

**BEFORE THE  
BOARD OF PHARMACY  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA**

**In the Matter of the Third Amended Accusation Against:**

**WHITE HOUSE PHARMACY INC.,  
DBA SAN JOSE COMPOUNDING PHARMACY;  
PATRICK JOSEPH D'ANGELO, OWNER,  
Pharmacy Permit No. PHY 54957; and**

**JOHN T. SORCI  
Pharmacist License No. RPH 45060; and**

**MARA TIBAYAN RASE,  
Pharmacist License No. RPH 75062;**

**Respondents.**

**Agency Case No. 6802**

**OAH No. 2021030542**

## DECISION AND ORDER

The attached Stipulated Surrender of License and Order is hereby adopted by the Board of Pharmacy, Department of Consumer Affairs, as its Decision in this matter.

This Decision shall become effective at 5:00 p.m. on February 8, 2023.

It is so ORDERED on January 9, 2023.

BOARD OF PHARMACY  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA

By

A handwritten signature in black ink, appearing to read "Seung W. Oh". The signature is fluid and cursive, with the first name "Seung" and last name "Oh" clearly distinguishable.

Seung W. Oh, Pharm.D.  
Board President

1 ROB BONTA  
Attorney General of California  
2 CHAR SACHSON  
Supervising Deputy Attorney General  
3 JOSHUA D. JOHNSON  
Deputy Attorney General  
4 State Bar No. 244774  
455 Golden Gate Avenue, Suite 11000  
5 San Francisco, CA 94102-7004  
Telephone: (415) 510-3876  
6 Facsimile: (415) 703-5480  
E-mail: Joshua.Johnson@doj.ca.gov  
7 *Attorneys for Complainant*

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

12 In the Matter of the Accusation Against:

13 **WHITE HOUSE PHARMACY INC.,**  
14 **DBA SAN JOSE COMPOUNDING**  
**PHARMACY; PATRICK JOSEPH**  
15 **D'ANGELO, OWNER**  
2453 Forest Ave.  
San Jose, CA 95128

16 **Pharmacy Permit No. PHY 54957**

17 **JOHN T. SORCI**  
18 **15048 Bel Estos Dr.**  
**San Jose, CA 95124**

19 **Pharmacist License No. RPH 45060**

20 **MARA TIBAYAN RASE**  
21 **25577 Salerno Way**  
**Yorba Linda, CA 92887**

22 **Pharmacist License No. RPH 75062**

23 Respondents.  
24  
25  
26  
27  
28

Case No. 6802

OAH No. 2021030542

**STIPULATED SURRENDER OF**  
**LICENSE AND ORDER AS TO WHITE**  
**HOUSE PHARMACY INC., DBA SAN**  
**JOSE COMPOUNDING PHARMACY;**  
**PATRICK JOSEPH D'ANGELO,**  
**OWNER, ONLY**

1 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-  
2 entitled proceedings that the following matters are true:

3 **PARTIES**

4 1. Anne Sodergren (Complainant) is the Executive Officer of the Board of Pharmacy  
5 (Board). She brought this action solely in her official capacity and is represented in this matter by  
6 Rob Bonta, Attorney General of the State of California, by Joshua D. Johnson, Deputy Attorney  
7 General.

8 2. White House Pharmacy Inc., dba San Jose Compounding Pharmacy; Patrick J.  
9 D'Angelo, Owner (Respondent) is represented in this proceeding by attorney Armond Marcarian,  
10 whose address is: 21650 Oxnard Street, Suite 1980, Woodland Hills, CA 91367-7853.

11 3. On or about September 30, 2016, the Board issued Pharmacy Permit No. PHY 54957  
12 to White House Pharmacy Inc., doing business as San Jose Compounding Pharmacy; Patrick  
13 Joseph D'Angelo Chief Financial Officer, President, Secretary, Treasurer and sole shareholder  
14 (Respondent). The Pharmacy Permit will expire on September 1, 2023 unless renewed.

15 **JURISDICTION**

16 4. Accusation No. 6802 was filed before the Board, and is currently pending against  
17 Respondent. The Accusation was last amended as the Third Amended Accusation and filed on or  
18 about April 12, 2022. The Accusation and all other statutorily required documents were properly  
19 served on Respondent on April 12, 2022. Respondent timely filed its Notice of Defense  
20 contesting the Accusation.

21 1. A copy of the Third Amended Accusation No. 6802 is attached as Exhibit A and  
22 incorporated by reference.

23 **ADVISEMENT AND WAIVERS**

24 5. Respondent has carefully read, fully discussed with counsel, and understands the  
25 charges and allegations in Accusation No. 6802. Respondent also has carefully read, fully  
26 discussed with counsel, and understands the effects of this Stipulated Surrender of License and  
27 Order.  
28

6. Respondent is fully aware of its legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to confront and cross-examine the witnesses against them; the right to present evidence and to testify on its own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

7. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

## CULPABILITY

8. Respondent understands that the charges and allegations in Accusation No. 6802, if proven at a hearing, constitute cause for imposing discipline upon its Pharmacy Permit No. PHY 54957.

9. For the purpose of resolving the Accusation without the expense and uncertainty of further proceedings, Respondent agrees that, at a hearing, Complainant could establish a factual basis for the charges in the Accusation and that those charges constitute cause for discipline. Respondent hereby gives up their right to contest that cause for discipline exists based on those charges.

10. Respondent understands that by signing this stipulation Entity enables the Board to issue an order accepting the surrender of their Pharmacy Permit without further process.

## CONTINGENCY

11. This stipulation shall be subject to approval by the Board. Respondent understands and agrees that counsel for Complainant and the staff of the Board may communicate directly with the Board regarding this stipulation and surrender, without notice to or participation by Respondent or its counsel. By signing the stipulation, Respondent understands and agrees that they may not withdraw its agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Surrender and Disciplinary Order shall be of no force or effect, except for this

1 paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not  
2 be disqualified from further action by having considered this matter.

3 12. The parties understand and agree that Portable Document Format (PDF) and facsimile  
4 copies of this Stipulated Surrender of License and Order, including PDF and facsimile signatures  
5 thereto, shall have the same force and effect as the originals.

6 13. This Stipulated Surrender of License and Order is intended by the parties to be an  
7 integrated writing representing the complete, final, and exclusive embodiment of their agreement.  
8 It supersedes any and all prior or contemporaneous agreements, understandings, discussions,  
9 negotiations, and commitments (written or oral). This Stipulated Surrender of License and Order  
10 may not be altered, amended, modified, supplemented, or otherwise changed except by a writing  
11 executed by an authorized representative of each of the parties.

12 14. In consideration of the foregoing admissions and stipulations, the parties agree that  
13 the Board may, without further notice or formal proceeding, issue and enter the following Order:

14 **ORDER**

15 IT IS HEREBY ORDERED that Pharmacy Permit No. PHY 54957 issued to Respondent  
16 White House Pharmacy Inc., doing business as San Jose Compounding Pharmacy; Patrick Joseph  
17 D'Angelo Chief Financial Officer, President, Secretary, Treasurer and sole shareholder, is  
18 surrendered and accepted by the Board.

19 1. The surrender of Respondent's Pharmacy Permit and the acceptance of the  
20 surrendered license by the Board shall constitute the imposition of discipline against Respondent.  
21 This stipulation constitutes a record of the discipline and shall become a part of Respondent's  
22 license history with the Board. Respondent understands and acknowledges that for purposes of  
23 Business and Professions Code section 4307, this stipulated surrender is the same as a revocation.

24 2. Respondent shall lose all rights and privileges as a pharmacy in California as of the  
25 effective date of the Board's Decision and Order.

26 3. Respondent shall cause to be delivered to the Board its pocket license and, if one was  
27 issued, its wall certificates on or before the effective date of the Decision and Order.  
28

1           4.     Respondent shall pay the agency its costs of investigation and enforcement in the  
2 amount of \$70,000.00 prior to issuance of a new or reinstated license.

3           5.     If Respondent ever files an application for licensure or a petition for reinstatement in  
4 the State of California, the Board shall treat it as a new application for licensure. Respondent  
5 must comply with all the laws, regulations and procedures for licensure in effect at the time the  
6 application or petition is filed, and all of the charges and allegations contained in Accusation No.  
7 6802 shall be deemed to be true, correct and admitted by Respondent when the Board determines  
8 whether to grant or deny the application or petition.

9           6.     If Respondent should ever apply or reapply for a new license or certification, or  
10 petition for reinstatement of a license, by any other health care licensing agency in the State of  
11 California, all of the charges and allegations contained in Accusation, No. 6802 shall be deemed  
12 to be true, correct, and admitted by Respondent for the purpose of any Statement of Issues or any  
13 other proceeding seeking to deny or restrict licensure.

14           7.     Respondent may not apply, reapply, or petition for any licensure or registration of the  
15 Board for three (3) years from the effective date of the Decision and Order.

16     ///  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

1 **ACCEPTANCE**

2 I have carefully read the above Stipulated Surrender of License and Order and have fully  
3 discussed it with my attorney Armond Marcarian. I understand the stipulation and the effect it  
4 will have on my Pharmacy Permit. I enter into this Stipulated Surrender of License and Order  
5 voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the  
6 Board of Pharmacy.

7  
8 DATED: \_\_\_\_\_

9 WHITE HOUSE PHARMACY INC., DBA  
10 SAN JOSE COMPOUNDING PHARMACY;  
PATRICK J. D'ANGELO, OWNER  
Respondent

11 I have read and fully discussed with Respondent White House Pharmacy Inc., doing  
12 business San Jose Compounding Pharmacy; Patrick Joseph D'Angelo Chief Financial Officer,  
13 President, Secretary, Treasurer and sole shareholder the terms and conditions and other matters  
14 contained in this Stipulated Surrender of License and Order. I approve its form and content.

15 DATED: \_\_\_\_\_

16 ARMOND MARCARIAN  
17 Attorney for Respondent

18 **ENDORSEMENT**

19 The foregoing Stipulated Surrender of License and Order is hereby respectfully submitted  
20 for consideration by the Board of Pharmacy of the Department of Consumer Affairs.

