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

In the Matter of the Accusation Against:

CYNOB PHARMACY LLC dba CYNOB PHARMACY LLC; OBINNA OKEREKE; NKECHINYERE EGOWURE OKEREKE; Pharmacy Permit No. PHY 55694;

and

OBINNA OKEREKE, Pharmacist License No. RPH 65105,

Respondents

Agency Case No. 7015

DECISION AND ORDER

The attached Stipulated Settlement and Disciplinary Order is hereby adopted by the

Board of Pharmacy, Department of Consumer Affairs, as its Decision in this matter.

By

This Decision shall become effective at 5:00 p.m. on September 8, 2021.

It is so ORDERED on August 9, 2021.

BOARD OF PHARMACY DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

eun

Seung W. Oh, Pharm.D. Board President

DECISION AND ORDER AS TO OBINNA OKEREKE ONLY (CASE NO. 7015) PAGE 2

1	Rob Bonta		
2	Attorney General of California ARMANDO ZAMBRANO		
3	Supervising Deputy Attorney General STEPHANIE J. LEE		
4	Deputy Attorney General State Bar No. 279733		
5	300 So. Spring Street, Suite 1702 Los Angeles, CA 90013		
6	Telephone: (213) 269-6185 Facsimile: (916) 731-2126		
7	Attorneys for Complainant		
8	BEFOR	Е ТНЕ	
9	BOARD OF F DEPARTMENT OF C		
10	STATE OF C.		
11			
12	In the Matter of the Accusation Against:	Case No. 7015	
13	CYNOB PHARMACY LLC, DBA CYNOB PHARMACY LLC, OBINNA OKEREKE,	OAH No. 2021010793	
14	NKECHINYERE EGOWURE OKEREKE 13041 Rosecrans Ave. #206	STIPULATED SETTLEMENT AND DISCIPLINARY ORDER	
15	Norwalk, CA 90650	DISCIPLINARY ORDER	
16	Pharmacy Permit No. PHY 55694,	As to Respondent Obinna Okereke only	
17	and		
18	OBINNA OKEREKE 13041 Rosecrans Ave., Ste 206		
19	Norwalk, CA 90650		
20	Pharmacist License No. RPH 65105		
21	Respondents.		
22			
23	IT IS HEREBY STIPULATED AND AGR	EED by and between the parties to the above-	
24	entitled proceedings that the following matters are	e true:	
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		STIPULATED SETTLEMENT (7015)	

1	PARTIES		
2	1. Anne Sodergren (Complainant) is the Executive Officer of the Board of Pharmacy		
3	(Board). She brought this action solely in her official capacity and is represented in this matter by		
4	Rob Bonta, Attorney General of the State of California, by Stephanie J. Lee, Deputy Attorney		
5	General.		
6	2. Respondent Obinna Okereke (Respondent) is representing himself in this proceeding		
7	and has chosen not to exercise his right to be represented by counsel.		
8	3. On or about December 15, 2010, the Board of Pharmacy issued Pharmacist License		
9	Number RPH 65105 to Obinna Okereke (Respondent). The Pharmacist License was in full force		
10	and effect at all times relevant to the charges brought herein and will expire on March 31, 2022,		
11	unless renewed.		
12	JURISDICTION		
13	4. Accusation No. 7015 was filed before the Board, and is currently pending against		
14	Respondent. The Accusation and all other statutorily required documents were properly served		
15	on Respondent on December 31, 2020. Respondent timely filed its Notice of Defense contesting		
16	the Accusation.		
17	5. A copy of Accusation No. 7015 is attached as Exhibit A and incorporated herein by		
18	reference.		
19	ADVISEMENT AND WAIVERS		
20	6. Respondent has carefully read, and understands the charges and allegations in		
21	Accusation No. 7015. Respondent has also carefully read, and understands the effects of this		
22	Stipulated Settlement and Disciplinary Order.		
23	7. Respondent is fully aware of its legal rights in this matter, including the right to a		
24	hearing on the charges and allegations in the Accusation; the right to be represented by counsel at		
25	its own expense; the right to confront and cross-examine the witnesses against them; the right to		
26	present evidence and to testify on its own behalf; the right to the issuance of subpoenas to compel		
27	the attendance of witnesses and the production of documents; the right to reconsideration and		
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	STIPULATED SETTLEMENT (7015)		

1	court review of an adverse decision; and all other rights accorded by the California		
2	Administrative Procedure Act and other applicable laws.		
3	8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and		
4	every right set forth above.		
5	<u>CULPABILITY</u>		
6	9. Respondent admits the truth of each and every charge and allegation in Accusation		
7	No. 7015.		
8	10. Respondent agrees that their Pharmacist License is subject to discipline and they		
9	agree to be bound by the Board's probationary terms as set forth in the Disciplinary Order below.		
10	<u>CONTINGENCY</u>		
11	11. This stipulation shall be subject to approval by the Board of Pharmacy. Respondent		
12	understands and agrees that counsel for Complainant and the staff of the Board of Pharmacy may		
13	communicate directly with the Board regarding this stipulation and settlement, without notice to		
14	or participation by Respondent. By signing the stipulation, Respondent understands and agrees		
15	that they may not withdraw its agreement or seek to rescind the stipulation prior to the time the		
16	Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and		
17	Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for		
18	this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall		
19	not be disqualified from further action by having considered this matter.		
20	12. The parties understand and agree that Portable Document Format (PDF) and facsimile		
21	copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile		
22	signatures thereto, shall have the same force and effect as the originals.		
23	13. This Stipulated Settlement and Disciplinary Order is intended by the parties to be an		
24	integrated writing representing the complete, final, and exclusive embodiment of their agreement.		
25	It supersedes any and all prior or contemporaneous agreements, understandings, discussions,		
26	negotiations, and commitments (written or oral). This Stipulated Settlement and Disciplinary		
27	Order may not be altered, amended, modified, supplemented, or otherwise changed except by a		
28	writing executed by an authorized representative of each of the parties.		
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	STIPULATED SETTLEMENT (7015)		

