column in this issue will provide an overview of California's e-pedigree requirements, an enormous undertaking for any regulator, but one which the California Board has advocated to ensure the quality of pharmaceutical products available for patient use in this state.

In 2004, California became the first state to enact an electronic pedigree law to secure the quality of pharmaceutical products distributed through the pharmaceutical supply chain. A simplistic view of the US supply chain is one comprised of licensed manufacturers who make the medication; licensed wholesalers/distributors that ship, store and transport the medication; and the licensed pharmacies and health care practitioners who dispense or administer the medication. The e-pedigree law, sponsored by the Board, was pursued because counterfeit drug products had been dispensed

by pharmacies to California patients, and drug diversion and dispensing of mislabeled medications were becoming seemingly unstoppable problems.

The e-pedigree law requires a track and trace system for all prescription drugs sold in California, tracing ownership of the smallest saleable unit of each prescription drug from manufacturer to dispenser. The pedigree must be initiated by the manufacturer and electronically appended at every change in ownership by wholesalers, pharmacies or other dispensers. The law was based on a 2004 report of the FDA's Counterfeit Drug Task Force which had been formed to establish a federal level solution to safeguard the nation's prescription drugs. This report recommended a system that would electronically identify each product as it moved through the supply chain. A unique number was to be placed on the saleable unit by the manufacturer that could be electronically read. An interoperable computer system would allow the e-pedigree to be appended at each sale with required elements, including a statement by the seller that it is selling the unit to a specific buyer, and a corresponding statement from the buyer that it is buying the product from the specific seller. This creates a locked chain of custody of the product, electronically tracing all owners back to the manufacturer.

Since 2004, the California law has been amended two times. Both amendments pushed ahead the implementation date. The original law established an implementation date of January 1, 2007. Subsequent amendments in 2006 moved the law ahead to 2009 -- or 2011 if the Board determined additional time was needed to gain full compliance of all supply chain members. In 2008, the law was amended to establish a staggered implementation, creating the dates that are currently in effect:

- January 1, 2015: manufacturers must have 50 percent of all pharmaceuticals they ship into California

serialized with a unique number and the electronic pedigree must be initialized.

- January 1, 2016: manufacturers must serialize the remaining 50 percent of their pharmaceuticals shipped into California.
- July 1, 2016: wholesalers and repackages must append the e-pedigrees.
- July 1, 2017: pharmacies and their distribution warehouses must append the e-pedigree.

In 2012, the Board began developing regulations to implement these requirements. As this newsletter is being written, the Board is securing regulation requirements for the serialized number for each saleable unit, establishing specifications for the manner in which manufacturers must identify which 50 percent of their products comply with the law on January 1, 2015, and creating an exemption process to allow supply chain members to continue to distribute non-serialized products that may exist in the supply chain once the e-pedigree provisions take effect. The Board is also working on inference requirements to establish conditions under which a saleable unit will not have to be specifically read individually, but could be "inferred" by reading a single number on a case. For example, 24 saleable units could be linked to a single case number.

Please join us in this important but complex work to protect California's drug supply. These meetings are public, and we encourage participation.

The Board has also initiated a review of compounding regulations in light of the deaths of more than 45 patients from contaminated injectable medication, and several other high profile incidents where contaminated compounded products injured patients. This evaluation will be done in public meetings and I encourage you to join

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Compliance Guidelines: Electronically Transmitted Prescriptions

Computer-to-Computer/Computer-to-Fax

Pharmacies that accept electronically transmitted prescriptions (computer-to-computer or computer-to-fax) must ensure the authenticity, integrity, security, and confidentiality of the document. Authentication means ensuring that the prescriber is the person he or she purports to be. Integrity means ensuring that both the document and the signature have not been altered in the course of the transmission and ensuring that a party to the transaction cannot later disclaim it. Moreover, a pharmacist has an affirmative obligation to verify a prescription when appropriate to do so.

The pharmacy must also ensure that a prescription has been electronically transmitted to the pharmacy of the patient's choice. This may be done in a number of ways, including but not limited to, an affirmative statement on the prescription that the prescriber advised the patient of this right.

Electronically transmitted prescriptions for Schedule II, III, IV, and V controlled substances are subject to the DEA Interim Final Rule, which is covered in depth in the July 2011 issue of *The Script* on pages 21 through 24.

Computer-Generated Prescriptions for Non-Controlled Substances

California pharmacies can accept computer-generated paper prescriptions for non-controlled substances that contain

the electronic signature of the prescriber. These are paper prescriptions that are printed at the prescriber's office and given to the patient. Pharmacies that accept these paper prescriptions that contain the prescriber's electronic signature must ensure the authenticity, integrity, security and confidentiality of the document. Authentication means ensuring that the prescriber is the person he or she purports to be and ensuring that both the document and the signature have not been altered.

The prescriber is also responsible for ensuring the authenticity, integrity, security, and confidentiality of the printed prescription that contains his or her electronic signature. This includes, but is not limited to, the printing of the prescription document on security paper that will void the prescription document should it be altered or reproduced.

It is likely that a different method might be needed to ensure the authenticity of a prescription transmitted from computer-to-fax than the method needed for a prescription transmitted from computer-to-computer. Depending on the circumstances, such a computer-to-fax transmission method might not necessarily require the high-tech approach needed for computer-to-computer transmissions.

The California Board of Pharmacy does not provide specific directions or technological requirements on how to ensure the authenticity, security, and confidentiality of prescriptions. It is up to the involved parties to meet those requirements in whatever way best suits the circumstances in question.

The Beers Criteria for Potentially Inappropriate Medication Use in Older Adults

Permission has been given to the California State Board of Pharmacy by the Institute for Safe Medication Practices (ISMP) to reprint the following information published in the "ISMP Medication Safety Alert!" Volume 11, Issue 3, March 2012.

Safety Briefs: Beers Criteria updated

The American Geriatrics Society (AGS) published updated Beers Criteria in the *Journal of the American Geriatrics Society*. The *Beers Criteria for Potentially*

Inappropriate Medication (PIM) Use in Older Adults is a guideline for identifying medications for which the risks of their use in older adults outweigh the benefits. The 2012 AGS Beers Criteria is intended for use in all US ambulatory and institutional settings of care for populations aged 65 and older. The criteria can be used to help improve the selection of prescription drugs by clinicians and patients and reduce older adults' exposure to PIMs. The new Criteria includes three categories of recommendations:

- 1) Medications to avoid in older adults regardless of diseases or conditions;
- 2) Medications considered potentially inappropriate when used in older adults with certain diseases or syndromes; and
- 3) Medications that should be used with caution.

The criteria is available free of charge at: www.ismp.org/sc?id=59.

Two New Posters on the Way

The Board of Pharmacy has developed two new posters as required by Title 16 section 1707.6 of the California Code of Regulations.

Notice to Consumers Poster

The new, bright yellow “Notice to Consumers” poster consolidates the two existing notices into a single poster and must be posted in a prominent place in every California pharmacy. The 18” x 24” poster is being printed and mailed at no cost to the pharmacies. Watch for the mailing tube from the Board of Pharmacy.

The poster includes information for consumers about the requirement for a pharmacist consultation, the right to ask for generic drugs and several questions to ask the pharmacist before taking a medication. The poster also alerts consumers that they can ask for 12-point font on their prescription container labels or ask for interpreter services.

Foreign language versions of the poster will also be available in six languages including Spanish, Vietnamese, Chinese, Tagalog, Korean and Russian. The foreign language posters will be a smaller version of the poster (11” x 14”) and can be ordered from the board.

Under new regulation requirements in section 1707.6 a video format of the poster can be used in place of the paper poster for display on a monitor or television screen. The video will be available in DVD format upon request, or it can be downloaded from the board’s website. Pharmacies can also produce their own video versions of the Notice to Consumers and submit them for board approval.

Notice of Interpreter Availability

The Board of Pharmacy has also developed a second notice to help limited English speaking consumers quickly identify their language if they require translation services. The notice, titled *Point to Your Language*, is designed in a standard, letter-sized format of 8.5” x 11” and can be downloaded and printed from



the board’s website at www.pharmacy.ca.gov under “Quick Hits.”

The notice displays text in the 12 primary languages in use in California -- Arabic, Armenian, Cambodian, Cantonese, Farsi, Hmong, Korean, Mandarin, Russian, Spanish, Tagalog and Vietnamese, and informs consumers that interpreter services will be provided at no cost to them.

Every pharmacy must use the standardized *Point to Your Language* notice provided by the board *unless* the pharmacy has received prior approval from the board to use another format or display. See section 1707.6 for details.

The poster must be posted in a conspicuous place at or adjacent to each counter in the pharmacy where dangerous drugs are dispensed or furnished, and made available at all hours that the pharmacy is open.

The requirements for the new posters are listed in Title 16 Section 1707.6 of the California Code of Regulations:

- (a) In every pharmacy there shall be prominently posted, in a place conspicuous to and readable by a prescription drug consumer, a notice containing the text in subdivision (b). Each pharmacy

shall use the standardized poster-sized notice provided or made available by the board, unless the pharmacy has received prior approval of another format or display methodology from the board. The board may delegate authority to a committee or to the Executive Officer to give the approval. As an alternative to a printed notice, the pharmacy may also or instead display the notice on a video screen located in a place conspicuous to and readable by prescription drug consumers, so long as: (1) The video screen is at least 24 inches, measured diagonally; (2) The pharmacy utilizes the video image notice provided by the board; (3) The text of the notice remains on the screen for a minimum of 60 seconds; and (4) No more than five minutes elapses between displays of any notice on the screen, as measured between the time that a one-screen notice or the final screen of a multi-screen notice ceases to display and the time that the first or only page of that notice re-displays. The pharmacy may seek approval of another format or display methodology from the board. The board may delegate authority to a committee or to the Executive Officer to give the approval.

- (b) The notice shall contain the following text:

NOTICE TO CONSUMERS

California law requires a pharmacist to speak with you every time you get a new prescription.

You have the right to ask for and receive from any pharmacy prescription drug labels in 12-point font.

See *Two New Posters*, Page 13

Prescriber Signature Requirements for Faxed (Image) and Electronically Transmitted (Data) Prescriptions

With the proliferation of fax machines, computers, and other devices from which a prescription order can be transmitted, where some prescriptions require the prescriber's written signature and others allow an electronic or digital electronic signature, many questions arise about which type of prescriber signature is required. Some guidelines are offered here.

Electronic Image or Faxed (Facsimile) Transmission (Fax to Fax)

A hand-written, typed, or computer generated and printed prescription (Schedules III, IV, or V), the picture of which is faxed by a prescriber to a pharmacy fax machine, is an electronic image transmission prescription and requires the prescriber's hand-written signature to meet the requirements of the Federal Code of Regulations, Title 21 CFR § 1306.05(d), Health and Safety Code, section 11164(b), and California Code of Regulations, section 1717.4. Such prescriptions can be legally used to dispense drugs as long as all other requirements for written prescriptions (under state and federal laws) are satisfied. Electronic, digital, or rubber stamped signatures are not valid in this instance.

Electronic image prescriptions may be written by the prescriber on a regular prescription blank or on a security prescription form. Keep in mind that if written on a security prescription form the "void" security feature will be printed on the facsimile copy received by the pharmacy. All controlled substance prescriptions, regardless of whether it is computer generated, handwritten, or typed, that is handed to the patient to take to the pharmacy must be printed on a security prescription form meeting the requirements of Health and Safety Code, section 11162.1.

Exceptions: 21 CFR 1306.11(a) states, in pertinent part, "A paper prescription for a Schedule II controlled substance may be transmitted by the

practitioner ,,, to a pharmacy via facsimile equipment, provided that the original hand-signed prescription is presented to the pharmacist for review prior to the actual dispensing of the controlled substance. Non-controlled electronic image or data transmission prescriptions may be transmitted to a pharmacy's computer or fax machine and may include the prescriber's hand-signed, electronic/digital, or rubber stamped signature. (see electronic data transmissions below)

Electronic Data Transmissions (Computer to Computer)

An electronic data transmission prescription is an order transmitted to a pharmacy's computer from a practitioner's computer, PDA, or any other electronic device with the capacity to send such an order. For controlled substance prescriptions, both the prescriber and the pharmacy electronic prescription applications must comply with the DEA's Interim Final Rule for the prescribing and dispensing of controlled substances (21 CFR 1300 et seq). These electronic data prescriptions, in general, may not be printed prior to dispensing and must remain electronic all the way through to electronic archiving. If the transmission fails, the prescriber's intermediary service will notify the prescriber, who must then print and hand-sign the prescription and fax it to the pharmacy. These prescriptions must have a notation that the original electronic transmission failed and list the time, date, and pharmacy name. The pharmacy must check their electronic application to ensure the prescription has not already been filled upon the electronic data transmission prior to dispensing pursuant to the faxed prescription. (see DEA Interim Final Rule, Question and Answers on DEA Interim Final Rule on Electronic Prescribing and Receiving Controlled Substance Prescriptions, The Script July 2011).