21 DATED: November 28, 2022

Respectfully submitted,

22 ROB BONTA  
23 Attorney General of California  
24 CHAR SACHSON  
Supervising Deputy Attorney General

25 

26 JOSHUA D. JOHNSON  
27 Deputy Attorney General  
Attorneys for Complainant

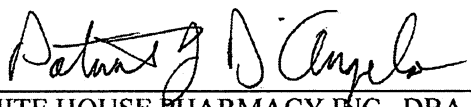
28 SF2019202111  
43477531.docx



1 ACCEPTANCE

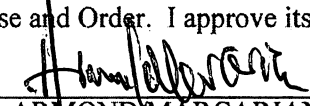
2 I have carefully read the above Stipulated Surrender of License and Order and have fully  
3 discussed it with my attorney Armond Marcarian. I understand the stipulation and the effect it  
4 will have on my Pharmacy Permit. I enter into this Stipulated Surrender of License and Order  
5 voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the  
6 Board of Pharmacy.

7  
8 DATED: 11-28-2022

  
WHITE HOUSE PHARMACY INC., DBA  
SAN JOSE COMPOUNDING PHARMACY;  
PATRICK J. D'ANGELO, OWNER  
*Respondent*

11 I have read and fully discussed with Respondent White House Pharmacy Inc., doing  
12 business San Jose Compounding Pharmacy; Patrick Joseph D'Angelo Chief Financial Officer,  
13 President, Secretary, Treasurer and sole shareholder the terms and conditions and other matters  
14 contained in this Stipulated Surrender of License and Order. I approve its form and content.

15 DATED: November 28, 2022

  
ARMOND MARCARIAN  
*Attorney for Respondent*

18 ENDORSEMENT

19 The foregoing Stipulated Surrender of License and Order is hereby respectfully submitted  
20 for consideration by the Board of Pharmacy of the Department of Consumer Affairs.

21 DATED: November 28, 2022

Respectfully submitted,

22 ROB BONTA  
23 Attorney General of California  
24 CHAR SACHSON  
Supervising Deputy Attorney General



26 JOSHUA D. JOHNSON  
27 Deputy Attorney General  
*Attorneys for Complainant*

28 SF2019202111  
43477531.docx

**Exhibit A**

**Third Amended Accusation No. 6802**

1 ROB BONTA  
Attorney General of California  
2 CHAR SACHSON  
Supervising Deputy Attorney General  
3 JOSHUA D. JOHNSON  
Deputy Attorney General  
4 State Bar No. 244774  
455 Golden Gate Avenue, Suite 11000  
5 San Francisco, CA 94102-7004  
Telephone: (415) 510-3876  
6 Facsimile: (415) 703-5480  
E-mail: Joshua.Johnson@doj.ca.gov  
7 *Attorneys for Complainant*

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

12 In the Matter of the Accusation Against:

Case No. 6802

13 **WHITE HOUSE PHARMACY INC.,**  
**DBA SAN JOSE COMPOUNDING**  
14 **PHARMACY; PATRICK JOSEPH**  
**D'ANGELO, OWNER**  
15 **2453 Forest Ave.**  
**San Jose, CA 95128**

**THIRD AMENDED ACCUSATION**

16 **Pharmacy Permit No. PHY 54957**

17 **JOHN T. SORCI**  
18 **15048 Bel Estos Dr.**  
**San Jose, CA 95124**

19 **Pharmacist License No. RPH 45060**

20 **MARA TIBAYAN RASE**  
21 **25577 Salerno Way**  
**Yorba Linda, CA 92887**

22 **Pharmacist License No. RPH 75062**

23 **SHIVAN ACHARYA**  
24 **1055 Town and Country Rd #527**  
**Orange, CA 92868**

25 **Pharmacist License No. RPH 76346**  
26  
27  
28

**GARY EDWARD MARTIN**  
**PO Box 946**  
**Redwood City, CA 94064**

**Pharmacist License No. RPH 24981**

Respondents.

**PARTIES**

1. Anne Sodergren (Complainant) brings this Third Amended Accusation solely in her official capacity as the Executive Officer of the Board of Pharmacy (Board), Department of Consumer Affairs.

2. On or about September 30, 2016, the Board of Pharmacy issued Pharmacy Permit Number PHY 54957 to White House Pharmacy Inc., doing business as San Jose Compounding Pharmacy; Patrick Joseph D'Angelo Chief Financial Officer, President, Secretary, Treasurer and sole shareholder (Respondent San Jose Compounding Pharmacy). The Pharmacy Permit was in full force and effect at all times relevant to the charges brought herein and will expire on September 1, 2022, unless renewed.

3. On or about March 5, 1992, the Board of Pharmacy issued Pharmacist License Number RPH 45060 to Respondent John T. Sorci (Respondent Sorci). The Pharmacist License was in full force and effect at all times relevant to the charges brought herein and will expire on March 31, 2024, unless renewed. Respondent Sorci is and has served as Pharmacist-in-Charge for Respondent San Jose Compounding Pharmacy since or about March 2, 2018.

4. On or about September 27, 2016, the Board of Pharmacy issued Pharmacist License Number RPH 75062 to Respondent Mara Tibayan Rase (Respondent Rase). The Pharmacist License was in full force and effect at all times relevant to the charges brought herein and will expire on June 30, 2022, unless renewed. Respondent Rase has served as Pharmacist-in-Charge for Respondent San Jose Compounding Pharmacy from about March 1, 2017 to March 1, 2018.

5. On or about March 29, 2017, the Board of Pharmacy issued Pharmacist License Number RPH 76346 to Respondent Shivan Acharya (Respondent Acharya). The Pharmacist

1 License was in full force and effect at all times relevant to the charges brought herein and will  
2 expire on August 31, 2022, unless renewed.

3 6. On or about April 17, 1967, the Board of Pharmacy issued Pharmacist License  
4 Number RPH 24981 to Respondent Gary Edward Martin (Respondent Martin). The Pharmacist  
5 License was in full force and effect at all times relevant to the charges brought herein and will  
6 expire on September 30, 2022, unless renewed. Respondent Martin has served as Pharmacist-in-  
7 Charge for Respondent San Jose Compounding Pharmacy from about September 30, 2016 to  
8 November 28, 2016.

### 9 **JURISDICTION**

10 7. This Third Amended Accusation is brought before the Board under the authority of  
11 the following laws. All section references are to the Business and Professions Code (Code)  
12 unless otherwise indicated.

13 8. Section 4011 of the Code provides that the Board shall administer and enforce both  
14 the Pharmacy Law [Bus. & Prof. Code, § 4000 et seq.] and the Uniform Controlled Substances  
15 Act [Health & Safety Code, § 11000 et seq.].

16 9. Section 4300, subdivision (a), of the Code states that “(a) Every license issued may be  
17 suspended or revoked.”

18 10. Section 4300.1 of the Code states:

19 The expiration, cancellation, forfeiture, or suspension of a board-issued license  
20 by operation of law or by order or decision of the board or a court of law, the  
21 placement of a license on a retired status, or the voluntary surrender of a license by a  
22 licensee shall not deprive the board of jurisdiction to commence or proceed with any  
investigation of, or action or disciplinary proceeding against, the licensee or to render  
a decision suspending or revoking the license.

### 23 **STATUTORY PROVISIONS**

24 11. Section 4036 of the Code states:

25 “Pharmacist” means a natural person to whom a license has been issued by the  
26 board, under Section 4200, except as specifically provided otherwise in this chapter.  
27 The holder of an unexpired and active pharmacist license issued by the board is  
entitled to practice pharmacy as defined by this chapter, within or outside of a  
licensed pharmacy as authorized by this chapter.

28 12. Section 4058 of the Code states:

Every person holding a license issued under this chapter to operate a premises shall display the original license and current renewal license upon the licensed premises in a place where it may be clearly read by the public.

13. Section 4059.5, subdivision (e) of the Code states:

(e) A dangerous drug or dangerous device shall not be transferred, sold, or delivered to a person outside this state, whether foreign or domestic, unless the transferor, seller, or deliverer does so in compliance with the laws of this state and of the United States and of the state or country to which the dangerous drugs or dangerous devices are to be transferred, sold, or delivered. Compliance with the laws of this state and the United States and of the state or country to which the dangerous drugs or dangerous devices are to be delivered shall include, but not be limited to, determining that the recipient of the dangerous drugs or dangerous devices is authorized by law to receive the dangerous drugs or dangerous devices.

14. Section 4113, subdivision (c) of the Code states:

(c) The pharmacist-in-charge shall be responsible for a pharmacy's compliance with all state and federal laws and regulations pertaining to the practice of pharmacy.

15. Section 4116, subdivision (a) of the Code states:

(a) No person other than a pharmacist, an intern pharmacist, an authorized officer of the law, or a person authorized to prescribe shall be permitted in that area, place, or premises described in the license issued by the board wherein controlled substances or dangerous drugs or dangerous devices are stored, possessed, prepared, manufactured, derived, compounded, dispensed, or repackaged. However, a pharmacist shall be responsible for any individual who enters the pharmacy for the purposes of receiving consultation from the pharmacist or performing clerical, inventory control, housekeeping, delivery, maintenance, or similar functions relating to the pharmacy if the pharmacist remains present in the pharmacy during all times as the authorized individual is present.

16. Section 4123 of the Code states:

Any pharmacy that contracts to compound a drug for parenteral therapy, pursuant to a prescription, for delivery to another pharmacy shall report that contractual arrangement to the board. That information shall be reported by the pharmacy performing the compounding services within 30 days of commencing that compounding.

17. Section 4301 of the Code states:

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

...

(b) Incompetence.

(c) Gross negligence.

...

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

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

6 ...

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

9 ...

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

15 ...

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

18 ...

19 18. Section 4306.5 of the Code states:

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

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

26 ...

27 19. Section 4307 of the Code states:

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

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

1 five years.

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

4 (b) "Manager, administrator, owner, member, officer, director, associate,  
5 partner, or any other person with management or control of a license" as used in this  
6 section and Section 4308, may refer to a pharmacist or to any other person who serves  
7 in such capacity in or for a licensee.

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

17 20. Section 4322 of the Code states:

18 Any person who attempts to secure or secures licensure for himself or herself or  
19 any other person under this chapter by making or causing to be made any false  
20 representations, or who fraudulently represents himself or herself to be registered, is  
21 guilty of a misdemeanor, and upon conviction thereof shall be punished by a fine not  
22 exceeding five thousand dollars (\$5,000), or by imprisonment not exceeding 50 days,  
23 or by both that fine and imprisonment.

24 21. Section 4342 of the Code states:

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

(b) Any knowing or willful violation of any regulation adopted pursuant to  
Section 4006 shall be subject to punishment in the same manner as is provided in  
Sections 4321 and 4336.

22 22. Health and Safety Code section 111250 states:

23 Any drug or device is adulterated if it consists, in whole or in part, of any filthy,  
24 putrid, or decomposed substance.

25 23. Health and Safety Code section 111295 states:

26 It is unlawful for any person to manufacture, sell, deliver, hold, or offer for sale  
27 any drug or device that is adulterated.

## 28 **REGULATORY PROVISIONS**

24. California Code of Regulations, title 16, section 1709 states:



1 (a) Each permit to operate a pharmacy shall show the name and address of the  
2 pharmacy, the form of ownership (individual, partnership or corporation) and the  
3 pharmacist-in-charge. Each pharmacy shall, in its initial application on the annual  
4 renewal form, report the name of the pharmacist-in-charge, the names of all owners  
5 and the names of the corporate officers (if a corporation). Any changes in the  
6 pharmacist-in-charge, or the owners, or corporate officers shall be reported to the  
7 Board within 30 days.

8 (b) Any transfer, in a single transaction or in a series of transactions, of 10  
9 percent or more of the beneficial interest in a business entity licensed by the board to  
10 a person or entity who did not hold a beneficial interest at the time the original permit  
11 was issued, shall require written notification to the board within 30 days.

12 (c) The following shall constitute a transfer of permit and require application  
13 for a change of ownership: any transfer of a beneficial interest in a business entity  
14 licensed by the board, in a single transaction or in a series of transactions, to any  
15 person or entity, which transfer results in the transferee's holding 50% or more of the  
16 beneficial interest in that license.

17 25. California Code of Regulations, title 16, section 1711 states:

18 (a) Each pharmacy shall establish or participate in an established quality  
19 assurance program which documents and assesses medication errors to determine  
20 cause and an appropriate response as part of a mission to improve the quality of  
21 pharmacy service and prevent errors.

22 (b) For purposes of this section, "medication error" means any variation from a  
23 prescription or drug order not authorized by the prescriber, as described in Section  
24 1716. Medication error, as defined in the section, does not include any variation that  
25 is corrected prior to furnishing the drug to the patient or patient's agent or any  
26 variation allowed by law.

27 (c)(1) Each quality assurance program shall be managed in accordance with  
28 written policies and procedures maintained in the pharmacy in an immediately  
retrievable form.

(2) When a pharmacist determines that a medication error has occurred, a  
pharmacist shall as soon as possible:

(A) Communicate to the patient or the patient's agent the fact that a medication  
error has occurred and the steps required to avoid injury or mitigate the error.

(B) Communicate to the prescriber the fact that a medication error has occurred.

(3) The communication requirement in paragraph (2) of this subdivision shall  
only apply to medication errors if the drug was administered to or by the patient, or if  
the medication error resulted in a clinically significant delay in therapy.

(4) If a pharmacist is notified of a prescription error by the patient, the patient's  
agent, or a prescriber, the pharmacist is not required to communicate with that  
individual as required in paragraph (2) of this subdivision.

(d) Each pharmacy shall use the findings of its quality assurance program to  
develop pharmacy systems and workflow processes designed to prevent medication  
errors. An investigation of each medication error shall commence as soon as is  
reasonably possible, but no later than 2 business days from the date the medication

error is discovered. All medication errors discovered shall be subject to a quality assurance review.

(e) The primary purpose of the quality assurance review shall be to advance error prevention by analyzing, individually and collectively, investigative and other pertinent data collected in response to a medication error to assess the cause and any contributing factors such as system or process failures. A record of the quality assurance review shall be immediately retrievable in the pharmacy. The record shall contain at least the following:

1. the date, location, and participants in the quality assurance review;
2. the pertinent data and other information relating to the medication error(s) reviewed and documentation of any patient contact required by subdivision (c);
3. the findings and determinations generated by the quality assurance review; and,
4. recommend changes to pharmacy policy, procedure, systems, or processes, if any.

The pharmacy shall inform pharmacy personnel of changes to pharmacy policy, procedure, systems, or processes made as a result of recommendations generated in the quality assurance program.

(f) The record of the quality assurance review, as provided in subdivision (e) shall be immediately retrievable in the pharmacy for at least one year from the date the record was created.

(g) The pharmacy's compliance with this section will be considered by the board as a mitigating factor in the investigation and evaluation of a medication error.

(h) Nothing in this section shall be construed to prevent a pharmacy from contracting or otherwise arranging for the provision of personnel or other resources, by a third party or administrative offices, with such skill or expertise as the pharmacy believes to be necessary to satisfy the requirements of this section.

26. California Code of Regulations, title 16, section 1714, subdivision (c) states:

The pharmacy and fixtures and equipment shall be maintained in a clean and orderly condition. The pharmacy shall be dry, well-ventilated, free from rodents and insects, and properly lighted. The pharmacy shall be equipped with a sink with hot and cold running water for pharmaceutical purposes.

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

...

(e) A drug preparation shall not be compounded until the pharmacy has first prepared a written master formula document that includes at least the following elements:

- (1) Active ingredients to be used.
- (2) Equipment to be used.

1 (3) The maximum allowable beyond use date for the preparation, and the  
rationale or reference source justifying its determination.

2 (4) Inactive ingredients to be used.

3 (5) Specific and essential compounding steps used to prepare the drug.

4 (6) Quality reviews required at each step in preparation of the drug.

5 (7) Post-compounding process or procedures required, if any.

6 (8) Instructions for storage and handling of the compounded drug preparation.

7 ...

8 (i) Every compounded drug preparation shall be given a beyond use date  
9 representing the date or date and time beyond which the compounded drug  
10 preparation should not be used, stored, transported or administered, and determined  
based on the professional judgment of the pharmacist performing or supervising the  
compounding.

11 (1) For non-sterile compounded drug preparation(s), the beyond use date shall  
12 not exceed any of the following:

13 (A) the shortest expiration date or beyond use date of any ingredient in the  
compounded drug preparation,

14 (B) the chemical stability of any one ingredient in the compounded drug  
15 preparation,

16 (C) the chemical stability of the combination of all ingredients in the  
compounded drug preparation,

17 (D) for non-aqueous formulations, 180 days or an extended date established by  
18 the pharmacist's research, analysis, and documentation,

19 (E) for water-containing oral formulations, 14 days or an extended date  
established by the pharmacist's research, analysis, and documentation, and

20 (F) for water-containing topical/dermal and mucosal liquid and semisolid  
21 formulations, 30 days or an extended date established by the pharmacist's research,  
analysis, and documentation.

22 (G) A pharmacist, using his or her professional judgment may establish an  
23 extended date as provided in (D), (E), and (F), if the pharmacist researches by  
consulting and applying drug-specific and general stability documentation and  
24 literature; analyzes such documentation and literature as well as the other factors set  
forth in this subdivision; and maintains documentation of the research, analysis and  
25 conclusion. The factors the pharmacist must analyze include:

26 (i) the nature of the drug and its degradation mechanism,

27 (ii) the dosage form and its components,

28 (iii) the potential for microbial proliferation in the preparation,

- (iv) the container in which it is packaged,  
(v) the expected storage conditions, and  
(vi) the intended duration of therapy.

Documentation of the pharmacist's research and analysis supporting an extension must be maintained in a readily retrievable format as part of the master formula.

...

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

- (a) For each compounded drug preparation, pharmacy records shall include:

...

(2) A compounding log consisting of a single document containing all of the following:

...

- (E) The quantity of each ingredient used in compounding the drug preparation.

(F) The manufacturer, expiration date and lot number of each component. If the manufacturer name is demonstrably unavailable, the name of the supplier may be substituted. If the manufacturer does not supply an expiration date for any component, the records shall include the date of receipt of the component in the pharmacy, and the limitations of section 1735.2, subdivision (l) shall apply.

...

(H) The beyond use date or beyond use date and time of the final compounded drug preparation, expressed in the compounding document in a standard date and time format.

...

29. California Code of Regulations, title 16, section 1735.4, subdivision (a) states:

(a) Each compounded drug preparation shall be affixed with a container label prior to dispensing that contains at least:

(1) Name of the compounding pharmacy and dispensing pharmacy (if different);

(2) Name (brand or generic) and strength, volume, or weight of each active ingredient. For admixed IV solutions, the intravenous solution utilized shall be included;

(3) Instructions for storage, handling, and administration. For admixed IV solutions, the rate of infusion shall be included;

(4) The beyond use date for the drug preparation;

1 (5) The date compounded; and

2 (6) The lot number or pharmacy reference number.

3 (b) Any compounded drug preparation dispensed to a patient or readied for  
4 dispensing to a patient shall also include on the label the information required under  
Business and Professions Code section 4076 and California Code of Regulations, title  
16, section 1707.5.

5 (c) Any compounded drug preparation dispensed to a patient or readied for  
6 dispensing to a patient shall also include, on the container label or on a receipt  
provided to the patient, a statement that the drug has been compounded by the  
7 pharmacy.

8 (d) Prior to dispensing drug preparations compounded into unit-dose containers  
that are too small or otherwise impractical for full compliance with subdivisions (a),  
9 (b), and (c) shall be labeled with at least the name of the compounding pharmacy and  
dispensing pharmacy, if different, the name(s) of the active ingredient(s), strength,  
10 volume or weight of the preparation, pharmacy reference or lot number, and beyond  
use date, and shall not be subject to minimum font size requirements. Once dispensed,  
11 outer packaging must comply with 1735.4(a) - (c).

12 ...

13 30. California Code of Regulations, title 16, section 1735.5 states:

14 (a) Any pharmacy engaged in compounding shall maintain written policies and  
procedures for compounding that establishes procurement procedures, methodologies  
15 for the formulation and compounding of drugs, facilities and equipment cleaning,  
maintenance, operation, and other standard operating procedures related to  
16 compounding. Any material failure to follow the pharmacy's written policies and  
procedures shall constitute a basis for disciplinary action.