Electronic Data transmission prescriptions for controlled substances cannot be transmitted from a prescriber's

electronic prescription application directly to a pharmacy fax machine. However, a prescriber's electronic prescription application can computer generate a controlled substance prescription to be printed out, hand-signed and faxed to the pharmacy or printed out on a security form, hand-signed, and handed to the patient to take to the pharmacy.

Non-controlled substance prescriptions created from electronic prescription applications, may be sent via electronic data file, printed and faxed, or printed and handed to the patient on a regular or security prescription form, and may contain a prescriber's electronic/digital, rubber stamped or hand-signed signature.

*See Prescriber Signature Requirements,
Page 18*

Where can I go for answers?



There are times when our licensees have questions but are unable to find the answers. The Board of Pharmacy has many sites available for finding those answers, but often the inquirers don't know where to look. To avoid leaving a voice mail message at the Board and then waiting for a call-back, another way to find answers to your questions is to take a moment to look in one or all of the informational tools provided by the Board for your convenience:

2013 Lawbook for Pharmacy

To access the online lawbook, go to the Board's Web site, www.pharmacy.ca.gov, and click on "Laws and Regulations." Then select "Pharmacy Law Book." A Table of Contents precedes each section of the book and can help you locate the section related to your inquiry.

The main sections are:

- Business and Professions Code, sections 4000 – 4407;
- California Code of Regulations, sections 1702 – 1793.8; and
- Health and Safety Code, section 1261.6 and sections 11000 – 150207.

Also, this site contains a Pharmacy Law Book index.

The Script

Issues of the Board newsletter, *The Script*, dating back to October 1998, are

found on the Board's Web site under "Publications." There you can find information about new or changed laws and issues related to pharmacy practice. Also included in that site is an index of previously published articles, as well as a separate index of issues addressed in the ongoing column, "Rx for Good Practice," making the newsletter an excellent information source.

Pharmacy Self-Assessments

Other very good sources of information are the self-assessment forms.

These forms categorize each facet of pharmacy practice and provide answers to many day-to-day questions.

Board of Pharmacy Web Site

The Board's Web site contains licensure verification information, disciplinary actions, issues of *The Script* and *Health Notes*, applications, informational brochures and videos.

Good pharmacy practice follows when all licensees know where to find answers to their questions.

Reminder: Preprinted Prescriber Address Required on Security Prescription Forms

Effective July 1, 2012, security prescription forms for controlled substances must include the preprinted address of the prescriber (Health and Safety Code [H&SC] section 11162.1). Security prescription forms that do not have the preprinted address of the prescriber are not in compliance, are invalid and cannot be accepted.

Additionally, licensed health care facilities or clinics exempt under Section 1206 (those having 25 or more licensed physicians or surgeons preprinted on the form) are not required to preprint the category of licensure and license number of their facility or clinic (H&SC section 11162.1[c][1]).

Frequently Asked Questions about Transferring Prescriptions

Q. Can a Schedule II prescription be transferred?

- A. No, pursuant to Health and Safety Code section 11158(a), "...no controlled substance classified in Schedule II shall be dispensed without a prescription ..."

Q. Is it OK for a pharmacy technician to transfer a Schedule III, IV, or V controlled substance prescription to another pharmacy for refill purposes by simply faxing a copy of the computer-generated label to the other pharmacy?

- A. No, section 1717(e) of Title 16, California Code of Regulations (16 CCR) and section 1306.25(b)(1) of the Title 21, Code of Federal Regulations (21 CFR) specify that only pharmacists may transfer and receive prescriptions. Under existing law, there is no authority for a prescription label to be used for the purpose of transferring a prescription.

Q. Can a pharmacist transfer a prescription for a Schedule III, IV, or V controlled substance by faxing a copy of the computer-generated label to another pharmacy without talking to the receiving pharmacist?

- A. Again, as stated in the answer above, there is no authority under existing law for a prescription label to be used for the purpose of transferring a prescription. However, if a computer-generated Schedule III, IV, or V prescription is faxed to another pharmacy, section 1306.25(b)(1) of the Code of Federal Regulations and section 1717 of 16 CCR require the transfer to be "communicated directly" between the sending and receiving pharmacist. The common understanding of "communicating directly" is actual contact where the sending and receiving pharmacists:

- Speak directly to each other;
- Communicate via e-mail; or
- Communicate by use of a facsimile transmission directed to the pharmacist involved in the transfer.

The Board recommends that pharmacists use one of the above methods of direct communication.

Q. Can an intern receive a transferred prescription?

- A. Yes, an intern may perform all the functions of a pharmacist at the discretion and under the direct supervision and control of a pharmacist whose license is in good standing with the board (B&PC sections 4023.5 and 4114[a] and 16 CCR section 1726[a]).

Transferring Prescriptions

For your convenience, the complete text of Code of Federal Regulations section 1306.25 follows with underlined emphasis added:

1306.25 Transferring between Pharmacies Schedule III, IV, or V Prescriptions for Refill Purposes

- (a) The transfer of original prescription information for a controlled substance listed in Schedule III, IV, or V for the purpose of refill dispensing is permissible between pharmacies on a one-time basis only. However, pharmacies electronically sharing a real-time, online database may transfer up to the maximum refills permitted by law and the prescriber's authorization.
- (b) Transfers are subject to the following requirements:
- (1) The transfer must be communicated directly between two licensed pharmacists.
 - (2) The transferring pharmacist must do the following:
 - (i) Write the word "VOID" on the face of the invalidated prescription; for electronic prescriptions, information that the prescription has been transferred must be added to the prescription record.
 - (ii) Record on the reverse of the invalidated prescription the name, address, and DEA registration number of the pharmacy to which it was transferred and the name of the pharmacist receiving the prescription information; for electronic prescriptions, such information must be added to the prescription record.
 - (iii) Record the date of the transfer and the name of the pharmacist transferring the information.
 - (3) For paper prescriptions and prescriptions received orally and reduced to writing by the pharmacist pursuant to §1306.21(a), the pharmacist receiving the transferred prescription information must write the word "transfer" on the face of the transferred prescription and reduce to writing all information required to be on a prescription pursuant to §1306.05 and include:
 - (i) Date of issuance of original prescription.
 - (ii) Original number of refills authorized on original prescription.
 - (iii) Date of original dispensing.
 - (iv) Number of valid refills remaining and date(s) and locations of previous refill(s).
 - (v) Pharmacy's name, address, DEA registration number, and prescription number from which the prescription information was transferred.
 - (vi) Name of pharmacist who transferred the prescription.

Frequently Asked Questions

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- (vii) Pharmacy's name, address, DEA registration number, and prescription number from which the prescription was originally filled.
- (4) For electronic prescriptions being transferred electronically, the transferring pharmacist must provide the receiving pharmacist with the following information in addition to the original electronic prescription data:
 - (i) The date of the original dispensing.
 - (ii) The number of refills remaining and the date(s) and locations of previous refills.
 - (iii) The transferring pharmacy's name, address, DEA registration number, and prescription number for each dispensing.
 - (iv) The name of the pharmacist transferring the prescription.
 - (v) The name, address, DEA registration number, and prescription number from the pharmacy that originally filled the prescription, if different.
- (5) The pharmacist receiving a transferred electronic prescription must create an electronic record for the prescription that includes the receiving pharmacist's name and all of the information transferred with the prescription under paragraph (b)(4) of this section.
- (c) The original and transferred prescription(s) must be maintained for a period of two years from the date of last refill.
- (d) Pharmacies electronically accessing the same prescription record must satisfy all information requirements of a manual mode for prescription transferal.
- (e) The procedure allowing the transfer of prescription information for refill purposes is permissible only if allowable under existing State or other applicable law.

Title 16, California Code of Regulations section 1717(e)— Summary of Key Requirements for Transferring and Receiving Electronic Prescriptions

- A pharmacist may transfer a prescription for Schedule III, IV, or V controlled substances to another pharmacy for refill purposes in accordance with Title 21, Code of Federal Regulations, section 1306.25.
- Prescriptions for other dangerous drugs which are not controlled substances may also be transferred by direct communication between pharmacists or by the receiving pharmacist's access to prescriptions or electronic files that have been created or verified by a pharmacist at the transferring pharmacy.
- The receiving pharmacist shall create a written prescription, identifying it as a transferred prescription and record the date of transfer and the original prescription number.
- When a prescription transfer is accomplished via direct access by the receiving pharmacist, the receiving pharmacist shall notify the transferring pharmacy of the transfer.
- A pharmacist at the transferring pharmacy shall then assure that there is a record of the prescription as having

been transferred, and the date of the transfer.

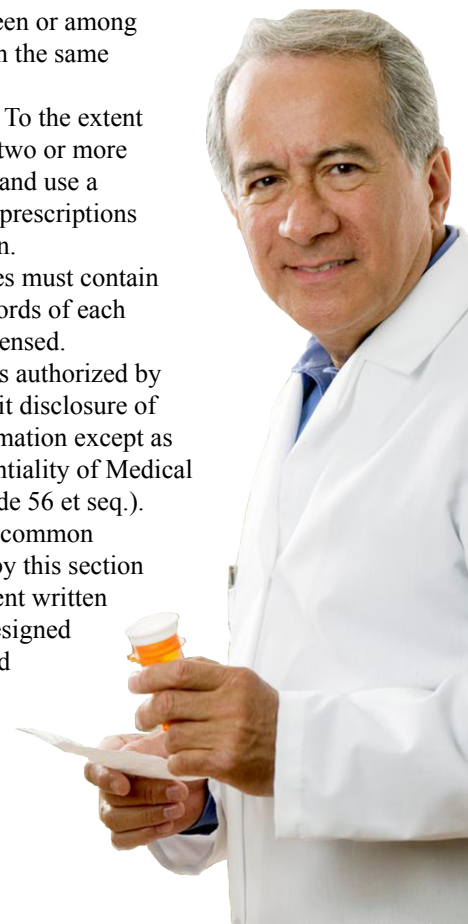
- Each pharmacy shall maintain inventory accountability and pharmacist accountability and dispense in accordance with the provision of section 1716 of Title 16, CCR.
- Information maintained by each pharmacy shall at least include:
 1. Identification of pharmacist(s) transferring information;
 2. Name and identification code or address of pharmacy from which the prescription was received or to which the prescription was transferred, as appropriate;
 3. Original date and last dispensing date;
 4. Number of refills and date originally authorized;
 5. Number of refills remaining but not dispensed;
 6. Number of refills transferred.

Use of Common Electronic Files for Transferring Prescriptions

For your convenience, the complete text of CCR section 1717.1 follows with underlined emphasis added:

1717.1 Common Electronic Files

- (a) For dangerous drugs other than controlled substances:
Two or more pharmacies may establish and use a common electronic file to maintain required dispensing information. Pharmacies using such a common file are not required to transfer prescriptions or information for dispensing purposes between or among pharmacies participating in the same common prescription file.
- (b) For controlled substances: To the extent permitted by Federal law, two or more pharmacies may establish and use a common electronic file of prescriptions and dispensing information.
- (c) All common electronic files must contain complete and accurate records of each prescription and refill dispensed.
- (d) Common electronic files as authorized by this section shall not permit disclosure of confidential medical information except as authorized by the Confidentiality of Medical Information Act (Civil Code 56 et seq.).
- (e) Pharmacies maintaining a common electronic file authorized by this section shall develop and implement written policies and procedures designed to prevent the unauthorized disclosure of confidential medical information.



I'm closing my pharmacy—What do I do?

A very large part of closing a pharmacy, whether due to retirement, sale, or bankruptcy, is determining what to do with the inventory and hard copy and electronic records. Section 1708.2 of Title 16 of the California Code of Regulations (16 CCR) directs pharmacies to contact the Board prior to transferring or selling any dangerous drugs, devices or hypodermics inventory as a result of termination of business or bankruptcy proceedings and to follow all official instructions provided by the Board. You must also contact the DEA for their instructions regarding your registration.

In the cases where a pharmacy files a bankruptcy petition or enters into a liquidation or creditor compromise arrangement that would result in the sale or transfer of inventory, the Board must be notified in writing of the following, if known:

- Date of sale or transfer of drugs, poisons, devices or appliances;
- Name and address of purchaser;
- Inventory of dangerous drugs and devices showing their disposition; and
- Location of records of manufacture, sale, purchase (acquisition), and disposition of dangerous drugs and devices (16 CCR section 1705).

Additionally upon closing a pharmacy, the pharmacist-in-charge and pharmacy owner must complete, sign, and submit to the Board a Discontinuance of Business (DOB), form 17M-8. The form can be downloaded at www.pharmacy.ca.gov/forms/17m8.pdf. The large wall license, current pharmacy license renewal certificate, and an inventory of dangerous drugs and devices must be submitted to the Board with the DOB form.



When a pharmacy discontinues business, all prescription records, electronic files (patient profiles, invoices and prescriptions), a current inventory of dangerous drugs and devices, and acquisition and disposition records must be maintained in a board-licensed facility for at least three years (Business & Professions Code sections 4081, 4105 and 4333). Again, this information is required on the DOB form.

I'm opening a pharmacy—What do I do?



That's a big question, and the following simplified steps are detailed to help you get through all the necessary application processes.