17 (b) The policies and procedures shall be reviewed and such review shall be  
documented on an annual basis by the pharmacist-in-charge. The policies and  
18 procedures shall be updated whenever changes in policies and procedures are  
implemented.

19 (c) The policies and procedures shall include at least the following:

20 (1) Procedures for notifying staff assigned to compounding duties of any  
21 changes in policies or procedures.

22 (2) A written plan for recall of a dispensed compounded drug preparation where  
subsequent information demonstrates the potential for adverse effects with continued  
23 use. The plan shall ensure that all affected doses can be accounted for during the  
recall and shall provide steps to identify which patients received the affected lot or  
24 compounded drug preparation(s).

25 (3) Procedures for maintaining, storing, calibrating, cleaning, and disinfecting  
equipment used in compounding, and for training on these procedures as part of the  
26 staff training and competency evaluation process.

27 (4) Procedures for evaluating, maintaining, certifying, cleaning, and  
disinfecting the facility (physical plant) used for compounding, and for training on  
28 these procedures as part of the staff training and competency evaluation process.

1 (5) Documentation of the methodology used to validate integrity, potency,  
2 quality, and labeled strength of compounded drug preparations. The methodology  
3 must be appropriate to compounded drug preparations.

4 (6) Documentation of the methodology and rationale or reference source used  
5 to determine appropriate beyond use dates for compounded drug preparations.

6 (7) Dates and signatures reflecting all annual reviews of the policies and  
7 procedures by the pharmacist-in-charge.

8 (8) Dates and signatures accompanying any revisions to the policies and  
9 procedures approved by the pharmacist-in-charge.

10 (9) Policies and procedures for storage of compounded drug preparations in the  
11 pharmacy and daily documentation of all room, refrigerator, and freezer temperatures  
12 within the pharmacy.

13 (10) Policies and procedures regarding ensuring appropriate functioning of  
14 refrigeration devices, monitoring refrigeration device temperatures, and actions to  
15 take regarding any out of range temperature variations within the pharmacy.

16 (11) Policies and procedures for proper garbing when compounding with  
17 hazardous products. This shall include when to utilize double shoe covers.

18 31. California Code of Regulations, title 16, section 1735.6 states:

19 ...

20 (b) Any equipment used to compound drug preparations shall be stored, used,  
21 maintained, and cleaned in accordance with manufacturers' specifications.

22 ...

23 (d) Any pharmacy engaged in any hazardous drug compounding shall maintain  
24 written documentation regarding appropriate cleaning of facilities and equipment to  
25 prevent cross-contamination with non-hazardous drugs.

26 (e) Hazardous drug compounding shall be completed in an externally exhausted  
27 physically separate room with the following requirements:

28 (1) Minimum of 30 air changes per hour except that 12 air changes per hour are  
acceptable for segregated compounding areas with a BSC or CACI when products are  
assigned a BUD of 12 hours or less or when non sterile products are compounded;  
and

(2) Maintained at a negative pressure of 0.01 to 0.03 inches of water column  
relative to all adjacent spaces (rooms, above ceiling, and corridors); and

(3) (A) For sterile compounding, each BSC or CACI shall be externally  
exhausted.

(B) For nonsterile compounding, a BSC, a CACI, or other containment  
ventilated enclosure shall be used and shall either use a redundant-HEPA filter in  
series or be externally exhausted. For purposes of this paragraph, a containment  
ventilated enclosure means a full or partial enclosure that uses ventilation principles  
to capture, contain, and remove airborne contaminants through high-efficiency

1 particulate air (HEPA) filtration and to prevent their release into the work  
2 environment.

3 (4) All surfaces within the room shall be smooth, seamless, impervious, and  
4 non-shedding.

5 ...

6 32. California Code of Regulations, title 16, section 1735.7, subdivision (a) states:

7 (a) A pharmacy engaged in compounding shall maintain documentation  
8 demonstrating that personnel involved in compounding have the skills and training  
9 required to properly and accurately perform their assigned responsibilities and  
10 documentation demonstrating that all personnel involved in compounding are trained  
11 in all aspects of policies and procedures. This training shall include but is not limited  
12 to support personnel (e.g. institutional environmental services, housekeeping),  
13 maintenance staff, supervising pharmacist and all others whose jobs are related to the  
14 compounding process.

15 33. California Code of Regulations, title 16, section 1735.8 states:

16 (a) Any pharmacy engaged in compounding shall maintain, as part of its written  
17 policies and procedures, a written quality assurance plan designed to monitor and  
18 ensure the integrity, potency, quality, and labeled strength of compounded drug  
19 preparations.

20 (b) The quality assurance plan shall include written procedures for verification,  
21 monitoring, and review of the adequacy of the compounding processes and shall also  
22 include written documentation of review of those processes by qualified pharmacy  
23 personnel.

24 (c) The quality assurance plan shall include written standards for qualitative and  
25 quantitative analysis of compounded drug preparations to ensure integrity, potency,  
26 quality, and labeled strength, including the frequency of testing. All qualitative and  
27 quantitative analysis reports for compounded drug preparations shall be retained by  
28 the pharmacy and maintained along with the compounding log and master formula  
document. The quality assurance plan shall include a schedule for routine testing and  
analysis of specified compounded drug preparations to ensure integrity, potency,  
quality, and labeled strength, on at least an annual basis.

(d) The quality assurance plan shall include a written procedure for scheduled  
action in the event any compounded drug preparation is ever discovered to be outside  
minimum standards for integrity, potency, quality, or labeled strength.

(e) The quality assurance plan shall include a written procedure for responding  
to out-of-range temperature variations within the pharmacy and within patient care  
areas of a hospital where furnished drug is returned for redispensing.

34. California Code of Regulations, title 16, section 1793.1 states:

Only a pharmacist, or an intern pharmacist acting under the supervision of a  
pharmacist, may:

(a) Receive a new prescription order orally from a prescriber or other person  
authorized by law.

1 (b) Consult with a patient or his or her agent regarding a prescription, either  
2 prior to or after dispensing, or regarding any medical information contained in a  
3 patient medication record system or patient chart.

4 (c) Identify, evaluate and interpret a prescription.

5 (d) Interpret the clinical data in a patient medication record system or patient  
6 chart.

7 (e) Consult with any prescriber, nurse or other health care professional or  
8 authorized agent thereof.

9 (f) Supervise the packaging of drugs and check the packaging procedure and  
10 product upon completion.

11 (g) Perform all functions which require professional judgment.

12 35. California Code of Regulations, title 16, section 1793.3 states:

13 (a) In addition to employing a pharmacy technician to perform the tasks  
14 specified in section 1793.2, a pharmacy may employ a non-licensed person to type a  
15 prescription label or otherwise enter prescription information into a computer record  
16 system, but the responsibility for the accuracy of the prescription information and the  
17 prescription as dispensed lies with the registered pharmacist who initials the  
18 prescription or prescription record. At the direction of the registered pharmacist, a  
19 non-licensed person may also request and receive refill authorization.

20 (b) A pharmacist may supervise the number of non-licensed personnel  
21 performing the duties specified in subdivision (a) that the pharmacist determines, in  
22 the exercise of his or her professional judgment, does not interfere with the effective  
23 performance of the pharmacist's responsibilities under the Pharmacy Law.

24 ...

### 25 **COST RECOVERY**

26 36. Section 125.3 of the Code provides, in pertinent part, that the Board may request the  
27 administrative law judge to direct a licensee found to have committed a violation or violations of  
28 the licensing act to pay a sum not to exceed the reasonable costs of the investigation and  
enforcement of the case.

### 29 **FIRST CAUSE FOR DISCIPLINE**

#### 30 **(Duties of a Pharmacist – Respondents SJCP, Martin, and Sorci)**

31 37. Respondent San Jose Compounding Pharmacy, Respondent Martin, and Respondent  
32 Sorci are subject to disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or  
33 Code section 4113, subdivision (c), in combination with California Code of Regulations, title 16,  
34 section 1793.1, subdivisions (b), and/or (d) and/or (g), in that they violated statutes and/or



1 regulations regulating that only a licensed pharmacist may consult with a patient regarding a  
2 prescription, and/or interpret clinical data in a patient medication record system or patient chart,  
3 and/or supervise the packaging of drugs and check the packaging procedure and product upon  
4 completion. The circumstances are as follows:

5 (a) From approximately October 10, 2016 to October 20, 2016, while Respondent Martin  
6 was the PIC for San Jose Compounding Pharmacy, Respondent San Jose Compounding  
7 Pharmacy maintained dispensing records that showed Vishal Purohit, whose pharmacist license  
8 was revoked on July 29, 2016, as the dispensing “pharmacist” for sixty-four (64) prescription  
9 transactions including one controlled substance prescription when he was unlicensed and not  
10 authorized to perform the functions of a pharmacist.

11 (b) In or about 2021, while Respondent Sorci was PIC for San Jose Compounding  
12 Pharmacy, Respondent San Jose Compounding Pharmacy employed unlicensed Vishal Purohit as  
13 a “Compounding Formulation Specialist.” Vishal Purohit consulted with patient JV numerous  
14 times regarding her compounded thyroid medications without the supervision of a pharmacist,  
15 and caused patient JV to believe he was the pharmacist. Respondent Sorci was unaware of the  
16 consultations and complaints patient JV made to Vishal Purohit regarding her medication that was  
17 compounded by Respondent San Jose Compounding Pharmacy.

## 18 **SECOND CAUSE FOR DISCIPLINE**

### 19 **(Duties of a Pharmacist – Failure to Supervise – Respondent Sorci)**

20 38. Respondent Sorci is subject to disciplinary action under Code section 4301,  
21 subdivision (j) and/or (o), and/or Code section 4113, subdivision (c), in combination with  
22 California Code of Regulations, title 16, section 1793.3, subdivision (b), in that he failed to  
23 properly supervise non-licensed personnel. The circumstances are as follows:

24 (a) In or about 2021, while Respondent Sorci was PIC, Respondent San Jose  
25 Compounding Pharmacy employed unlicensed Vishal Purohit as a “Compounding Formulation  
26 Specialist.” Vishal Purohit consulted with patient JV numerous times regarding her compounded  
27 thyroid medications without the supervision of a pharmacist, and caused patient JV to believe he  
28 was the pharmacist. Respondent Sorci was unaware of the consultations and complaints patient

JV made to Vishal Purohit regarding her medication that was compounded by Respondent San Jose Compounding Pharmacy.

**THIRD CAUSE FOR DISCIPLINE**

**(Unprofessional Conduct – False Representation re Unlicensed Employee  
– Respondents SJCP, Rase, and Sorci)**

39. Respondent San Jose Compounding Pharmacy, Respondent Rase, and Respondent Sorci are subject to disciplinary action under Code section 4301, subdivision (f), and/or 4322 in conjunction with Code section 4036, in that Respondents' conduct was unprofessional when Respondents made or caused to be made false representations regarding licensure of unlicensed individuals. The circumstances are as follows:

(a) In or about March 2017, Respondent San Jose Compounding Pharmacy and Respondent Rase allowed an unlicensed individual, Vishal Purohit, whose pharmacist license was revoked on or about July 29, 2016, to represent himself as a pharmacist for San Jose Compounding Pharmacy.

(b) In or about May 2017, Respondent San Jose Compounding Pharmacy and Respondent Rase allowed Priya Purohit, an unlicensed office manager, to represent herself as a pharmacist for San Jose Compounding Pharmacy. A payment dated on or about May 26, 2017, from the National Community Pharmacists Association showed the pharmacy's employee Priya Purohit, a non-licensed office manager, represented herself as a pharmacist. In or about 2021, Respondent San Jose Compounding Pharmacy and Respondent Sorci allowed an unlicensed individual, Vishal Purohit, whose pharmacist license was revoked on or about July 29, 2016, to represent himself as a "Compounding Formulation Specialist" for San Jose Compounding Pharmacy. Vishal Purohit consulted with patient JV numerous times regarding her compounded thyroid medications without the supervision of a pharmacist, and caused patient JV to believe he was the pharmacist.

**FOURTH CAUSE FOR DISCIPLINE**

**(Unprofessional Conduct – False Representation - Respondents SJCP and Sorci)**

40. Respondent San Jose Compounding Pharmacy and Respondent Sorci are subject to

1 disciplinary action under Code section 4301, subdivision (g), in that Respondents' conduct was  
2 unprofessional in that they knowingly made a document that falsely represented the existence or  
3 nonexistence of a state of facts. The circumstances are as follows:

4 (a) The Board requested a complete dispensing history for the period from February 1,  
5 2018 through July 2, 2018. In response, Respondents provided an incomplete dispensing history  
6 that omitted fifteen prescriptions, including prescriptions: 146244, 146269, 146910, 143862,  
7 147286, 141985, 147314, 147571, 147581, 147643, 147578, 147581, 147698, 146244, and  
8 147700.

#### 9 **FIFTH CAUSE FOR DISCIPLINE**

##### 10 **(Unprofessional Conduct – Pharmacist Acts or Omissions – Respondents Sorci and Rase)**

11 41. Respondent Sorci and Respondent Rase are subject to disciplinary action under Code  
12 section 4301, subdivision (b) and/or (c), and/or Code section 4306.5, subdivision (a), in that their  
13 conduct was unprofessional, and/or that they inappropriately exercised their education, training  
14 and/or experience as a pharmacist. The circumstances are as follows:

15 (a) On or about February 14, 2018, while Respondent Rase was the PIC at San Jose  
16 Compounding Pharmacy, Respondent Rase failed to take accountability for the potential for a  
17 compounding error and failed to complete a quality assurance report when she was informed by  
18 consumers N. and D.W. (collectively NDW) of concerns related to a compound made by her  
19 pharmacy for prescription RX#143504.

20 (b) On or about July 2, 2018, while Respondent Sorci was the PIC at San Jose  
21 Compounding Pharmacy, Respondent Sorci instructed staff that garbing was not required if they  
22 were going in and out of the hazardous compounding room for less than five minutes, thereby  
23 potentially exposing staff to hazardous chemicals and allowing for cross-contamination to the  
24 general pharmacy area. As of October 5, 2021, Respondent Sorci maintained the same policy.

25 (c) On or about July 2, 2018, while Respondent Sorci was the PIC at San Jose  
26 Compounding Pharmacy, Respondent Sorci allowed staff to wear booties outside of the  
27 hazardous compounding room. Respondent Sorci allowed hair nets, beard covers and face masks  
28 to be reused for up to one week. Respondent Sorci allowed cleaning crews to clean the hazardous

1 compounding room without garbing if no compounding was taking place. Finally, Respondent  
2 Sorci instructed staff to wash hands first before garbing, rather than garbing first, while donning  
3 gloves last.

4 (d) On or about October 5, 2021, while Respondent Sorci was the PIC at San Jose  
5 Compounding Pharmacy, Respondent Sorci provided to the Inspector a list of hazardous drugs  
6 that did not include NIOSH Table 1, chemotherapy/anti-neoplastic, hazardous drugs which were  
7 compounded at San Jose Compounding Pharmacy. Chlorambucil and fluorouracil are listed in  
8 NIOSH Table 1. San Jose Compounding Pharmacy Policy and Procedure 7.010, section 7.11,  
9 states NIOSH Table 1 will be treated as hazardous. Between January 1, 2021 and October 5,  
10 2021, San Jose Compounding Pharmacy compounded eleven drugs containing chlorambucil and  
11 one containing fluorouracil.

12 (e) On or about October 5, 2021, while Respondent Sorci was the PIC at San Jose  
13 Compounding Pharmacy, Respondent San Jose Compounding Pharmacy stored chemotherapy/  
14 anti-neoplastic hazardous drugs, specifically, fluorouracil 2.5g/50ml and methotrexate  
15 250mg/10ml injectable, on the main pharmacy shelving amongst non-hazardous drugs. In  
16 addition, fluorouracil topical solution 5% was located in the non-sterile, non-hazardous  
17 compounding room on a shelf. These items were not stored in the hazardous room as required by  
18 San Jose Compounding Pharmacy Policy and Procedure 7.010, section 8.0.

#### 19 **SIXTH CAUSE FOR DISCIPLINE**

#### 20 **(Failure to Adhere to Compounding Policies and Procedures**

#### 21 **– Respondents SJCP, Rase, and Sorci)**

22 42. Respondent San Jose Compounding Pharmacy, Respondent Rase, and Respondent  
23 Sorci are subject to disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or  
24 Code section 4113, subdivision (c), in combination with California Code of Regulations, title 16,  
25 section 1735.5, subdivisions (a) and (c)(1), (3), and/or (11), and section 1735.7, subdivision (a),  
26 in that they violated statutes and/or regulations regulating compounded drug preparation by  
27 failing to maintain written documentation regarding appropriate garbing to prevent cross-  
28 contamination with non-hazardous drugs, and to maintain policies and procedures for proper

garbing when compounding, and to inform staff of changes in the policies and procedures, and procedures for evaluating, maintaining, certifying, cleaning and disinfecting the hazardous compounding room. The circumstances are as follows:

(a) On or about February 14, 2018, while Respondent Rase was PIC for San Jose Compounding Pharmacy, Respondent San Jose Compounding Pharmacy failed to follow the policy and procedures for proper cleaning and garbing when engaged in compounding and specifically for hazardous compounding. A technician entered the hazardous room without proper garbing. Respondent Rase failed to demonstrate and follow the proper cleaning and garbing as per Respondent San Jose Compounding Pharmacy's policies and failed to observe and ensure proper technique from her compounding staff.

(b) On or about July 2, 2018, Respondent San Jose Compounding Pharmacy maintained written instructions indicating to staff that garbing was not required if they were going in and out of the hazardous compounding room for less than five minutes, thereby potentially exposing staff to hazardous chemicals and allowing for cross-contamination to the general pharmacy area. When in the compounding room for longer than five minutes, written policy was for staff to garb in a manner inconsistent with industry standards, including washing hands before donning shoe covers. Shoes and hair are considered dirty, and not washing hands after donning shoe covers and hair net could potentially contaminate the compounder's hands. Additionally, staff were allowed to wear booties outside of the hazardous compounding room, and hair nets, beard covers and face masks could be reused for up to one week. Cleaning crews were permitted to clean the hazardous compounding room without garbing if no compounding was taking place.

#### **SEVENTH CAUSE FOR DISCIPLINE**

##### **(Failure to Maintain Proper Cleaning Instructions and Records for Compounding Room – Respondents SJCP, Rase, and Sorci)**

43. Respondent San Jose Compounding Pharmacy, Respondent Rase, and Respondent Sorci are subject to disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or Code section 4113, subdivision (c), in combination with California Code of Regulations, title 16, section 1735.6, subdivision (d) and/or California Code of Regulations, title 16, section 1735.5,

1 subdivisions (a) and (c)(4), in that they violated statutes and/or regulations regulating  
2 compounded drug preparation by failing to maintain effective written documentation regarding  
3 appropriate cleaning of facilities and equipment to prevent cross-contamination with non-  
4 hazardous drugs. The circumstances are as follows:

5 (a) On or about February 14, 2018, while Respondent Rase was the PIC for San Jose  
6 Compounding Pharmacy, Respondent San Jose Compounding Pharmacy failed to maintain  
7 accurate cleaning records to ensure proper steps were being taken to prevent contamination from  
8 the hazardous compounding room. A technician acknowledged that records showed a cleaning  
9 was marked off even though it had not been performed and the pharmacy failed to follow their  
10 own policy and procedure for ensuring proper cleaning records of the facility.