Step 1.

Apply for a Board of Pharmacy pharmacy permit by downloading the application and instructions for its completion at www.pharmacy.ca.gov/forms/phy_app_pkt.pdf.

Important Note: *Be sure to fill in every blank on the application. If the blank does not apply to you, enter N/A (not applicable) in that space. Incomplete*

applications will be returned for completion, delaying the permit issuance.

Step 2.

DEA registration is required for the purchase and distribution of controlled substances, but you may not apply for registration until **after** the pharmacy permit number is issued. Download the DEA registration application at www.deadiversion.usdoj.gov/drugreg/reg_apps/onlineforms_new.htm.

Note: Although the DEA will **not** begin processing the registration application until a Board permit number has been issued, applying for DEA registration online greatly enhances DEA's processing time.

Step 3.

A National Provider Identifier (NPI) number is required when applying for a Medi-Cal provider number. To apply for the NPI, go to <https://cms.hhs.gov>.

Step 4.

To obtain a Medi-Cal provider number from the Department of Health Care Services, download the application at www.dhcs.ca.gov/provgovpart/Pages/PharmacyProviderApplicationPackage.aspx.

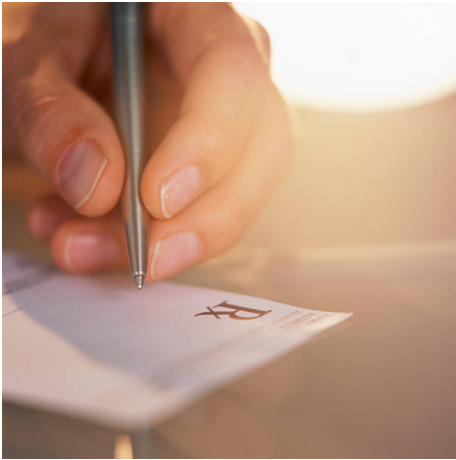
Step 5.

The National Council for Prescription Drug Programs (NCPDP) Provider ID assists pharmacies with 3rd party reimbursement. To obtain the NCPDP Provider ID information and/or application, go to www.NCPDPonline.org. If you have questions about the application, please call (480) 477-1000.

Step 6.

Check with the city or county of your area to determine whether a business license is required for your operation.

Can a physician prescribe for him/herself or family?



Pharmacists frequently ask whether they may dispense medication pursuant to prescriptions written by physicians who are prescribing for themselves or their family members. The law does not prohibit a physician from self-prescribing or prescribing to friends and/or family if the prescribed drugs are non-controlled substances, but other factors should be considered. The following citations may provide some guidance:

- **Health and Safety Code section 11170** states: “No person shall prescribe, administer, or furnish a controlled substance for himself.”
- **Business and Professions Code section 2239(a)** states: “The use or prescribing for or administering to himself or herself, of any controlled substance; or the use of any of the dangerous drugs specified in Section 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous or injurious to the licensee, or to any other person or to the public, or to the extent that

such use impairs the ability of the licensee to practice medicine safely or more than one misdemeanor or any felony involving the use, consumption, or self-administration of any of the substances referred to in this section, or any combination thereof, constitutes unprofessional conduct. The record of the conviction is conclusive evidence of such unprofessional conduct.”

- **The American Medical Association’s Code of Medical Ethics section 8.19** (Self-Treatment or Treatment of Immediate Family Members) states: “Physicians generally should not treat themselves or members of their immediate families. Professional objectivity may be compromised when an immediate family member or the physician is the patient; the physician’s personal feelings may unduly influence his or her professional medical judgment, thereby interfering with the care being delivered. Physicians may fail to probe sensitive areas when taking the medical history or may fail to perform intimate parts of the physical examination. Similarly, patients may feel uncomfortable disclosing sensitive information or undergoing an intimate examination when the physician is an immediate family member. This discomfort is particularly the case when the patient is a minor child, and sensitive or intimate care should especially be avoided for such patients.

When treating themselves or immediate family members, physicians may be inclined to treat problems that are beyond their expertise or training. If tensions develop in a physician’s professional relationship with a family member, perhaps as a result of a negative medical outcome, such difficulties may be carried over into the family member’s personal relationship with the physician.

It would not always be inappropriate to undertake self-treatment or treatment of immediate family members. In emergency settings or isolated settings where there is no other qualified physician available, physicians should not hesitate to treat themselves or family members until another physician becomes available. In addition, while physicians should not serve as a primary or regular care provider for immediate family members, there are situations in which routine care is acceptable for short-term, minor problems. Except in emergencies, it is not appropriate for physicians to write prescriptions for controlled substances for themselves or immediate family members.”

Prescriptions must be written for legitimate medical purposes, there should be a recorded physician/patient relationship, and a good-faith examination performed. This being said, the pharmacist then must consider the regulations and medical ethics guidelines, the Standard of Practice, and his or her professional judgment whether to dispense or not.



Do you have a question that you would like to see addressed in the newsletter? If so, please e-mail it to Jan.Jamison@dca.ca.gov.

Q. Can a pharmacy take back and refund to the consumer the cost of a returned, unopened and still sealed medication bottle, and can the pharmacy return the drug to stock and resell it?

A. The pharmacy should not accept the unopened, sealed bottle. However, if the pharmacy accepts the unopened sealed bottle, the drug product shall not be returned to stock. The Food and Drug Administration Compliance Guideline section 7132.09 states:

A pharmacist should not return drug products to his stock once they have been out of his possession. It could be a dangerous practice for pharmacists to accept and return to stock the unused portions of prescriptions that are returned by patrons, because he would no longer have any assurance of the strength, quality, purity or identity of the articles.

Many state boards of pharmacy have issued regulations specifically forbidding the practice. We endorse the action of these State boards as being in the interest of public health.

The pharmacist or doctor dispensing a drug is legally responsible for all hazards of contamination or adulteration that may arise, should he mix and return portions of drugs to his shelf stocks. Some of our investigations in the past have shown that drugs returned by patrons and subsequently resold by the pharmacist were responsible for injuries.

Articles on this subject can be reviewed on page 6 of the January 2007 issue of *The Script*, and page 14 of the July 2007 issue.

Q. Is a prescription container required to have a patient-centered label as required by Title 16, California Code of Regulations (16 CCR) section 1707.5) if the medication is:

1. Dispensed to a skilled nursing patient;
2. Dispensed to a patient in a board and care facility;

3. Dispensed via mail to a patient in California;
4. Provided to an emergency room patient as a three-day supply to take home; and
5. Administered to a patient by a licensed healthcare professional in the hospital.

A. Pursuant to section 4076.5 of the Business and Professions Code (B&PC), only #5 is exempt from the patient-centered labeling requirement of Title 16 California Code of Regulations (16 CCR) section 1705.5, because the medication is administered by a licensed healthcare professional. All the others listed above require patient-centered labeling.

Q. If the date of issue of a Schedule II prescription is omitted, can it be obtained by verbal consult with the prescriber and documented on the hard copy?



A. The prescriber's failure to sign or enter the issue date is considered to be a "fatal flaw" on a Schedule II prescription and must be returned to the prescriber for a corrected or new prescription. For Schedules III, IV, and V controlled substance prescriptions that contain omissions or errors, 16, CCR section 1761(a) states that the pharmacist may make corrections to the prescription after contacting and receiving permission from the prescriber.

Q. The prescriber authorized a treatment (non-controlled drug) via an electronic device or a computer, and the prescription was printed out on a security or standard prescription paper (form) containing the prescriber's preprinted manual signature. The prescriber then handed the prescription to the patient to take to the pharmacy to be filled. Since the prescriber's signature is not hand-written in ink on the printed prescription, and the pharmacist has exercised professional judgment and found no evidence to suspect the prescription's legitimacy, may he or she fill the prescription without further delay?

A. In regulation, there is no distinction between types of signature (manual or preprinted). However, pharmacies that accept preprinted prescriptions with electronic signatures must ensure the security, authenticity, integrity, and confidentiality of the document (16 CCR section 1717.4[h]). Having done that, the pharmacist is free to dispense the prescription.

Rx for Good Practice

Continued from Page 11

This subject is addressed in depth in the March 2003 issue of *The Script*, page 12.

Q. What is the acceptable phrase for a pharmacy technician or clerk to say to a patient when there is a new prescription that requires consultation?

A. There is no specific phrase in regulation for directing the patient regarding consultation with the pharmacist, but most importantly, the patient should not be asked whether he or she wishes consultation with the pharmacist. Instead, the clerk or pharmacy technician may simply direct the patient to the consulting area, and advise that “The pharmacist would like to talk to you about your prescription.” The patient can then accept or refuse the consultation.

Q. If a physician is working temporarily at an office where his name is not preprinted on that office’s prescription form, can that physician use that office’s prescription form to write a Schedule II prescription and hand-print his name and DEA number on it?

A. No, because H&SC section 11162.1(a)(9) states that prescription forms for controlled substances shall be printed with: “The preprinted name [Edit: emphasis added], category of licensure, license number, federal controlled substance registration number, and address of the prescribing practitioner.” The prescriber could use his or her own prescription form, and note on the prescription the location where the patient was seen and prescriber’s phone number.

Q. A large dental company with several locations uses security prescription blanks with the prescribing dentist’s information preprinted, but the address is rubber stamped. I know certain institutions can do this, but can a dental company do it?

A. The dental company you describe does not appear to be a licensed healthcare facility or clinic (defined in H&SC sections 11162.1[c][1] and [2]) and therefore is not exempt from the required preprinted items. The address must be preprinted, not rubber stamped (H&SC section 11162.1[a][9]).

Q. Is there a limit to the quantity of controlled substances that can be dispensed at one time (e.g., 540 Vicodin or 25 Duragesic patches)?

A. Neither state nor federal law places limits on the quantity of controlled substances that a prescriber may initially prescribe for a patient. The prescription must be for a legitimate medical purpose with the responsibility of the proper prescribing resting with the prescriber. However, a “corresponding responsibility” rests with the pharmacist who fills the prescription (H&SC section 11153[a]). If in the pharmacist’s judgment there is any uncertainty or question

concerning the prescription, the prescriber must be contacted to validate the prescription (16 CCR section 1761[a]). If after contacting the prescriber, the pharmacist determines that the prescription is not for a legitimate medical purpose, it must not be dispensed (16 CCR section 1761[b]).

Q. If a fax is received from a prescriber’s fax machine for a controlled substance, is an electronic or digital signature of the prescriber sufficient, or do I need to call the prescriber to verify and then treat it as a verbal prescription?

A. If the fax received at the pharmacy was an image of a Schedule III, IV, or V controlled substance original prescription, a handwritten signature of the prescriber is required (21 CFR 1306.05[d]). The electronic signature is insufficient in this instance and would require the pharmacist to treat the prescription as an oral prescription.

Q. If a fax is received for a non-controlled substance, is an electronic signature of the prescriber sufficient, or must I call the prescriber for confirmation?

A. If the prescription was received at the pharmacy via an electronic device to the pharmacy fax machine, it is considered an “electronic data prescription,” and a digital or electronic prescriber signature is valid (B&PC section 4040[c]).

Q. Can a pharmacist dispense a prescription faxed to the pharmacy by a patient?

A. B&PC section 4040(c) allows dispensing of a prescription only if the transmission is from a licensed prescriber. However, if the pharmacy wishes to accommodate the faxing of a prescription by a patient, the prescription can be prepared, but dispensed only after the pharmacist has received the original prescription. Presenting the original prescription at time of dispensing complies with current law.

Q. Occasionally, our out-patient pharmacy receives prescriptions written entirely in another language, usually Spanish. Is there some regulation prohibiting this?

A. Yes. Upon receipt of a prescription that contains any uncertainty, the pharmacist must contact the prescriber for clarification (16 CCR section 1761[a]). Additionally, B&PC section 11 states: “Writing includes any form of recorded message capable of comprehension by ordinary visual means. Whenever any notice, report, statement, or record is required by this code, it shall be made in writing in the English language unless it is otherwise expressly provided.” A prescription is considered to be a “record.”

President's Message

Continued from Page 2

us. To find out about the meetings, go to www.pharmacy.ca.gov and click on "About the Board," then "Public Meetings," and then look for "Compounding Subcommittee Meetings." Or join our email alert system. Remember that all Board-licensed facilities must already be subscribers to this system.

And finally, this is the last issue of *The Script* written and edited by Hope Tamraz. Ms. Tamraz has been the newsletter editor since 1990 and she continued to serve in this function as a retired annuitant until mid-2012. We are grateful for her dedicated work over the years, and thank Hope for her continuing efforts to get the newsletter

ready for publication. You are an institution around here, Hope! Thank you for your work -- you have left really big shoes to fill.

www.pharmacy.ca.gov

Two New Posters

Continued from Page 4

Interpreter services are available to you upon request at no cost.

Before taking your medicine, be sure you know: the name of the medicine and what it does; how and when to take it, for how long, and what to do if you miss a dose; possible side effects and what you should do if they occur; whether the new medicine will work safely with other medicines or supplements; and what foods, drinks, or activities should be avoided while taking the medicine. Ask the pharmacist if you have any questions.

This pharmacy must provide any medicine or device legally prescribed for you, unless it is not covered by your insurance; you are unable to pay the cost of a copayment; or the pharmacist determines doing so would be against the law or potentially harmful to health. If a medicine or device is not immediately available, the pharmacy will work with you to help you get your medicine or device in a timely manner.

You may ask this pharmacy for information on drug pricing and of generic drugs.

- (c) Every pharmacy, in a place conspicuous to and readable by a prescription drug consumer, at or adjacent to each counter in the pharmacy where dangerous drugs are dispensed or furnished, shall post or provide a notice containing the following text:

Point to your language. Interpreter services will be provided to you upon request at no cost.

This text shall be repeated in at least the following languages: Arabic, Armenian, Cambodian, Cantonese, Farsi, Hmong, Korean, Mandarin, Russian, Spanish, Tagalog, and Vietnamese.

Each pharmacy shall use the standardized notice provided or made available by the board, unless the pharmacy has received prior approval of another format or display methodology from the board. The board may delegate authority to a committee or to the Executive Officer to give the approval.

The pharmacy may post this notice in paper form or on a video screen if the posted notice or video screen is positioned so that a consumer can easily point to and touch the statement identifying the language in which he or she requests assistance. Otherwise, the notice shall be made available on a flyer or handout clearly visible from and kept within easy reach of each counter in the pharmacy where dangerous drugs are dispensed or furnished, available at all hours that the pharmacy is open. The flyer or handout shall be at least 8 1/2 inches by 11 inches.

Board honors pharmacists registered for at least 50 years

In an ongoing feature of *The Script*, the Board of Pharmacy pays tribute to those who have been registered California pharmacists on active status for at least 50 years. The Board recognizes these individuals and gratefully acknowledges their years of contribution to the pharmacy profession. These pharmacists may take great pride in being part of such an ancient and honorable profession for so long.

Pharmacists who recently received a certificate commemorating 50 years of service and were invited to attend future Board meetings to be publicly honored are:

<i>Alstrom, Charles E.</i>	<i>Fresno, CA</i>
<i>Ando, Allen</i>	<i>San Jose, CA</i>
<i>Arnold, Jr., Olice</i>	<i>Los Angeles, CA</i>
<i>Auslander, Aaron</i>	<i>Tarzana, CA</i>
<i>Baylerian, Richard H.</i>	<i>Northville, MI</i>
<i>Bendahan, David Jay</i>	<i>Sacramento, CA</i>
<i>Bender, Donald J.</i>	<i>Frazier Park, CA</i>
<i>Bennett, Robert H.</i>	<i>Upland, CA</i>
<i>Bica, Joseph L.</i>	<i>Lincoln, CA</i>
<i>Brue, Wilmer T.</i>	<i>Oakland, CA</i>
<i>Carruthers, Jr., K. Scott</i>	<i>Temple City, CA</i>
<i>Cathey, Walter G.</i>	<i>Los Angeles, CA</i>
<i>Cheung, Alan M.</i>	<i>Rockville, MD</i>
<i>Chun, Richard</i>	<i>Livermore, CA</i>
<i>Crawford, Jr., Harold F.</i>	<i>Fontana, CA</i>
<i>Eberhardt, Glenn W.</i>	<i>Glendale, CA</i>
<i>Ensminger, Lorin W.</i>	<i>Glendale, CA</i>
<i>Farina, Morton B.</i>	<i>Rancho Mirage, CA</i>
<i>Fereira, William J.</i>	<i>San Rafael, CA</i>
<i>Finley, Richard R.</i>	<i>San Rafael, CA</i>
<i>Fisher, Karen E.</i>	<i>Ketchum, ID</i>
<i>Foster, David B.</i>	<i>Bakersfield, CA</i>
<i>Foster, Wayne R.</i>	<i>Modesto, CA</i>
<i>Fuller, John T.</i>	<i>South Pasadena, CA</i>
<i>Gascon, Martha</i>	<i>Oceanside, CA</i>
<i>George, William R.</i>	<i>Dos Palos, CA</i>
<i>Goldstein, Margot H.</i>	<i>San Francisco, CA</i>
<i>Greenberg, Leonard</i>	<i>Murrieta, CA</i>
<i>Haimov, Kathleen</i>	<i>Los Alamitos, CA</i>
<i>Hasson, Edward</i>	<i>Granada Hills, CA</i>
<i>Jacobs, Norman J.</i>	<i>Encino, CA</i>
<i>Jeong, Florence Hidey</i>	<i>Crockett, CA</i>
<i>Johnson, Merrill A.</i>	<i>La Jolla, CA</i>
<i>Johnson, Nathan L.</i>	<i>Los Angeles, CA</i>
<i>Jong, Cleo M.</i>	<i>Los Altos, CA</i>
<i>Keller, Harold</i>	<i>San Diego, CA</i>
<i>Kelly, Gerald J.</i>	<i>San Luis Obispo, CA</i>
<i>King, Richard M.</i>	<i>Pleasant Grove, UT</i>
<i>Kleinberg, Martin I.</i>	<i>Camarillo, CA</i>
<i>Kosobayashi, Douglas Y.</i>	<i>Arcadia, CA</i>
<i>Kubota, James K.</i>	<i>San Dimas, CA</i>
<i>Larowe, Janet M.</i>	<i>Durango, CO</i>
<i>Lee, Jimmy</i>	<i>Fresno, CA</i>
<i>Lee, Raymond K.</i>	<i>Walnut Creek, CA</i>

<i>Leong, Arnold</i>	<i>San Mateo, CA</i>
<i>Lewis, Jr., John T.</i>	<i>Chico, CA</i>
<i>Lewinter, Edward</i>	<i>Woodland Hills, CA</i>
<i>Liddell, James B.</i>	<i>La Mesa, CA</i>
<i>Lin, Mildred J.</i>	<i>Montebello, CA</i>
<i>Luchetta, Richard H.</i>	<i>Arcadia, CA</i>
<i>Mansur, Richard W.</i>	<i>San Diego, CA</i>
<i>Marshall, Richard A.</i>	<i>Cambria, CA</i>
<i>Matano, Susumu</i>	<i>Watsonville, CA</i>
<i>Meyer, Carleton</i>	<i>Novato, CA</i>
<i>Morgan William R.</i>	<i>American Fork, UT</i>
<i>Moss, David M.</i>	<i>Los Angeles, CA</i>
<i>Mowery, Donald L.</i>	<i>Upland, CA</i>
<i>Murakami, Kayko K.</i>	<i>Long Beach, CA</i>
<i>Murphy, John C.</i>	<i>La Quinta, CA</i>
<i>Nagafuji, Jerry S.</i>	<i>El Cerrito, CA</i>
<i>Parsons, Mark R.</i>	<i>Santa Maria, CA</i>
<i>Pasquini, Marc J.</i>	<i>San Francisco, CA</i>
<i>Payne, Donald W.</i>	<i>Granada Hills, CA</i>
<i>Pearlman, Stephen N.</i>	<i>Foster City, CA</i>
<i>Peplow, William G.</i>	<i>Glendale, CA</i>
<i>Pollard, Gary D.</i>	<i>Greenview, CA</i>
<i>Postel, Stanley M.</i>	<i>Granada Hills, CA</i>
<i>Quock, Hanford</i>	<i>San Mateo, CA</i>
<i>Rollerson, Clarence W.</i>	<i>Inglewood, CA</i>
<i>Rose, Roger</i>	<i>Seal Beach, CA</i>
<i>Sakamoto, Robert M.</i>	<i>Los Angeles, CA</i>
<i>Schauwecker, Lee G.</i>	<i>El Dorado Hills, CA</i>
<i>Schwartz, John C.</i>	<i>Sonora, CA</i>
<i>Shatsky, Fred</i>	<i>San Diego, CA</i>
<i>Sheldon, Samuel R.</i>	<i>Los Angeles, CA</i>
<i>Shupps, Charles M.</i>	<i>Simi Valley, CA</i>
<i>Skacan, William F.</i>	<i>San Pedro, CA</i>
<i>Solomon, Joel T.</i>	<i>Canoga Park, CA</i>
<i>Spencer, Jay I.</i>	<i>Westminster, CA</i>
<i>Stewart, Jody A.</i>	<i>Carmichael, CA</i>
<i>Takahashi, Albert Y.</i>	<i>San Jose, CA</i>
<i>Tamura, June Masumi</i>	<i>Altadena, CA</i>
<i>Toomajian, Robert M.</i>	<i>Long Beach, CA</i>
<i>Tsukamoto, John C.</i>	<i>San Francisco, CA</i>
<i>Uyeda, Bruce K.</i>	<i>Mountain View, CA</i>
<i>Vasconi, Mario L.</i>	<i>St. Helena, CA</i>
<i>Venegas, Robert M.</i>	<i>Sacramento, CA</i>
<i>Whitacre, Jerry D.</i>	<i>Long Beach, CA</i>
<i>Whitaker, Irvin W.</i>	<i>Sebastopol, CA</i>
<i>White, Harry L.</i>	<i>Mesa, AZ</i>
<i>Wong, Albert Y. M.</i>	<i>Los Angeles, CA</i>
<i>Wong, Mann B.</i>	<i>Moraga, CA</i>
<i>Yamaga, Lucky S.</i>	<i>Costa Mesa, CA</i>
<i>Yee, Chester D.</i>	<i>Redwood City, CA</i>
<i>Yee, Edwin</i>	<i>Moraga, CA</i>
<i>Yee, Michael F.</i>	<i>Fremont, CA</i>

Honored 50-year pharmacists

Continued from Page 14

The first of three 50-year pharmacist honorees who were welcomed to the May 2012 Board meeting in Loma Linda was **G. Warren Newton**, PharmD, of Temecula.

President Weisser and former board member Stan Goldenberg joined in recognizing Dr. Newton, a USC graduate and registered pharmacist since 1961. During his career, Dr. Newton owned the Temple City Professional Pharmacy, Dow Rx, and Independent Rx L.T.C. Dr. Newton received his 50-year pharmacist pin from President Weisser.



G. Warren Newton

President Weisser recognized and presented a 50-year pin to **John Drum**, B.S., who graduated from Ohio State University and became a licensed



John Drum

pharmacist in 1961. A truly pharmacist family, Mr. Drum has two children who are pharmacists and one who is a pharmacy technician. He was owner of two pharmacies during his career: D & R Drug and Drum Pharmacy.

A Board of Pharmacy inspector, **Robert Venegas**, PharmD, graduated from USC and became a licensed



Robert Venegas

pharmacist in 1962, thereafter working as an independent pharmacist before becoming an inspector for the Board. Dr. Venegas was recognized by the executive officer, Virginia Herold, for both his 50 years of service as a pharmacist and 18 years as an inspector for the Board. Ms. Herold presented Dr. Venegas with a copy of his original pharmacist application picture.

At the July 2012 Board meeting in Sacramento, three honorees received 50-year pharmacist pins: David J. Bendahan, Albert Takahashi, and Jodi Stewart.

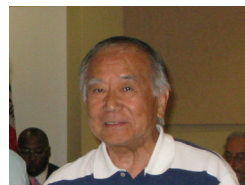
David Bendahan earned his pharmacy degree at Idaho State University



David Bendahan

in 1962 and spent most of his career working in retail pharmacy, the last 15 years of which were at Raley's/Bel Air pharmacies.

A graduate of the University of Colorado, **Albert Takahashi** began his pharmacy career



Albert Takahashi

as an intern pharmacist at the VA Hospital in Palo Alto and began working in retail pharmacy after obtaining his pharmacist license in 1962. He spent the last 17 years of his career working for Safeway in San Jose.

Jodi Stewart graduated from the University of Wyoming, where she was one of only three women pharmacists out



Jodi Stewart

of a graduating class of about 30. She began her career as an intern pharmacist at Raley's in 1960. She worked for ten years as the

pharmacy manager for Raley's at Fair Oaks, and in 1972 went on to become director of pharmacy operations for Raley's/Bel Air.

President Weisser honored two 50-year pharmacists at the October 2012 Board meeting.

John Fuller graduated from pharmacy school in 1958. He worked

for Thrifty Drug Store in Los Angeles for nine years and then went on to own his own pharmacy for 35 years.



John Fuller

For the past 12 years, Mr. Fuller has been a pharmacist consultant for the state.

Charles Alstrom was also recognized by President Weisser as being a licensed



Charles Alstrom

pharmacist in California for 50 years. Mr. Alstrom received his pharmacist license in 1962 and joined his father in business at College

Pharmacy in Fresno, where his father had been in business since 1937. Mr. Alstrom continued in business until 2005, when he became semi-retired.

CE hours are awarded for attending one day of a Pharmacy Board or Board Committee meeting

Continuing education (CE) hours are awarded to encourage pharmacists and pharmacy technicians to learn more about the issues and operation of the Board. These hours can be earned by:

- Attending one full day of a Board meeting per year (maximum of six hours of CE per year); or
- Attending a one-day committee meeting (two hours of CE for each of two different committee meetings—maximum of four hours per year).