11 (b) On or about July 2, 2018, while Respondent Sorci was the PIC for San Jose  
12 Compounding Pharmacy, Respondent San Jose Compounding Pharmacy maintained written  
13 instructions titled "Cleaning and Maintenance of the Non-Sterile Compounding Area," SOP  
14 Number 3.050, for the maintenance of the non-sterile hazardous compounding area that require  
15 staff, among other things, to use a cleaning solution of 70% isopropyl alcohol, and in certain  
16 areas, mixed with 2% acidified bleach solution, with an approved decontamination solution of 2%  
17 Liquinox. On or about September 4 through 14, 2018, the United States Food and Drug  
18 Administration (FDA), Department of Health and Human Services, inspected Respondent San  
19 Jose Compounding Pharmacy and found that Respondent San Jose Compounding Pharmacy  
20 produced highly potent drugs without providing adequate containment, segregation, cleaning of  
21 work surfaces, cleaning of utensils and cleaning of personnel to prevent cross-contamination.  
22 Specially, Respondent San Jose Compounding Pharmacy's cleaning and decontamination  
23 solutions were not effective in deactivating hazardous drugs, or in removing highly potent  
24 residues. The FDA further found that Respondent San Jose Compounding Pharmacy's written  
25 procedure SOP Number 3.050 was not effective in deactivating hazardous drugs.

26 ///

1 **EIGHTH CAUSE FOR DISCIPLINE**

2 **(Failure to Maintain Smooth Surface in Hazardous Compounding Room –**  
3 **Respondents SJCP, Rase, and Sorci)**

4 44. Respondent San Jose Compounding Pharmacy, Respondent Rase, and Respondent  
5 Sorci are subject to disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or  
6 Code section 4113, subdivision (c), in combination with California Code of Regulations, title 16,  
7 section 1735.6, subdivision (e)(4), in that they violated statutes and/or regulations regulating  
8 compounded drug preparation by failing to maintain all surfaces within the hazardous  
9 compounding room smooth, seamless, impervious, and non-shedding. The circumstances are as  
10 follows:

11 (a) On or about February 14, 2018, while Respondent Rase was PIC for San Jose  
12 Compounding Pharmacy, Respondent San Jose Compounding Pharmacy failed to use non-porous  
13 and non-shedding items in the hazardous compounding room to prevent contamination between  
14 products. Respondents had within the hazardous compounding room spatulas with wood handles  
15 – wood is a porous material. Plastic spatulas in the hazardous compounding room had visible  
16 degradation of the plastic, discoloration, and tears on them.

17 (b) On or about July 2, 2018, while Respondent Sorci was PIC for San Jose  
18 Compounding Pharmacy, Respondent San Jose Compounding Pharmacy performed hazardous,  
19 non-sterile compounding in a separate hazardous compounding room separated from the general  
20 pharmacy by Plexiglas that is held in place by Velcro. The Velcro surface was rough and  
21 observed to be disconnected in places, allowing for air transfer between rooms.

22 **NINTH CAUSE FOR DISCIPLINE**

23 **(Failure to Certify Compounding Equipment – Respondents SJCP and Sorci)**

24 45. Respondent San Jose Compounding Pharmacy and Respondent Sorci are subject to  
25 disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or Code section 4113,  
26 subdivision (c), in combination with California Code of Regulations, title 16, section 1735.6,  
27 subdivision (b) and/or California Code of Regulations, title 16, section 1735.5, subdivisions (a)  
28 and (c)(4), in that they violated statutes and/or regulations regulating compounded drug

1 preparation by failing to maintain and certify equipment used to compound drug preparations in  
2 accordance with manufacturers' specifications. The circumstances are as follows:

3 (a) On or about July 2, 2018, Respondent San Jose Compounding Pharmacy maintained a  
4 Laminar Air Flow Hood in the compounding room that had not been certified since October 31,  
5 2016. Absent manufacturers' specifications, industry standard holds that hoods used for non-  
6 sterile compounding are certified annually. Respondent San Jose Compounding Pharmacy had no  
7 written policy for maintaining or certifying the Laminar Air Flow Hood.

#### 8 **TENTH CAUSE FOR DISCIPLINE**

##### 9 **(Failure to Maintain Pharmacy and Equipment in a Clean and Orderly Condition –** 10 **Respondents SJCP and Sorci)**

11 46. Respondent San Jose Compounding Pharmacy and Respondent Sorci are subject to  
12 disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or Code section 4113,  
13 subdivision (c), in combination with California Code of Regulations, title 16, section 1714,  
14 subdivision (c), in that they violated statutes and/or regulations regulating the practice of  
15 pharmacy, by failing to maintain pharmacy facilities, space, fixtures, and equipment in a clean  
16 and orderly condition. The circumstances are as follows:

17 (a) On or about July 2, 2018, Respondent San Jose Compounding Pharmacy had two  
18 filled trash bags placed on the floor in a back room that contained packaging material for reuse.  
19 Bags used for bagging prescriptions were stored in the bathroom directly in front of the toilet.

#### 20 **ELEVENTH CAUSE FOR DISCIPLINE**

##### 21 **(Failure to List Instructions for Storage – Respondents SJCP and Sorci)**

22 47. Respondent San Jose Compounding Pharmacy and Respondent Sorci are subject to  
23 disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or Code section 4113,  
24 subdivision (c), in combination with California Code of Regulations, title 16, section 1735.4,  
25 subdivision (a)(3), in that they violated statutes and/or regulations regulating compounded drug  
26 preparation, by failing to affix a container label and/or outer packaging label prior to dispensing  
27 that contained instructions for storage, handling, and administration. The circumstances are as  
28 follows:



1 (a) On or about June 20, 2018, Respondent San Jose Compounding Pharmacy dispensed  
2 prescription 147685 for benzocaine/lidocaine/tetracaine, the label for which failed to state proper  
3 instructions for storage.

4 **TWELFTH CAUSE FOR DISCIPLINE**

5 **(Failure to Label Compound Drug Preparations – Respondents SJCP, Rase and Sorci)**

6 48. Respondent San Jose Compounding Pharmacy, Respondent Rase, and Respondent  
7 Sorci are subject to disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or  
8 Code section 4113, subdivision (c), in combination with California Code of Regulations, title 16,  
9 section 1735.4, subdivision (a)(5) in that they violated statutes and/or regulations regulating  
10 compounded drug preparation by failing to affix a container label and/or outer packaging label  
11 prior to dispensing that contained the date compounded, and/or to properly label prescriptions  
12 compounded by San Diego Optimum Compounding Pharmacy. The circumstances are as follows:

13 (a) On or about June 29, 2017, while Respondent Rase was PIC for San Jose  
14 Compounding Pharmacy, Respondent San Jose Compounding Pharmacy failed to properly label  
15 prescriptions compounded by San Diego Optimum Compounding Pharmacy. Respondent San  
16 Jose Compounding Pharmacy removed the original prescription compounding label from San  
17 Diego Optimum Compounding Pharmacy by discarding all the label information and replacing it  
18 with a San Jose Compounding Pharmacy label. Additionally, by discarding the original label,  
19 Respondent San Jose Compounding Pharmacy failed to retain all the relevant information  
20 provided on the label from the compounding pharmacy including the name of the compounding  
21 pharmacy, the original compounding date, the expiration date and initials of the pharmacist  
22 verifying the prescription from San Diego Optimum Compounding Pharmacy.

23 (a) On or about July 2, 2018, while Respondent Sorci was PIC for San Jose  
24 Compounding Pharmacy, Respondent San Jose Compounding Pharmacy had in its refrigerator  
25 two sterile injectable drugs, prescription numbers 147700 for Trimix and 146244 for  
26 alprostadil/bupivacaine, that were compounded offsite. The labels for the two sterile injectable  
27 drugs did not contain the date compounded.

28 ///

**THIRTEENTH CAUSE FOR DISCIPLINE**

**(Failure to Document Measured Quantities of Ingredients – Respondents SJCP and Sorci)**

49. Respondent San Jose Compounding Pharmacy and Respondent Sorci are subject to disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or Code section 4113, subdivision (c), in combination with California Code of Regulations, title 16, section 1735.3, subdivision (a)(2)(E), in that they violated statutes and/or regulations regulating compounded drug preparation, by failing to maintain a compounding log that contained the quantity of each ingredient used in compounding the drug preparation. The circumstances are as follows:

(a) On or about July 2, 2018, Respondent San Jose Compounding Pharmacy's compounding log for the following lot orders did not contain the actual quantity of each ingredient used in compounding the drug preparation:

- (1) 06182018#8596-01@21;
- (2) 06182018#8596-01@22;
- (3) 06182018#8596-01@23;
- (4) 06182018#8596-01@24;
- (5) 06182018#9445-01@20;
- (6) 06282018#9445-01@19;
- (7) 06122018#9445-01@20;
- (8) 06152018#8397-02@6;
- (9) 06272018#9445-01@23;
- (10) 06192018#2992-02@36;
- (11) 06202018#9445-01@3;
- (12) 06202018#9445-01@5;
- (13) 06262018#6415-01@21;
- (14) 06222018#5291-01@18;
- (15) 06142018#6556-01@11;
- (16) 06152018#5714-01@19;
- (17) 06132018#9480-01@26.

(b) On or about October 5, 2021, Respondent San Jose Compounding Pharmacy's compounding log for the following lot orders did not contain the actual quantity of each ingredient used in compounding the drug preparation:

(1) 04022021#-7499-04@2;

(2) 05192021#-8248-02@6.

#### **FOURTEENTH CAUSE FOR DISCIPLINE**

##### **(Failure to Document Names of Manufacturers – Respondents SJCP and Sorci)**

50. Respondent San Jose Compounding Pharmacy and Respondent Sorci are subject to disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or Code section 4113, subdivision (c), in combination with California Code of Regulations, title 16, section 1735.3, subdivision (a)(2)(F), in that they violated statutes and/or regulations regulating compounded drug preparation, by failing to maintain a compounding log that contained the manufacturer of each ingredient used in compounding the drug preparation. The circumstances are as follows:

(a) On or about July 2, 2018, Respondent San Jose Compounding Pharmacy's compounding log for the following lot orders did not contain the manufacturer of each ingredient used in compounding the drug preparation:

(1) 06182018#8596-01@21;

(2) 06182018#8596-01@22;

(3) 06182018#8596-01@23;

(4) 06182018#8596-02@24;

(5) 06182018#9445-01@20;

(6) 06282018#9445-01@19;

(7) 06122018#9445-01@20;

(8) 06272018#9445-01@23;

(9) 06192018#2992-02@36;

(10) 06202018#9445-01@3;

(11) 06202018#9445-01@4;

(12) 06202018#9445-01@5;

(13) 06262018#6415-01@21;

(14) 06222018#5291-01@18.