Note: It is the pharmacy technician's responsibility to determine from the Pharmacy Technician Certification Board how many, if any, of the above hours are acceptable for recertification with that board. Recertification is NOT a requirement of the California State Board of Pharmacy for pharmacy technician license renewal.

Board of Pharmacy meetings are held at least four times per year: typically January, April, July and October. There are four committees that usually hold public meetings prior to each Board meeting:

- Enforcement Committee—Makes recommendations to the Board regarding oversight of all regulatory and enforcement activities to strengthen consumer protection.
- Licensing Committee—Makes recommendations to the Board regarding the development of standards for the professional qualifications of licensees.
- Legislation and Regulation Committee—Advocates legislation and recommends regulations that advance the vision and mission of the Board to improve the health and safety of Californians.
- Communication and Public Education Committee—Prepares information to improve consumer awareness and licensee knowledge.



Attendance at these meetings provides an opportunity to participate in the development of policies that will guide the Board in its decision-making. Frequently, both statutory and regulatory texts are formulated at such meetings, modifications to current programs are developed, and evidence-based decisions are made.

Board or committee meetings are held in various locations throughout California to give the public and licensees the opportunity to attend. No reservations are needed: you simply arrive at the meeting location at the start of the meeting. For Board meetings, only one day is designated as eligible for CE: this is specified on the agenda. To obtain CE credit for attending committee meetings, attendees must arrive at the designated start of the meeting and register on the CE sign-in sheet, and sign out when they leave.

The remaining Board meeting dates and locations for 2013 are:

- **April 24-25**
- **July 30-31**
- **October 29-30**

Additional information regarding the dates, locations, and agendas for Board and committee meetings will be posted on the Board's Web site, www.pharmacy.ca.gov/about/meetings.htm, at least 10 days prior to each meeting. Also, about five days before each meeting, you may download meeting information packets that contain background information and action items that will be discussed during the meeting.

Changes in the Board

Officers

At the May 2012 Board meeting, Board officers for the coming year were elected: Stanley C. Weisser was re-elected president; Randy B. Kajioka was re-elected vice-president; and Gregory N. Lippe was re-elected treasurer.

Reappointed Members

On June 1, 2012, Governor Edmund G. Brown, Jr. reappointed two public members of the Board: Ryan L. Brooks of San Francisco and Gregory N. Lippe of Woodland Hills. Terms for both will expire June 1, 2016.

New Members

The Board welcomes three new pharmacist members.

Amarylis (Amy) Gutierrez, PharmD of Trabuco Canyon and Albert C.M. Wong, PharmD of Orinda were appointed by



Amy Gutierrez

Governor Brown on June 1, 2012. Victor Law of Los Angeles was appointed by Governor Brown on August 29, 2012.

From 1984 to 2006, Dr. Gutierrez served in multiple positions with the Los Angeles County Department of Health Services, and since that time has served as chief pharmacy officer and director of pharmacy with that agency.

Dr. Gutierrez served as leadership pod advisor at the California Healthcare Foundation's Health Leadership Fellowship Program from 2007 to 2009. She has been an adjunct professor of clinical pharmacy at the University of Southern California, School of Pharmacy, since 2002 and adjunct professor of pharmacy at Western University College of Pharmacy since 2010.

Dr. Gutierrez earned a Doctorate of Pharmacy degree from the University of

Southern California, School of Pharmacy. Her term will expire June 1, 2016.

Dr. Wong was employed as an intern and pharmacist at Kaiser Hospital in San Francisco from 1976 to 1979 and has been a co-owner of Oakland Pharmacy Inc. since 1980. From 1980 to 1983, he also served as pharmacist at the Oakland Children's Hospital Medical Center.



Albert Wong

Dr. Wong earned a Doctorate of Pharmacy degree from the University of California, San Francisco School of Pharmacy. His term will expire June 1, 2016.

Victor Law of Los Angeles has been appointed to the California State Board of Pharmacy by Governor Edmund G. Brown, Jr.



Victor Law

Mr. Law has been chief pharmacist and president at Alpha Medical Pharmacy, Inc. since 1987. From 1982 to 1986, Mr. Law held several positions at Thrifty Corporation, including pharmacy manager and staff pharmacist. Law was a staff pharmacist for Sav-On Pharmacy from 1979 to 1981.

Mr. Law has been a member of the California Pharmacists Association (CPHA) since 1982 and has served as president of the San Gabriel Valley Chapter. He has been chairman of the United Pharmacists Network, Inc. (UPNI) since 2006 and serves as chairman of the board for the Garfield Medical Center in Monterey Park. Mr. Law is also a member of the governing board for the San Gabriel Valley Medical Center and the National Community Pharmacists Association

(NCPA), and served on the Dean's Advisory Board of the Western University of Health Science Pharmacy School.

Mr. Law earned his Bachelor of Pharmacy degree from the University of Oklahoma in 1976. His term will expire on June 1, 2016.

Departing Members

Anil "Neil" Badlani, RPh, recently completed his term on the Board after nearly two years as a professional member.

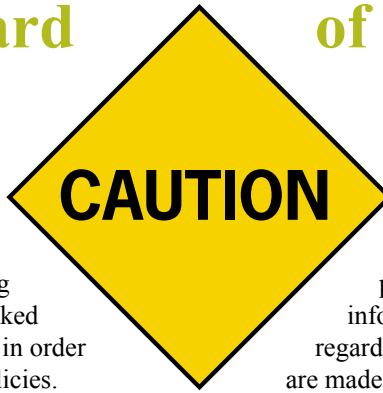
Mr. Badlani was appointed to the Board in December 2010 by Governor Schwarzenegger. During his tenure he served on the Board's Enforcement and Licensing Committees and the USP Standards Reference Material Subcommittee. He was a fully engaged member in implementation of the patient-centered prescription container regulations and in the board's compounding regulations.

FDA Guidelines

Continued from Page 1

Note: The change in MedGuide distribution does not affect the dispensing of Patient Package Inserts (PPIs) for drug products containing estrogen. PPIs contain information concerning the drug's benefit and risk and are to be dispensed in acute-care or long-term care facilities to the patient before administration of the first estrogen and every 30 days thereafter, as long as the therapy continues (Title 21, Code of Federal Regulations section 310.515). PPIs are placed inside the package of every prescription drug.

Fake Board Telephone of Pharmacy Inquiries



The Board was recently informed that more than one California pharmacy has received a fraudulent telephone call from someone claiming to be an inspector representing the California Board of Pharmacy. The callers asked for information regarding the pharmacy’s owner in order to mail out information about new issues and policies.

Such calls are fake and NOT from the Board of Pharmacy. Requests by the Board for personal information regarding a licensee are made in writing.

The calls appear to be from an overseas call center. The calling number is blocked, the callers have heavy accents, and there is a time lag before a person comes on the line. Upon being asked for a call-back number, the callers immediately end the call.

All calls requesting personal information should be viewed as suspicious until the caller’s identity and purpose are verified.



www.pharmacy.ca.gov

Prescriber Signature Requirements

Continued from Page 5

Type of Transmission	Sent From	To	Type of Signature
<i>Electronic Image (Facsimile) Transmission (Schedules III-V)</i>	Prescriber’s Fax Machine	Pharmacy’s Fax	Hand-Written Prescriber Signature Required / Not Preprinted or Rubber-Stamped
<i>Electronic Data Transmission * (Schedules II – V)</i>	Prescriber’s Computer or Other Electronic Device *	Pharmacy’s Computer *	Electronic / Digital Prescriber Signature Required *
<i>Electronic Image (Facsimile) OR Data Transmission for Non-Controlled Prescriptions</i>	Prescriber’s Computer or Fax Machine	Pharmacy’s Computer or Fax Machine	Handwritten, Preprinted, or Rubber Stamped / Electronic or Digital Prescriber Signature

* Must meet all the Federal requirements of the DEA Interim Final Rule, 21 CFR 1300 et seq. (see DEA Interim Final Rule, Question and Answers on DEA Interim Final Rule on Electronic Prescribing and Receiving Controlled Substance Prescriptions, The Script July 2011).

Electronic Image (fax) prescriptions for Schedules III, IV, or V, are required by Health and Safety Code section 11164(b) to be produced in hard copy form and signed and dated by the pharmacist filling the prescription and the hard copy must include the date of issue and all information required for a written prescription. Electronic Data

prescriptions are not required to be printed but must meet the DEA Interim Final Rule requirements for receiving, annotating, and archiving the prescription record electronically. In either instance, both the transmitting prescriber and the receiving pharmacist must ensure the security, integrity, authority, and confidentiality of the electronically transmitted prescription.

Moreover, a pharmacist has an affirmative obligation to verify electronic image and data prescriptions when appropriate to do so, regardless of the form in which it is received.

Explanation of Disciplinary Terms

Effective Date of Action—the date the disciplinary action goes into operation.

Revocation or Revoked—the license is revoked as a result of disciplinary action by the Board, and the licensee’s right to practice or operate a Board-licensed entity is ended.

Revoked, Stayed—the license is revoked, but the revocation is postponed until the Board determines whether the licensee has failed to comply with specific probationary conditions, which may include suspension of the licensee’s right to practice.

Stipulated Settlement—the board and a licensee mutually agree to settle a disciplinary case brought by the board by way of a settlement agreement.

Stayed—the revocation or suspension action is postponed, and the licensee is put on probation.

Probation—the licensee may continue to practice or operate a Board-licensed entity under specific terms and conditions for a specific period of time.

Voluntary Surrender—the licensee has agreed to surrender his or her license, and the right to practice or operate Board-licensed entity is ended. The board may agree to accept the surrender of a license through a “stipulation” or agreement.

Suspension—the licensee is prohibited from practicing or operating a Board-licensed entity for a specific period of time.

Suspension/Probation—the licensee is prohibited from practicing or operating a Board-licensed entity for a specific period of time, and the right to practice or operate is contingent upon meeting specific terms and conditions during the probationary period.

PC 23 Order Issued—the licensee is restricted from practicing or operating a Board-licensed entity by a court order that is issued under the provisions of Penal Code section 23.

Public Reprimand or Repeal—resulting from a disciplinary action, the licensee is issued a letter of public reprimand.

Accusation Filed—an accusation is the document containing the charges and allegations filed when an agency is seeking to discipline a licensee.

Reinstatement of License—a previously revoked or suspended license is reinstated with specified terms and conditions.

Statement of Issues—a legal document that details the factual or legal basis for refusing to grant or issue a license.

Disciplinary Actions

The following licenses were disciplined through actions taken by the Board from January 11, 2012 to July 5, 2012. To view details of the enforcement actions, probation terms and conditions of each case, go to the Board’s Web site, www.pharmacy.ca.gov, and from the “Quick Hits” menu, select “Enforcement Actions.”

Pharmacists

Arnold, John Harold, RPH 29852, Mammoth Lakes, CA—Case AC 3186

By Stipulated Settlement, license was revoked, revocation stayed and placed on 30 months’ probation and ten days’ suspension, subject to terms and conditions that include but not limited to: completing 100 hours of community service within the first year of probation; cannot supervise any intern pharmacist, perform preceptor duties or be

PIC; no ownership of any Board-licensed entity; and must successfully complete an approved remedial education program and an approved ethics course.

Decision effective 04/12/2012

Atiya, Fadi Wasef, RPH 45978, San Diego, CA—Case AC 3487

By Stipulated Settlement, license was revoked, revocation stayed and placed on five years’ probation and one year’s suspension, subject to terms and conditions that include but not limited to: practice must be supervised; no ownership of any Board-licensed entity; completing 100 hours of community service per year for first three years of probation; cannot supervise any intern pharmacist, perform preceptor duties or be PIC; must pass the California Pharmacist Jurisprudence Examination; and complete an approved ethics course.

Decision effective 06/07/2012

Beresford, Eric J., RPH 49692, Somerset, NJ—Case AC 3741

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 05/25/2012

Berger, Arthur H., RPH 30997, Los Angeles, CA—Case AC 3747

By Stipulated Settlement, license was revoked, revocation stayed and placed on five years’ probation, subject to terms and conditions that include but not limited to: completing 100 hours of community service within the first three years of probation; cannot supervise any intern pharmacist, perform preceptor duties or be PIC; no ownership of any Board-licensed entity; and must successfully complete an approved ethics course.

Decision effective 03/28/2012

Disciplinary Actions

Continued from Page 19

**Budman, Lynda J., RPH 52444,
Huntington Beach, CA—Case AC 3849**

By Stipulated Settlement, license was revoked, stayed and placed on five years' probation, subject to terms and conditions that include but not limited to: 60 days' suspension; cannot supervise any intern pharmacist, perform preceptor duties; or be pharmacist-in-charge; practice must be supervised; no ownership of any Board-licensed entity; and must successfully complete an approved ethics course.

Decision effective 03/09/2012

**Charles, Robert Antoine, RPH 51100,
Los Angeles, CA—Case AC 3539**

By Stipulated Settlement, license was revoked, stayed and placed on four years' probation, subject to terms and conditions that include but not limited to: must complete 200 hours of community service; cannot supervise any intern pharmacist, perform preceptor duties, or be pharmacist-in-charge; no ownership of any Board-licensed entity; and must successfully complete a remedial education program.

Decision effective 04/02/2012

**Chung, Keith, RPH 50486,
Downey, CA—Case AC 3716**

By Stipulated Settlement, license was revoked.

Decision effective 01/11/2012

**Davis, Lisa F., RPH 42690,
Moreno Valley, CA—Case AC 3868**

By Stipulated Settlement, license was revoked, revocation stayed and placed on five years' probation and 90 days' suspension, subject to terms and conditions that include but not limited to: completing 150 hours of community service; cannot supervise any intern pharmacist, perform preceptor duties or be PIC; practice must be supervised; no ownership of any Board-licensed entity; and must successfully complete an approved remedial education program and an approved ethics course.

Decision effective 04/12/2012

**Dinulos, Divina Gracia Rena,
RPH 59466,
Redwood Shores, CA—Case AC 4124**

By Stipulated Settlement, license was revoked, revocation stayed and placed on five years' probation and 90 days' suspension, subject to terms and conditions that include but not limited to: completing 100 hours of hours of community service for each year of probation (500 hours total); cannot supervise any intern pharmacist, perform preceptor duties or be PIC; no ownership of any Board-licensed entity; and must successfully complete an approved ethics course.

Decision effective 06/07/2012

**Ellwood, Stephen D., RPH 59873,
Killeen, TX—Case AC 3939**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 03/28/2012

**Faast, Lisa Marie, RPH 52905,
Bakersfield, CA—Case AC 3781**

By Stipulated Settlement, license was revoked, revocation stayed and placed on three years' probation, subject to terms and conditions that include but not limited to: cannot supervise any intern pharmacist; may be a PIC with consultant; cannot be a designated representative-in-charge nor serve as consultant; and must successfully complete an approved ethics course.

Decision effective 04/23/2012

**Faucher, Douglas, RPH 37890,
Chula Vista, CA—Case AC 4030**

By Stipulated Settlement, license was revoked, stayed and placed on five years' probation, subject to terms and conditions that include but not limited to: must complete 150 hours of community service; cannot supervise any intern pharmacist, perform preceptor duties, or be pharmacist-in-charge; practice must be supervised; no ownership of any Board-licensed entity; and must successfully complete an approved ethics course.

Decision effective 03/09/2012

**Forest, Alice Yang, RPH 50114,
Chino Hills, CA—Case AC 3713**

By Stipulated Settlement, license was revoked, revocation stayed and placed on three years' probation, subject to terms and conditions that include but not limited to: completing 150 hours of community service within first two years of probation; cannot supervise any intern pharmacist, perform preceptor duties or be PIC; no ownership of any Board-

licensed entity; and must successfully complete an approved remedial education program.

Decision effective 06/07/2012

**Glasscock, Bruce Thomas, RPH 43601,
Modesto, CA—Case AC 3931**

By Stipulated Settlement, license was revoked, revocation stayed and placed on five years' probation, 180 days' suspension with credit for suspension already served, subject to terms and conditions that include but not limited to: completing 100 hours of community service; cannot supervise any intern pharmacist, perform preceptor duties or be PIC; no ownership of any Board-licensed entity; practice must be supervised; and must successfully complete an approved ethics course.

Decision effective 04/23/2012

**Gomes, Mario Anthony, RPH 44363,
Yuba City, CA—Case AC 3497**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 04/23/2012

**Greenlee, James A., RPH 48842,
Chico, CA—Case AC 3729**

By Stipulated Settlement, license was revoked, revocation stayed and placed on four years' probation, subject to terms and conditions that include but not limited to: completing 250 hours of community service; practice must be supervised; cannot supervise any intern pharmacist, perform preceptor duties or be PIC; no ownership of any Board-licensed entity; and must successfully complete an approved ethics course.

Decision effective 04/12/2012

**Higley, Mary Pat, RPH 37064,
Newport Beach, CA—Case CA 4174**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 05/04/2012

**Hong, Jin, RPH 52141,
Bakersfield, CA—Case AC 3694**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 03/09/2012

**Jones, Darek T., RPH 59702,
Pacific Grove, CA—Case AC 3813**

By Stipulated Settlement, license was revoked, stayed and placed on five years' probation, subject to terms and conditions that include but not

Disciplinary Actions

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limited to: 90 days' suspension from practice; must complete 100 hours of community service per year for the first three years of probation; cannot supervise any intern pharmacist, perform preceptor duties, or be PIC; practice must be supervised; must complete an approved ethics course; and no ownership of any Board-licensed entity.

Decision effective 05/18/2012

**Juliana, Ronald Saby, RPH 28127,
Stockton, CA—Case AC 3435**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 01/11/2012

**Kho, Yin Tat William, RPH 49713,
Fullerton, CA—Case AC 3860**

By Stipulated Settlement, license was revoked, stayed and placed on four years' probation, subject to terms and conditions that include but not limited to: must complete 100 hours of community service for each year of probation; cannot supervise any intern pharmacist, perform preceptor duties, or be PIC; practice must be supervised; must complete an approved ethics course; and no ownership of any Board-licensed entity.

Decision effective 05/04/2012

**Lee, Michael Myung Y., RPH 44619,
Montebello, CA—Case AC 3823**

By Stipulated Settlement, license was revoked, stayed and placed on three years' probation, subject to terms and conditions that include but not limited to: must complete 100 hours of community service; cannot supervise any intern pharmacist or perform preceptor duties; may be pharmacist-in-charge with a consultant pharmacist; must complete a remedial education program; and no ownership of any Board-licensed entity.

Decision effective 03/09/2012

**Mantese, Gary V., RPH 47841,
St. Louis, MO—Case AC 4141**

By Default Decision, license was revoked.

Decision effective 05/18/2012

**Markarian, Serj, RPH 54284,
Burbank, CA—Case AC 3601**

By Stipulated Settlement, license

was revoked, revocation stayed and placed on five years' probation and 60 days' suspension, subject to terms and conditions that include but not limited to: completing 60 hours of community service per year for the first three years of probation; cannot supervise any intern pharmacist, perform preceptor duties or be PIC; no ownership of any Board-licensed entity; and must successfully complete an approved ethics course.

Decision effective 06/07/2012

**Mason, Hannah, RPH 46923,
Lancaster, CA—Case AC 4207**

Through a disciplinary action of the Board, the license is revoked, the revocation is stayed and the license is placed on probation for four years. The terms and conditions of probation are cannot supervise any intern pharmacist, perform preceptor duties or be PIC, provide a testimonial letter, no ownership of any Board-licensed entity,

Decision effective 4/23/2012.

**Michaud, Denys J., RPH 26275,
Napa, CA—Case AC 4116**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 03/16/2012

**Mumbert, William J., RPH 48782,
Tahoe City, CA—Case AC 4148**

By Default Decision, license was revoked.

Decision effective 04/12/2012

**Ng, John Waito, RPH 33438,
Fremont, CA—Case AC 3969**

By Stipulated Settlement, license was revoked, revocation stayed and placed on five years' probation, seven days' suspension, subject to terms and conditions that include but not limited to: completing 250 hours of community service; cannot supervise any intern pharmacist, perform preceptor duties or be PIC; practice must be supervised; no ownership of any Board-licensed entity; and must successfully complete an approved remedial education program and an approved ethics course.

Decision effective 04/23/2012

**Nishi, Norman Tadayoshi, RPH 25974,
Manhattan Beach, CA—Case AC 4249**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 04/12/2012

**Patel, Gita, RPH 31173,
Norwalk, CA—Case AC 3358**

By Stipulated Settlement, license was revoked, revocation stayed and placed on three years' probation, subject to terms and conditions that include but not limited to: completing 100 hours of community service for each year of probation; cannot supervise any intern pharmacist or perform preceptor duties; may be PIC with consultant; no ownership of any Board-licensed entity; and must successfully complete 10 hours of remedial pharmacy education each year of probation; maintain separate files of acquisition and disposition of controlled substances.

Decision effective 06/25/2012

**Pustilnikova, Irina, RPH 57750,
Sherman Oaks, CA—Case AC 3943**

By Stipulated Settlement, license was revoked, revocation stayed and placed on five years' probation, subject to terms and conditions that include but not limited to: completing 50 hours of community service for each year of probation; cannot supervise any intern pharmacist, or perform preceptor duties; may be PIC with consultant; no ownership of any Board-licensed entity; and must successfully complete an approved ethics course.

Decision effective 05/18/2012

**Rishwain, Tim, RPH 38329,
Stockton, CA—Case AC 4102**

By Decision after a hearing before an Administrative Law Judge, license was revoked. A Petition for Reconsideration was denied.

Decision effective 05/29/2012

**Rutan, Joyce Lynn, RPH 28387,
Stockton, CA—Case AC 3492**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 01/11/2012

**Shalaby, Samy G., RPH 49746,
Culver City, CA—Case AC 3869**

By Stipulated Settlement, license was revoked, revocation stayed and placed on five years' probation, subject to terms and conditions that include but not limited to: completing 200 hours of community service; cannot supervise any intern pharmacist, perform preceptor duties or be PIC; practice must be supervised; no

Disciplinary Actions

Continued from Page 21

ownership of any Board-licensed entity; and must successfully complete an approved ethics course. Decision effective 04/23/2012

Smith, Christopher John, RPH 44647, Newbury, CA—Case AC 3779

By Stipulated Settlement, license was revoked, revocation stayed and placed on five years' probation, subject to terms and conditions that include but not limited to: completing 150 hours of community service; cannot supervise any intern pharmacist, perform preceptor duties or be PIC; and no ownership of any Board-licensed entity.

Decision effective 04/23/2012

Song, James, RPH 42830,

Los Angeles, CA—Case AC 3653

By Stipulated Settlement, license was revoked, stayed and placed on five years' probation, subject to terms and conditions that include but not limited to: 60 days' suspension; must complete 150 hours of community service; cannot supervise any intern pharmacist or perform preceptor duties; may be pharmacist-in-charge with a consultant pharmacist; must complete a remedial education program; no ownership of any Board-licensed entity; and must successfully complete an approved ethics course. Decision effective 03/09/2012

Sternberg, Andrew, RPH 32370,

West Hills, CA—Case AC 3377

By Decision after a hearing before an Administrative Law Judge, license was revoked, revocation stayed and placed on three years' probation, subject to terms and conditions that include but not limited to: maintaining separate acquisition and disposition records of controlled substances.

Decision effective 06/25/2012

Tran, Thang Q., RPH 41172,

Huntington Beach, CA—Case AC 3802

By Decision after a hearing before an Administrative Law Judge, license was revoked; a Petition for Reconsideration was granted; but license was revoked.

Decision effective 06/03/2012

Van Ewyk, Mark Gordon, RPH 56848, Kennesaw, GA—Case AC 3910

By Stipulated Settlement, license was voluntarily surrendered.

Decision effective 04/12/2012

Walker, Charles, RPH 32316,

Vallejo, CA—Case AC 3865

By Decision after a hearing before an Administrative Law Judge, license was revoked, revocation stayed and placed on three years' probation, subject to terms and conditions that include but not limited to: cannot supervise any intern pharmacist or perform preceptor duties or be pharmacist-in-charge.

Decision effective 06/22/2012

Weeks, Donald, RPH 38871,

Fallbrook, CA—Case AC 3167

By Stipulated Settlement, license is publicly reprimanded, revoked, revocation stayed and placed on three years' probation, subject to terms and conditions that include but not limited to: completing 160 hours of community service; cannot supervise any intern pharmacist, perform preceptor duties or be PIC; no ownership of any Board-licensed entity; and must successfully complete an approved ethics course.

Decision effective 04/23/2012

Wheeler, Clayton, RPH 28905,

Sebastopol, CA—Case AC 3884

By Default Decision, license was revoked.

Decision effective 01/11/2012

Wong, Hilton, RPH 40772,

Fremont, CA—Case AC 3762

By Stipulated Settlement, license was revoked, stayed and placed on five years' probation, subject to terms and conditions that include but not limited to: cannot supervise any intern pharmacist, perform preceptor duties, or be PIC; practice must be supervised; no ownership of any Board-licensed entity; and must successfully complete an approved remedial education program and an approved ethics course.

Decision effective 03/28/2012

Wong, Howard Hong Wah, RPH 56561,

Walnut, CA—Case AC 3929

By Stipulated Settlement, license was revoked, stayed and placed on five years' probation, subject to terms and conditions that include but not limited to: six months' suspension; must

complete 100 hours of community service per year of probation; cannot supervise any intern pharmacist, perform preceptor duties, or be PIC; practice must be supervised; no ownership of any Board-licensed entity; and must successfully complete an approved ethics course. Decision effective 03/28/2012

Intern Pharmacists

Bagdatyan, Arutyun, Pharmacy Intern applicant, Van Nuys, CA—Case SI 3770

By Decision after a hearing before an Administrative Law Judge, Pharmacy Intern licensure was denied.