(b) On or about October 5, 2021, Respondent San Jose Compounding Pharmacy's compounding log for the following lot orders did not contain the manufacturer of each ingredient used in compounding the drug preparation:

(1) 08162021 #-600@7;

(2) 03312021#-8013-02@14;

(3) 06172021#-8013-02@22;

(4) 05252021#-8941-04@5;

(5) 06302021#-8941-03@11;

(6) 07272021#-8941-03@7;

(7) 09162021#-5312-06@1.

#### **FIFTEENTH CAUSE FOR DISCIPLINE**

##### **(Failure to Document Correct Beyond Use Date – Respondents SJCP and Sorci)**

51. Respondent San Jose Compounding Pharmacy and Respondent Sorci are subject to disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or Code section 4113, subdivision (c), in combination with California Code of Regulations, title 16, section 1735.3, subdivision (a)(2)(H), in that they violated statutes and/or regulations regulating compounded drug preparation, by failing to maintain a compounding log that contained the beyond use date or beyond use date and time of the final compounded drug preparation. The circumstances are as follows:

(a) On or about October 5, 2021, Respondent San Jose Compounding Pharmacy's compounding log contained more than one beyond use date listed for the following lot orders:

(1) 04022021#-7499-04@2;

(2) 05202021#-9436-02@5.

#### **SIXTEENTH CAUSE FOR DISCIPLINE**

##### **(Prevention of Sale of Expired Medications – Respondents SJCP and Sorci)**

52. Respondent San Jose Compounding Pharmacy and Respondent Sorci are subject to

disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or Code section 4113, subdivision (c), in combination with Code section 4342, subdivision (a), in that they intended to sell pharmaceutical preparations and/or drugs that did not conform to the standard and tests as to quality and strength, provided in the latest edition of the United States Pharmacopoeia or the National Formulary, and/or that violated any provision of the Sherman Food, Drug, and Cosmetic Law. The Sherman Food, Drug, and Cosmetic Law prohibits the sale or offer for sale any drug or device that is adulterated. (Health & Saf. Code § 111295.) A drug or device is adulterated if it contains, in whole or in part, any filthy, putrid, or decomposed substance. (Health & Saf. Code § 111250.) The circumstances are as follows:

(a) On or about October 5, 2021, Respondent San Jose Compounding Pharmacy had in active stock, for sale, approximately nine expired over-the-counter drugs, dangerous drugs, and ingredients.

#### **SEVENTEENTH CAUSE FOR DISCIPLINE**

##### **(Assigned Expiration Date – Respondents SJCP and Sorci)**

53. Respondent San Jose Compounding Pharmacy and Respondent Rase are subject to disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or section 4113, subdivision (c), of the Code, in combination with California Code of Regulations, title 16, section 1735.2, subdivision (i), in that they violated statutes and/or regulations regulating compounded drug preparation by assigning an expiration date to a compound drug preparation that was beyond the expiration date or beyond use date of one or more of the ingredients. The circumstances are as follows:

(a) On or about October 5, 2021, Respondent San Jose Compounding Pharmacy and Respondent Sorci assigned a beyond use date of December 15, 2021 to the prescription number 161374, consisting of 60 capsules, which was one day beyond the beyond use date of an ingredient used to compound the drug. Per hybrid master formulas/compounding records for lot #09162021 #-5312-06@1, one of the ingredients used to compound the drug was levothyroxine diluent 1:1000 powder, lot number 06172021#-8013-02@22, which had a beyond use date of December 14, 2021.

1 **EIGHTEENTH CAUSE FOR DISCIPLINE**

2 **(Failure to Display Original License – Respondents SJCP and Sorci)**

3 54. Respondent San Jose Compounding Pharmacy and Respondent Sorci are subject to  
4 disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or Code section 4113,  
5 subdivision (c), in combination Code section 4058, in that they failed to display the Respondent  
6 San Jose Compounding Pharmacy's original license and current renewal license upon the licensed  
7 premises in a place where it may be clearly read by the public. The circumstances are as follows:

8 (a) On or about October 5, 2021, only Respondent San Jose Compounding Pharmacy's  
9 current renewal pharmacy license was on display.

10 **NINETEENTH CAUSE FOR DISCIPLINE**

11 **(Failure to Prepare an Adequate Written Master Formula**

12 **– Respondents SJCP, Sorci and Rase)**

13 55. Respondent San Jose Compounding Pharmacy, Respondent Rase, and Respondent  
14 Sorci are subject to disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or  
15 section 4113, subdivision (c), of the Code, in combination with California Code of Regulations,  
16 title 16, section 1735.2, subdivision (e), in that they violated statutes and/or regulations regulating  
17 compounded drug preparation by failing to prepare an adequate written master formula including  
18 the necessary elements. The circumstances are as follows:

19 (a) On or about February 14, 2018, while Respondent Rase was PIC for San Jose  
20 Compounding Pharmacy, Respondent San Jose Compounding Pharmacy failed to have a master  
21 formula that outlined the quality review steps required at each step in the preparation of a  
22 compounded drug and a post-compounding process or procedure to verify the final product. The  
23 master formula record for consumers NDW cat's prescription RX#143504 did not show what the  
24 end product should look like or provide a document that confirmed the product made matched the  
25 quality assurance steps of the master formula.

26 (b) On or about October 5, 2021, while Respondent Sorci was PIC for San Jose  
27 Compounding Pharmacy, Respondent San Jose Compounding Pharmacy failed to prepare a  
28 written master formula document that includes at least the specific and essential compounding

steps used to prepare the drug. The following hybrid master formulas/compounding records for three lots of compounded dilution powders were used in approximately 10 prescriptions for approximately 755 compounded T4/T3 capsules contained incorrect specific and essential compounding steps:

(1) For levothyroxine 1:1000 dilution powder, lot: 03312021#-8013-02@14, used in compounding at least seven prescriptions, the steps did not list the correct ingredients, stated the incorrect amount of water and loss on drying, incorrect quantities of ingredients and incorrectly stated what to label the compounded product.

(2) For levothyroxine 1:1000 dilution powder, lot: 06172021#-8013-02@22, used in compounding at least three prescriptions, the steps did not list-the correct ingredients, stated the incorrect amount of water and loss on drying, incorrect quantities of ingredients, incorrectly stated what to label the compounded product and stated to store the compounded product in glass when in fact, it was being stored in plastic.

(3) For liothyronine 1:1000 dilution powder, lot: 03312021#-8013-01@16, used in compounding at least seven prescriptions, the steps did not list the correct ingredients.

#### **TWENTIETH CAUSE FOR DISCIPLINE**

##### **(Out of State Order of Dangerous Drugs or Devices – Respondents SJCP and Rase)**

56. Respondent San Jose Compounding Pharmacy and Respondent Rase are subject to disciplinary action under Code section 4059.5, subdivision (e), in that Respondents transferred, sold, or delivered to a person outside this state, a dangerous drug or device, in a manner not in compliance with the laws of California and of the United States and of the state or country to which the dangerous drugs or dangerous devices were transferred, sold, or delivered. The circumstances are as follows:

(a) From October 18, 2016 to February 28, 2017, Respondents shipped 15 prescriptions for dangerous drugs outside of California to patients in Oregon, Nevada, Arizona, and Michigan without proper licensure to ensure compliance with the laws of each state. At the time, Respondent Rase was the dispensing pharmacist while acting as the interim pharmacist-in-charge.

(b) From approximately March 1, 2017 to June 29, 2017, Respondents shipped 19 prescriptions for dangerous drugs outside of California to patients in Oregon, Nevada, Arizona, and Michigan without proper licensure to ensure compliance with the laws of each state.

#### **TWENTY-FIRST CAUSE FOR DISCIPLINE**

##### **(Unprofessional Conduct – Change in Ownership – Respondent SJCP)**

57. Respondent San Jose Compounding Pharmacy is subject to disciplinary action under Code section 4301, subdivision (g), in combination with California Code of Regulations, title 16, section 1709, subdivisions (b) and (c), in that Respondent's conduct was unprofessional when it failed to notify the Board of a transfer in beneficial interest in a business entity licensed by the Board, and failed to apply for a change of ownership. The circumstances are as follows:

(a) On or about June 29, 2017 and through at least March 2018, Respondent San Jose Compounding Pharmacy made changes in the corporate officers and ownership during the pharmacy permit process and failed to notify the Board of the change. Board investigators informed Respondent San Jose Compounding Pharmacy of the violation and how to correct it on June 29, 2017, July 5, 2017, and July 20, 2017. Respondent San Jose Compounding Pharmacy failed to submit the change as requested until after March 2018.

#### **TWENTY-SECOND CAUSE FOR DISCIPLINE**

##### **(Failure to Follow Quality Assurance Plan – Respondents SJCP and Rase)**

58. Respondent San Jose Compounding Pharmacy and Respondent Rase are subject to disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or section 4113, subdivision (c), of the Code, in combination with California Code of Regulations, title 16, section 1735.8, subdivision (d), in that they violated statutes and/or regulations regulating compounding quality assurance by failing to follow a written procedure for scheduled action in the event any compounded drug preparation is ever discovered to be outside minimum standards for integrity, potency, quality, or labeled strength. The circumstances are as follows:

(a) On or about October 20, 2017, Respondent San Jose Compounding Pharmacy filled a compounded prescription for replacement amlodipine 4.5 mg/ml (RX#143504) for consumers NDW to treat their cat's blood pressure. NDW observed that the medication that Respondent San



1 Jose Compounding Pharmacy provided had separated and turned cloudy with a dark chunk on the  
2 bottom. In addition, their cat's blood pressure did not improve.

3 (b) On or about February 14, 2018, Respondents failed to take action when they were  
4 notified of quality and potency issues with a compounded prescription RX#143504 from  
5 consumers NDW and failed to investigate other compounded products that may have been  
6 impacted due to a shared compounded ingredient.