Decision effective 01/11/2012

Garcia, Orlando, INT 29354,

Yucaipa, CA—Case SI 3998

By Stipulated Settlement, upon satisfaction of all statutory and regulatory requirements, a license was granted, license revoked, revocation stayed and license placed on two years' probation, subject to terms and conditions that include but are not limited to: must complete 100 hours of community service per year while on probation; practice must be supervised; and must successfully complete an approved ethics course. Decision effective 03/09/2012

Pharmacy Technicians

Agtane, Maricriss Regina, TCH 57222, Union City, CA—Case AC 4084

By Default Decision, license was revoked.

Decision effective 05/04/2012

Almaraz, Cynthia, TCH 47494,

Corona, CA—Case AC 4041

By Default Decision, license was revoked.

Decision effective 03/09/2012

Arakelian, Faranzim, TCH 30530,

Van Nuys, CA—Case AC 3792

By Stipulated Surrender, the license was voluntarily surrendered.

Decision effective 03/22/2012

Armstrong, Jr., David Paul,

TCH 102594,

La Puente, CA—Case AC 4007

By Decision after a hearing before an Administrative Law Judge, license was revoked.

See Disciplinary Actions, Page 23

Disciplinary Actions

Continued from Page 22

Decision effective 06/25/2012

**Arutunyan, Narine, TCH 86550,
Sun Valley, CA—Case AC 4149**

By Default Decision, license was revoked.

Decision effective 03/22/2012

**Assanah, Daron, TCH 81093,
Chino Hills, CA—Case AC 3880**

By Decision after a hearing before an Administrative Law Judge, license was revoked.

Decision effective 06/04/2012

**Bazyar, Mohammad Ali, TCH 104369,
San Jose, CA—Case SI 4091**

By Stipulated Settlement, application for Pharmacy Technician was granted, license was issued and immediately revoked, revocation stayed, and the license was placed on three years' probation, subject to terms and conditions that include but not limited to: no ownership of any Board-licensed entity and needs a worksite monitor.

Decision effective 05/25/2012

**Bernhardt, Teresa H., Pharmacy
Technician Applicant,
Manhattan Beach, CA—Case SI 4001**

By Decision after a hearing before an Administrative Law Judge, the application for registration as Pharmacy Technician is denied.

Decision effective 5/4/2012

**Binnie, Brian C., TCH 43562,
Canyon Country, CA—Case AC 3811**

By Decision after a hearing before an Administrative Law Judge, license was issued and immediately revoked; revocation stayed and the license was placed on three years' probation, subject to terms and conditions that include but not limited to passing the Pharmacy Technician Certification Exam.

Decision effective 03/14/2012

**Brown, Tarah A., TCH 52956,
San Rafael, CA—Case AC 4074**

By Default Decision, license was revoked.

Decision effective 03/22/2012

**Bui, Caden, TCH 110405,
Garden Grove, CA—Case AC 4062**

By Stipulated Surrender, the license was voluntarily surrendered.

Decision effective 03/09/2012

**Butson, Michael J., TCH 56105,
Thousand Oaks, CA—Case AC 3391**

By Default Decision, the license was revoked.

Decision effective 03/09/2012

**Cabida, Jennifer P., Pharmacy
Technician Applicant,
Southgate, CA—Case SI 3950**

By Decision after a hearing before an Administrative Law Judge, the application was denied.

Decision effective 05/25/2012

**Cano, Eunice, TCH 46972,
Downey, CA—Case AC 3544**

By Decision after a hearing before an Administrative Law Judge, license was revoked.

Decision effective 03/30/2012

**Cardenas, Benjamin, Pharmacy
Technician Applicant,
Norwalk, CA—Case SI 3771**

By Default Decision, the application was denied.

Decision effective 06/25/2012

**Cardoni, Stephanie, TCH 91993,
Murrieta, CA—Case AC 4166**

By Default Decision, license was revoked.

Decision effective 06/11/2012

**Carr, Gloria Lucy, TCH 18672,
Santa Ana, CA—Case AC 3809**

By Decision after a hearing before an Administrative Law Judge, license was revoked.

Decision effective 05/25/2012

**Carroll, Ann Marie, TCH 33519,
Tehachapi, CA—Case AC 4118**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 04/23/2012

**Castro, Tommy, TCH 110355,
Fresno, CA—Case SI 4175**

By Stipulated Settlement, the Application for Pharmacy Technician License was granted, license was issued, revoked, revocation stayed and license placed on four years' probation, subject to the terms and conditions that include but are not limited to: passing the Pharmacy Technician Certification Examination; must have worksite monitor; and no ownership of Board-licensed entity.

Decision effective 05/04/2012

**Chau, Mike Duc, TCH 89969,
Alhambra, CA—Case SI 3889**

By Stipulated Settlement, the Application for Pharmacy Technician License was granted, license was

issued, revoked, revocation stayed and license placed on four years' probation, subject to the terms and conditions that include but are not limited to: passing the Pharmacy Technician Certification Examination; must have worksite monitor; no ownership of Board-licensed entity; and must complete 50 hours of community service.

Decision effective 04/23/2012

**Clausen, Kenneth, TCH 94452,
Victorville, CA—Case AC 3896**

By Stipulated Surrender, the license was voluntarily surrendered.

Decision effective 03/16/2012

**Collins, Tina Peaches (aka "Tina
Manteca"), TCH 49633,
Los Angeles, CA—Case AC 3378**

By Default Decision, the license was revoked.

Decision effective 03/09/2012

**Cooper, Kimberly I., TCH 60577,
Daly City, CA—Case AC 4010**

By Default Decision, license was revoked.

Decision effective 04/12/2012

**Coria, Leticia Negrete, TCH 5597,
Panorama City, CA—Case AC 3484**

By Stipulated Settlement, license was revoked.

Decision effective 06/07/2012

**Correa, Steven J., TCH 36611,
Cottonwood, CA—Case AC 3402**

By Default Decision, the license was revoked.

Decision effective 05/18/2012

**Crum, Cynthia R., TCH 44028,
Fontana, CA—Case AC 3977**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 03/16/2012

**Cruz, Michael, TCH 93333,
Vallejo, CA—Case AC 3898**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 04/02/2012

**DeGross, Carrie Michelle, TCH 41348,
San Bernardino, CA—Case AC 3510**

By Default Decision, license was revoked.

Decision effective 04/23/2012

**Dorstad, Jacob, TCH 104943,
Redding, CA—Case AC 4198**

By Default Decision, license was revoked.

Decision effective 05/04/2012

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Disciplinary Actions

Continued from Page 23

**Dunn, Carol Ann, TCH 34054,
Boulder Creek, CA—Case AC 3964**

By Default Decision, license was revoked.

Decision effective 01/11/2012

**Ewing, Karrie, TCH 26413,
Buena Park, CA—Case AC 4132**

By Default Decision, license was revoked.

Decision effective 03/09/2012

**Escoto, Nina Renee, TCH 47598,
Vacaville, CA—Case AC 3723**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 04/23/2012

**Fisher, Darquis K., TCH 108401,
San Francisco, CA—Case SI 4048**

By Stipulated Settlement, license was issued and immediately revoked; revocation stayed and license was placed on three years' probation, subject to terms and conditions that include but not limited to: passing the Pharmacy Technician Certification Exam; must have worksite monitor; and no ownership of any Board-licensed entity.

Decision effective 03/28/2012

**Galaviz, Jennifer Ledoron, TCH 76816,
Chino Hills, CA—Case AC 3924**

By Decision after a hearing before an Administrative Law Judge, license was revoked; revocation stayed and placed on five years' probation, subject to terms and conditions that include but not limited to passing the Pharmacy Technician Certification Examination.

Decision effective 06/15/2012

**Gallegos, Gabriela, TCH 36152,
Lynwood, CA—Case 3928**

By Stipulated Settlement, license was revoked; revocation stayed and license was placed on four years' probation, subject to terms and conditions that include but not limited to: must have worksite monitor; no ownership of any Board-licensed entity; and complete 50 hours of community service for each year of the first three years of probation.

Decision effective 05/25/2012

**Garcia, Jose E., TCH 73658,
Salinas, CA—Case AC 3942**

By Default Decision, license was

revoked.

Decision effective 03/22/2012

**Garcia, Lillian D., TCH 12732,
Garden Grove, CA—Case AC 4075**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 05/25/2012

**Garrett, Jenney Marie, TCH 96428,
Sutter Creek, CA—Case AC 3903**

By Decision after a hearing before an Administrative Law Judge, license was revoked.

Decision effective 01/11/2012

**Graza, Justin S., TCH 99807,
Covina, CA—Case AC 3936**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 03/16/2012

**Hall, Jacqueline M., TCH 63581,
Bakersfield, CA—Case AC 3246**

By Decision after a hearing before an Administrative Law Judge, license was revoked, revocation stayed and license placed on three years' probation, subject to terms and conditions that include but not limited to passing the Pharmacy Technician Certification Exam.

Decision effective 03/28/2012

**Heidary, Steve, Pharmacy Technician
Applicant, Rolling Hills Estates, CA—
Case SI 3994**

By Default Decision, application was denied.

Decision effective 05/04/2012

**Herrera, Steve, TCH 68927,
La Puente, CA—Case AC 3926**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 05/25/2012

**Hughes, Amanda R., TCH 61994,
San Diego, CA—Case AC 3594**

By Default Decision, license was revoked.

Decision effective 03/14/2012

**Hunter, Ailsa Jean, Pharmacy
Technician applicant,
Grover Beach, CA—Case SI 3623**

By Decision after a hearing before an Administrative Law Judge, Pharmacy Technician license was denied.

Decision effective 03/05/2012

**Jackson, Jessica, TCH 61921,
Carson, CA—Case AC 3557**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 03/16/2012

**Javier, Russell R., TCH 72666,
Riverside, CA—Case AC 4079**

By Default Decision, license was revoked.

Decision effective 04/23/2012

**Jensen, Steven L., TCH 82698,
Canyon Country, CA—Case AC 3715**

By Default Decision, license was revoked.

Decision effective 03/09/2012

**Johnson, Tina-Ann, TCH 46701,
Vallejo, CA—Case AC 3661**

By Default Decision, license was revoked.

Decision effective 03/15/2012

**Kolakowski, Angela Lynn, Pharmacy
Technician Applicant,
Modesto, CA—Case SI 4052**

By Decision after a hearing before an Administrative Law Judge, application for Pharmacy Technician registration was denied.

Decision effective 06/25/2012

**Lam, Jimmy B., Pharmacy Technician
applicant,
San Francisco, CA—Case SI 3999**

By Decision after a hearing before an Administrative Law Judge, application for Pharmacy Technician registration was denied.

Decision effective 04/23/2012

**Le-Nghiem, Thao Phuong, TCH 70474,
South Pasadena, CA—Case AC 3386**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 01/11/2012

**Lindsay, Robert Louis, TCH 85304,
Costa Mesa, CA—Case AC 3847**

By Stipulated Settlement, the license was publicly reprovved.

Decision effective 06/28/2012

**Liu, Bailey, TCH 77630,
San Francisco, CA—Case AC 3912**

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 03/16/2012

**Loeh, John Hans, TCH 92661,
Hurst, IL—Case AC 3908**

By Default Decision, license was revoked.

Decision effective 01/11/2012

**Luu, Phillip, TCH 79928,
Winnetka, CA—Case AC 3833**

By Decision after a hearing before an Administrative Law Judge, license was revoked.

Decision effective 03/14/2012

Disciplinary Actions

Continued from Page 24

**Magdaleno, Robert Michael,
TCH 110546,
Stockton, CA—Case SI 4178**

By Stipulated Settlement, license was issued and immediately revoked; revocation stayed and license was placed on three years' probation, subject to terms and conditions that include but not limited to: passing the Pharmacy Technician Certification Exam and no ownership of any Board-licensed entity.
Decision effective 05/18/2012

**Mai, Tony, TCH 98224,
San Diego, CA—Case AC 4021**

By Default Decision, license was revoked.
Decision effective 03/09/2012

**Makasini, Anasilini Ruby, TCH 43918,
Hayward, CA—Case AC 3643**

By Decision after a hearing before an Administrative Law Judge, license was revoked; stayed by order of the court until October 1, 2012; must not perform work that requires a Pharmacy Technician license through October 1, 2012
Decision effective 03/14/2012

**Mananian, Elizabeth, TCH 59117,
Los Angeles, CA—Case AC 3958**

By Default Decision, license was revoked.
Decision effective 04/12/2012

**Martinez, Jonathan, TCH 71595,
South Gate, CA—Case AC 3675**

By Decision after a hearing before an Administrative Law Judge, license was revoked.
Decision effective 06/25/2012

**Mason, Laron W., TCH 69731,
Compton, CA—Case AC 4003**

By Default Decision, license was revoked.
Decision effective 03/26/2012

**Melissetyan, Erlana, TCH 64669,
Fresno, CA—Case AC 4067**

By Default Decision, license was revoked.
Decision effective 03/09/2012

**Mendez, Tanya Renee, TCH 80838,
San Marcos, CA—Case AC 4115**

By Default Decision, license was revoked.
Decision effective 04/12/2012

**Moreland, Christina, TCH 86174,
Corona, CA—Case AC 3900**

By Stipulated Settlement, license was revoked.
Decision effective 05/04/2012

**Moreno, Robert, TCH 96401,
Anaheim, CA—Case AC 4134**

By Default Decision, license was revoked.
Decision effective 03/14/2012

**Moskavian, Shake, TCH 44114,
West Covina, CA—Case AC 3817**

By Default Decision, license was revoked.
Decision effective 06/07/2012

**Nava, Jr., Delfino, Pharmacy Technician
applicant,
Paramount, CA—Case SI 3672**

By Default Decision, Pharmacy Technician license was denied.
Decision effective 03/22/2012

**Orduna, Tisa Monique, TCH 47453,
Culver City, CA—Case AC 3554**

By Decision after a hearing before an Administrative Law Judge, license was revoked.
Decision effective 01/11/2012

**Panopio, Ryan Neil, TCH 110086,
Castro Valley, CA—Case AC 4188**

By Default Decision, license was revoked.
Decision effective 06/07/2012

**Patterson II, Charles Thomas,
TCH 16685,
San Diego, CA—Case AC 4039**

By Default Decision, license was revoked.
Decision effective 06/07/2012

**Pimental, Steven John, TCH 105406,
Simi Valley, CA—Case SI 4002**

By Stipulated Settlement, license was issued and immediately revoked; revocation stayed and license was placed on three years' probation, subject to terms and conditions that include but not limited to: cannot return to practice until passing the Pharmacy Technician Certification Exam; must have worksite monitor; and no ownership of any Board-licensed entity.
Decision effective 04/23/2012

**Pogosyan, Asatur, TCH 42825,
Sun Valley, CA—Case AC 3834**

By Stipulated Settlement, license was revoked; revocation stayed and license was placed on four years' probation, subject to terms and conditions that include but not limited

to: passing the Pharmacy Technician Certification Exam; complete 30 hours of community service per year for the first two years of probation; must have worksite monitor; and no ownership of any Board-licensed entity.
Decision effective 04/23/2012

**Portillo, Nelson Grodoaldo, TCH 74159,
North Hollywood, CA—Case AC 3810**

By Stipulated Surrender, license was voluntarily surrendered.
Decision effective 05/04/2012

**Quintana, Jr., Roberto, TCH 104835,
Modesto, CA—Case AC 4008**

By Default Decision, license was revoked.
Decision effective 06/07/2012

**Raines, David Gianni, TCH 42827,
Madera, CA—Case AC 3906**

By Default Decision, license was revoked.
Decision effective 01/11/2012

**Rivera, Eric Turcuan, TCH 79772,
Carson, CA—Case AC 4017**

By Default Decision, license was revoked.
Decision effective 07/05/2012

**Rockwell, Megan Michelle, TCH 93781,
Lakewood, CA—Case AC 3904**

By Stipulated Surrender, license was voluntarily surrendered.
Decision effective 05/25/2012

**Salimi, Naveed Ashraf, TCH 11230,
Garden Grove, CA—Case AC 3485**

By Default Decision, license was revoked.
Decision effective 06/07/2012

**Sanchez, Daniel Moises, TCH 48039,
Los Angeles, CA—Case AC 3791**

By Decision after a hearing before an Administrative Law Judge, license was revoked.
Decision effective 06/07/2012

**Sanchez, Eber Isai, TCH 56286,
Long Beach, CA—Case AC 3505**

By Stipulated Settlement, license was revoked; revocation stayed and license was placed on three years' probation, subject to terms and conditions that include but not limited to: cannot practice until passing the Pharmacy Technician Certification Exam; complete 50 hours of community service per year within first two years of probation or complete an anger-management

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Disciplinary Actions

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course; must have worksite monitor; and no ownership of any Board-licensed entity.

Decision effective 04/23/2012

Scott, Jerrell Andre, TCH 95574, Desert Hot Springs, CA—Case SI 4000

By Stipulated Settlement, license was issued and immediately revoked; revocation stayed and license was placed on three years' probation, subject to terms and conditions that include but not limited to: cannot practice until passing the Pharmacy Technician Certification Exam; must have worksite monitor; complete 25 hours of community service per year during the first two years of probation; and no ownership of any Board-licensed entity.

Decision effective 04/23/2012

Serhal, Andre Gabriel, TCH 73079, Monrovia, CA—Case AC 3444

By Default Decision, license was revoked.

Decision effective 04/23/2012

Sheppard, Joseph A., TCH 61325, Rocklin, CA—Case AC 3561

By Decision after a hearing before an Administrative Law Judge, license was revoked.

Decision effective 03/14/2012

Smith, Valerie M., TCH 74169, Modesto, CA—Case AC 3808

By Default Decision, license was revoked.

Decision effective 03/26/2012

Sohal, Prince, TCH 68528, Fresno, CA—Case AC 3689

By Stipulated Settlement, license was revoked, revocation stayed and placed on three years' probation, subject to terms and conditions that include but not limited to: passing the Pharmacy Technician Certification Examination; completing 100 hours of community service; and no ownership of any Board-licensed entity.

Decision effective 04/23/2012

Soliz, Barbara A., TCH 26383, Chula Vista, CA—Case AC 4005

By Default Decision, license was revoked.

Decision effective 01/11/2012

Stephens, Jennifer, TCH 30649, Wheatland, CA—Case AC 4011

By Default Decision, license was revoked.

Decision effective 03/09/2012

Stone, Elliot M., TCH 82587, Lancaster, CA—Case AC 3932

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 03/22/2012

Tamayo, Gabriel J., TCH 61215, Escondido, CA—Case AC 4200

By Default Decision, license was revoked.

Decision effective 05/25/2012

Tom, Eugenia Mond, TCH 18794, San Francisco, CA—Case AC 4068

By Stipulated Settlement, license was revoked, stayed and placed on five years' probation, subject to terms and conditions that include but not limited to no ownership of any Board-licensed entity.

Decision effective 05/25/2012

Tomooka, Lindsay K., TCH 53580, Bakersfield, CA—Case AC 3806

By Stipulated Settlement, license was revoked, stayed and placed on five years' probation, subject to terms and conditions that include but not limited to: 60 days' suspension; must pass the Pharmacy Technician Certification Exam, must have worksite monitor; complete 40 hours of community service per year of the first two years of probation; and no ownership of any Board-licensed entity.

Decision effective 03/26/2012

Torres, Alfonso, TCH 83487, Chula Vista, CA—Case AC 4031

By Default Decision, license was revoked.

Decision effective 01/11/2012

Torres, Nicholas B., Pharmacy Technician applicant, Salinas, CA—Case SI 3446

By Decision after a hearing before an Administrative Law Judge, Pharmacy Technician registration was denied.

Decision effective 03/14/2012

Towle, Lillian M., TCH 43117, Carmichael, CA—Case AC 3962

By Stipulated Settlement, license was revoked, stayed and placed on four years' probation, subject to terms and conditions that include but not limited to: must pass the Pharmacy Technician Certification Exam, must have worksite monitor; complete 25 hours of community service within the first year of probation; and no

ownership of any Board-licensed entity.

Decision effective 03/16/2012

Uribe, Salma Christine, TCH 56000, Madera, CA—Case AC 3778

By Stipulated Settlement, license was revoked, stayed and placed on five years' probation, subject to terms and conditions that include but not limited to: must pass the Pharmacy Technician Certification Exam; and complete 30 hours of community service per year during the first two years of probation.

Decision effective 04/12/2012

Valdez, Mark A., TCH 83818, Moreno Valley, CA—Case AC 3639

By Default Decision, license was revoked.

Decision effective 03/22/2012

Valdivia, Justin, TCH 77784, Watsonville, CA—Case AC 4078

By Default Decision, license was revoked.

Decision effective 06/07/2012

Vega, Jose, TCH 52827, Riverside, CA—Case AC 3527

By Stipulated Settlement, license was revoked.

Decision effective 04/12/2012

Velazquez, Bonnie Yvonne, Pharmacy Technician applicant, National City, CA—Case SI 3449

By Default Decision, Pharmacy Technician registration was denied.

Decision effective 04/23/2012

Villafana, Victor, TCH 48083, Pico Rivera, CA—Case AC 3437

By Decision after a hearing before an Administrative Law Judge, license was revoked.

Decision effective 05/18/2012

Warren, Barbie L., TCH 40903, Los Angeles, CA—Case AC 3825

By Stipulated Settlement, license was revoked, stayed and placed on five years' probation, subject to terms and conditions that include but not limited to: must pass the Pharmacy Technician Certification Exam, must have worksite monitor; complete 50 hours of community service per year for the first two years of probation; and no ownership of any Board-licensed entity.

Decision effective 03/16/2012

See Disciplinary Actions, Page 27

Disciplinary Actions

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Williams, Ruby J., TCH 99379, Victorville, CA—Case SI 3738

By Decision after a hearing before an Administrative Law Judge, license was issued and immediately revoked; revocation stayed and the license was placed on three years' probation, subject to terms and conditions that include but not limited to passing the Pharmacy Technician Certification Exam.

Decision effective 03/30/2012

Winters, Cooper Joseph, TCH 100859, Petaluma, CA—Case AC 3975

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 04/12/2012

Designated Representatives

Callahan, Gary, EXC 16432, Phillips Ranch, CA—Case AC 3756

By Default Decision, license was revoked.

Decision effective 05/04/2012

Ritchey, Kenneth Bryan, EXC 20162, Islamorada, FL—Case AC 3801

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 04/12/2012

Snyder, Jake J., EXC 18204, Superior, CO—Case AC 3331

By Stipulated Settlement, license was revoked, revocation stayed and placed on four years' probation, subject to terms and conditions that include but not limited to: cannot be designated representative-in-charge of any Board-licensed entity. License was voluntarily surrendered.

Decision effective 05/07/2012

Thomas, Troy, EXC 17778, Sacramento, CA—Case AC 3891

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 01/11/2012

Pharmacies

Acton Pharmacy, PHY 48219, Acton, CA—Case AC 4207

By Stipulated Settlement, license was revoked, revocation stayed and license placed on four years' probation.

AD-RX Pharmacy, PHY 44831, Los Angeles, CA—Case AC 3539

By Stipulated Settlement, license was revoked, revocation stayed and license placed on five years' probation, subject to the terms and conditions that include but are not limited to: shall post a notice of probation and provide free health-care services to a community or charitable facility or agency in the amount of \$100,000.00.

Decision effective 04/02/2012

Ararat Pharmacy, PHY 42130, Glendale, CA—Case AC 3823

By Stipulated Settlement, license was revoked, revocation stayed and license placed on three years' probation, subject to the terms and conditions that include but are not limited to: shall post a notice of probation and complete 50 hours of community service within first two years of probation.

Decision effective 03/09/2012

CVS Pharmacy #1176, PHY 48257, Lomita, CA—Case AC 3970

By Stipulated Settlement, license was revoked, revocation stayed and license placed on four years' probation, subject to the terms and conditions that include but are not limited to: shall post a notice of probation, and complete a community service program consisting of the donation of 1,500 free immunizations.

Decision effective 05/04/2012

Faast Pharmacy, PHY 47454, Bakersfield, CA—Case AC 3781

By Stipulated Settlement, license was revoked, revocation stayed and license placed on three years' probation, subject to the terms and conditions that include but are not limited to posting a notice of probation.

Decision effective 04/23/2012

Kovac's Pharmacy, PHY 49968, Van Nuys, CA—Case AC 3943

By Stipulated Settlement, license was revoked, revocation stayed and license placed on five years' probation, subject to the terms and conditions that include but are not limited to: posting a notice of probation and completing 50 hours of community service for each year of probation.

Decision effective 05/18/2012 Pacifica Pharmacy Corp., PHY 46715, Huntington Beach, CA—Case AC 3802

By Decision after a hearing before an Administrative Law Judge, license was revoked. A Petition for Reconsideration was denied.

Decision effective 06/03/2012

Serrano Medical Pharmacy, PHY 49002, Los Angeles, CA—Case AC 3653

By Stipulated Settlement, license was revoked, revocation stayed and license placed on five years' probation, subject to the terms and conditions that include but are not limited to: shall post a notice of probation and complete 50 hours of community service per year for the first two years of probation.

Decision effective 03/09/2012

Target Store #T-289, PHY 45438, Cerritos, CA—Case AC 3358

By Stipulated Settlement, license was revoked, revocation stayed and license placed on five years' probation, subject to the terms and conditions that include but are not limited to: shall post a notice of probation and complete 125 hours of community service within first three years of probation; and provide statements from current PIC and his/her immediate supervisor that said individuals have read and are familiar with state and federal pharmacy laws.

Decision effective 06/25/2012

Out-of-State Distributors

Gulf Coast Pharmaceuticals, OSD 4567, Ocean Springs, MS—Case AC 3801

By Stipulated Surrender, license was voluntarily surrendered.

Decision effective 04/12/2012

Superior Medical Supply, Inc., OSD 4574,

Westminster, CO—Case AC 3331

By Stipulated Settlement, license was revoked, revocation stayed and license placed on five years' probation, subject to the terms and conditions that include but are not limited to posting a notice of probation.

Decision effective 05/07/2012

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