### 7 **TWENTY-THIRD CAUSE FOR DISCIPLINE**

#### 8 **(Failure to Have a Quality Assurance Plan – Respondents SJCP and Rase)**

9 59. Respondent San Jose Compounding Pharmacy and Respondent Rase are subject to  
10 disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or section 4113,  
11 subdivision (c), of the Code, in combination with California Code of Regulations, title 16, section  
12 1711, subdivisions (c), (d), and (e), in that they violated statutes and/or regulations regulating  
13 quality assurance programs by failing to have a quality assurance policy and procedure for  
14 documenting medication error reporting, and/or for failing to communicate with the patient and  
15 prescriber regarding the medication error, and/or by failing to document the medication error,  
16 and/or for failing to investigate a complaint of potency and quality issues within two days of  
17 being notified of the complaint. The circumstances are as follows:

18 (a) On or about February 14, 2018, Respondents failed to have a quality assurance policy  
19 and procedure for documenting medication error reporting. Respondents failed to document their  
20 medication error in filling compounded RX#143504 for consumers NDW, and did not investigate  
21 the complaint from consumer NDW of potency and quality issues with their cat's compounded  
22 prescription.

### 23 **TWENTY-FOURTH CAUSE FOR DISCIPLINE**

#### 24 **(Failure to Maintain Appropriate Instruction for Recall of Dispensed Drug Preparation –** 25 **Respondents SJCP and Rase)**

26 60. Respondent San Jose Compounding Pharmacy and Respondent Rase are subject to  
27 disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or section 4113,  
28 subdivision (c), of the Code, in combination with California Code of Regulations, title 16, section

1 1735.5, subdivisions (a) and (c)(2), that they violated statutes and/or regulations regulating  
2 compounded drug preparation by failing to maintain effective written documentation regarding  
3 recall of a dispensed compounded drug preparation where subsequent information demonstrates  
4 the potential for adverse effects with continued use. The circumstances are as follows:

5 (a) On or about February 14, 2018, Respondents failed to initiate a recall of prescriptions  
6 that were suspected to have been compounded with a product used in multiple preparations when  
7 it received a complaint from consumers NWD alleging the prescription RX#143504 was  
8 ineffective and the preparation had quality issues.

9 **TWENTY-FIFTH CAUSE FOR DISCIPLINE**

10 **(Failure to Annually Update and Review Compounding Policies and Procedures –**  
11 **Respondents SJCP and Rase)**

12 61. Respondent San Jose Compounding Pharmacy and Respondent Rase are subject to  
13 disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or section 4113,  
14 subdivision (c), of the Code, in combination with California Code of Regulations, title 16, section  
15 1735.5, subdivision (b), in that they violated statutes and/or regulations regulating compounded  
16 drug preparation by failing to document, review, and update when changes are made, the  
17 compounding policies and procedures on a yearly basis. The circumstances are as follows:

18 (a) On or about February 14, 2018, it was discovered that Respondents failed to update  
19 the compounding policy and procedures annually, and failed to review the changes with the  
20 compounding staff.

21 **TWENTY-SIXTH CAUSE FOR DISCIPLINE**

22 **(Failure to Maintain Negative Pressure in Compounding Room –**  
23 **Respondents SJCP and Rase)**

24 62. Respondent San Jose Compounding Pharmacy and Respondent Rase are subject to  
25 disciplinary action under Code section 4301, subdivision (j) and/or (o), and/or section 4113,  
26 subdivision (c), of the Code, in combination with California Code of Regulations, title 16, section  
27 1735.6, subdivision (e)(2), in that they violated statutes and/or regulations regulating  
28

1 compounding facilities and equipment by failing to maintain a negative pressure of 0.01 to 0.03  
2 inches of water column relative to all adjacent spaces. The circumstances are as follows:

3 (a) On or about February 14, 2018, Respondents failed to maintain the negative pressure  
4 required for the hazardous compounding room.

5 (b) On or about June 29, 2017, the negative pressurization of the hazardous compounding  
6 room was found to be off.

7 **TWENTY-SEVENTH CAUSE FOR DISCIPLINE**

8 **(Unprofessional Conduct – Subverting Investigation –**  
9 **Respondents SJCP, Rase, and Acharya)**

10 63. Respondent San Jose Compounding Pharmacy, Respondent Rase, and Respondent  
11 Acharya are subject to disciplinary action under Code section 4301, subdivision (q), in  
12 conjunction with Code section 4116, subdivision (a), in that Respondents' conduct was  
13 unprofessional when they engaged in conduct that subverted or attempted to subvert an  
14 investigation of the Board. The circumstances are as follows:

15 (a) On or about June 29, 2017, Board investigators performed an inspection of  
16 Respondent San Jose Compounding Pharmacy. At the start of the inspection, Vishal Purohit,  
17 whose pharmacist license was revoked on July 29, 2016, fled out the back door of the pharmacy  
18 with a lab coat in hand. Respondent Acharya was present with Vishal Purohit in the pharmacy  
19 and Respondent Acharya was responsible for him. When Board investigators asked what Vishal  
20 Purohit was doing in the back of the pharmacy, Respondent Acharya feigned ignorance of Vishal  
21 Purohit and disavowed responsibility for the activities of Vishal Purohit in the pharmacy. During  
22 the inspection, Board investigators discovered a document titled "HOT LIST" instructing staff to  
23 obstruct any Board inspections and to obstruct access to the storage area of the pharmacy and  
24 instructing staff to answer investigators' questions only with yes or no answers.

25 **OTHER MATTERS**

26 64. Pursuant to Code section 4307, if discipline is imposed on Pharmacy Permit Number  
27 PHY 54957 issued to Respondent San Jose Compounding Pharmacy, then any person who has  
28 been a manager, administrator, owner, member, officer, director, associate, partner, or any other

1 person with management or control of any partnership, corporation, trust, firm, or association  
2 which received this discipline or denial, and while acting as the manager, administrator, owner,  
3 member, officer, director, associate, partner, or any other person with management or control, had  
4 knowledge of or knowingly participated in any conduct leading to discipline or denial, shall be  
5 prohibited from serving as a manager, administrator, owner, member, officer, director, associate,  
6 or partner of a licensee for five years if Pharmacy Permit Number PHY 54957 is placed on  
7 probation or until Pharmacy Permit Number PHY 54957 is reinstated if it is revoked.

8 65. Pursuant to Code section 4307, if discipline is imposed on Pharmacist License No.  
9 RPH 45060 issued to Respondent Sorci, Respondent Sorci shall be prohibited from serving as a  
10 manager, administrator, owner, member, officer, director, associate, or partner of a licensee for  
11 five years if Pharmacist License Number RPH 45060 is placed on probation or until Pharmacist  
12 License Number RPH 45060 is reinstated if it is revoked.

13 66. Pursuant to Code section 4307, if discipline is imposed on Pharmacist License No.  
14 RPH 75062 issued to Respondent Rase, Respondent Rase shall be prohibited from serving as a  
15 manager, administrator, owner, member, officer, director, associate, or partner of a licensee for  
16 five years if Pharmacist License Number RPH 75062 is placed on probation or until Pharmacist  
17 License Number RPH 75062 is reinstated if it is revoked.

18 67. Pursuant to Code section 4307, if discipline is imposed on Pharmacist License No.  
19 RPH 76346 issued to Respondent Acharya, Respondent Acharya shall be prohibited from serving  
20 as a manager, administrator, owner, member, officer, director, associate, or partner of a licensee  
21 for five years if Pharmacist License Number RPH 76346 is placed on probation or until  
22 Pharmacist License Number RPH 76346 is reinstated if it is revoked.

23 68. Pursuant to Code section 4307, if discipline is imposed on Pharmacist License No.  
24 RPH 24981 issued to Respondent Martin, Respondent Martin shall be prohibited from serving as  
25 a manager, administrator, owner, member, officer, director, associate, or partner of a licensee for  
26 five years if Pharmacist License Number RPH 24981 is placed on probation or until Pharmacist  
27 License Number RPH 24981 is reinstated if it is revoked.

28 ///

1 **DISCIPLINE CONSIDERATIONS**

2 69. To determine the degree of discipline, if any, to be imposed on Respondent San Jose  
3 Compounding Pharmacy, Complainant alleges that on or about July 18, 2018, in a prior action,  
4 the Board of Pharmacy issued Citation Number CI 2016 74000 and ordered Respondent San Jose  
5 Compounding Pharmacy to pay a fine of \$5,000.00 for unprofessional conduct in violation of  
6 Business and Professions Code sections 4301, subdivision (f) and 651, subdivision (a). That  
7 citation is now final.

8 70. To determine the degree of discipline, if any, to be imposed on Respondent Sorci,  
9 Complainant alleges that on or about February 15, 2017, in a prior action, the Board of Pharmacy  
10 issued Citation Number CI 2016 74022 and ordered Respondent Sorci to pay a fine of \$2,750.00  
11 for violations of Health and Safety Code section 11164, subdivision (a), and California Code of  
12 Regulations, title 16, section 1761. That Citation is now final.

13 **PRAYER**

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

16 1. Revoking or suspending Pharmacy Permit Number PHY 54957, issued to Respondent  
17 White House Pharmacy Inc., dba San Jose Compounding Pharmacy; Patrick Joseph D'Angelo  
18 Chief Financial Officer, President, Secretary, Treasurer and sole shareholder;

19 2. Revoking or suspending Pharmacist License Number RPH 45060, issued to  
20 Respondent John T. Sorci;

21 3. Revoking or suspending Pharmacist License Number RPH 75062, issued to  
22 Respondent Mara Tibayan Rase;

23 4. Revoking or suspending Pharmacist License Number RPH 76346, issued to  
24 Respondent Shivan Acharya;

25 5. Revoking or suspending Pharmacist License No. RPH 24981, issued to Respondent  
26 Gary Edward Martin;

27 6. Prohibiting Respondents from serving as a manager, administrator, owner, member,  
28 officer, director, associate, or partner of a licensee for five years if an applicable license is placed

1 on probation or until any license revoked or denied is issued or reinstated;

2 7. Ordering Respondents to pay the Board of Pharmacy the reasonable costs of the  
3 investigation and enforcement of this case, pursuant to Business and Professions Code section  
4 125.3; and,

5 8. Taking such other and further action as deemed necessary and proper.

6  
7  
8 DATED: 4/12/2022

Signature on File

9 ANNE SODERGREN  
10 Executive Officer  
11 Board of Pharmacy  
12 Department of Consumer Affairs  
13 State of California  
14 *Complainant*

15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28  
SF2019202111  
21655815.docx