1	14. In consideration of the foregoing admissions and stipulations, the parties agree that
2	the Board may, without further notice or formal proceeding, issue and enter the following
3	Disciplinary Order:
4	DISCIPLINARY ORDER
5	IT IS HEREBY ORDERED that Pharmacist License Number RPH 65105 issued to
6	Respondent Obinna Okereke is revoked. However, the revocation is stayed and Respondent is
7	placed on probation for four (4) years on the following terms and conditions:
8	1. Obey All Laws
9	Respondent shall obey all state and federal laws and regulations.
10	Respondent shall report any of the following occurrences to the Board, in writing, within
11	seventy- two (72) hours of such occurrence:
12	• an arrest or issuance of a criminal complaint for violation of any provision of the
13	Pharmacy Law, state and federal food and drug laws, or state and federal controlled
14	substances laws
15	• a plea of guilty, or nolo contendere, no contest, or similar, in any state or federal
16	criminal proceeding to any criminal complaint, information or indictment
17	• a conviction of any crime
18	• the filing of a disciplinary pleading, issuance of a citation, or initiation of another
19	administrative action filed by any state or federal agency which involves
20	Respondent's license or which is related to the practice of pharmacy or the
21	manufacturing, obtaining, handling, distributing, billing, or charging for any drug,
22	device or controlled substance.
23	Failure to timely report such occurrence shall be considered a violation of probation.
24	2. Report to the Board
25	Respondent shall report to the Board quarterly, on a schedule as directed by the Board or its
26	designee. The report shall be made either in person or in writing, as directed. Among other
27	requirements, Respondent shall state in each report under penalty of perjury whether there has
28	been compliance with all the terms and conditions of probation.
	4
	STIPULATED SETTLEMENT (7015)

Failure to submit timely reports in a form as directed shall be considered a violation of 2 probation. Any period(s) of delinquency in submission of reports as directed may be added to the total period of probation. Moreover, if the final probation report is not made as directed, 3 probation shall be automatically extended until such time as the final report is made and accepted 4 5 by the Board.

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3. Interview with the Board

Upon receipt of reasonable prior notice, Respondent shall appear in person for interviews 7 with the Board or its designee, at such intervals and locations as are determined by the Board or 8 its designee. Failure to appear for any scheduled interview without prior notification to Board 9 staff, or failure to appear for two (2) or more scheduled interviews with the Board or its designee 10 during the period of probation, shall be considered a violation of probation.

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Cooperate with Board Staff

Respondent shall timely cooperate with the Board's inspection program and with the 13 14 Board's monitoring and investigation of Respondent's compliance with the terms and conditions of Respondent's probation, including but not limited to: timely responses to requests for 15 information by Board staff; timely compliance with directives from Board staff regarding 16 requirements of any term or condition of probation; and timely completion of documentation 17 pertaining to a term or condition of probation. Failure to timely cooperate shall be considered a 18 violation of probation. 19

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5. **Continuing Education**

Respondent shall provide evidence of efforts to maintain skill and knowledge as a 21 pharmacist as directed by the Board or its designee. 22

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6. **Reporting of Employment and Notice to Employers**

24 During the period of probation, Respondent shall notify all present and prospective employers of the decision in case number 7015 and the terms, conditions and restrictions imposed 25 on Respondent by the decision, as follows: 26

Within thirty (30) days of the effective date of this decision, and within ten (10) days of 27 undertaking any new employment, Respondent shall report to the Board in writing the name, 28

physical address, and mailing address of each of Respondent's employer(s), and the name(s) and 1 2 telephone number(s) of all of Respondent's direct supervisor(s), as well as any pharmacist(s)-incharge, designated representative(s)-in-charge, responsible manager, or other compliance 3 supervisor(s) and the work schedule, if known. Respondent shall also include the reason(s) for 4 5 leaving the prior employment. Respondent shall sign and return to the Board a written consent authorizing the Board or its designee to communicate with all of Respondent's employer(s) and 6 7 supervisor(s), and authorizing those employer(s) or supervisor(s) to communicate with the Board or its designee, concerning Respondent's work status, performance, and monitoring. Failure to 8 comply with the requirements or deadlines of this condition shall be considered a violation of 9 probation. 10

Within thirty (30) days of the effective date of this decision, and within fifteen (15) days of 11 Respondent undertaking any new employment, Respondent shall cause (a) Respondent's direct 12 supervisor, (b) Respondent's pharmacist-in-charge, designated representative-in-charge, 13 responsible manager, or other compliance supervisor, and (c) the owner or owner representative 14 of Respondent's employer, to report to the Board in writing acknowledging that the listed 15 individual(s) has/have read the decision in case number 7015, and terms and conditions imposed 16 thereby. If one person serves in more than one role described in (a), (b), or (c), the 17 acknowledgment shall so state. It shall be the Respondent's responsibility to ensure that these 18 acknowledgment(s) are timely submitted to the Board. In the event of a change in the person(s) 19 serving the role(s) described in (a), (b), or (c) during the term of probation, Respondent shall 20cause the person(s) taking over the role(s) to report to the Board in writing within fifteen (15) 21 days of the change acknowledging that he or she has read the decision in case number 7015, and 22 the terms and conditions imposed thereby. 23

If Respondent works for or is employed by or through an employment service, Respondent must notify the person(s) described in (a), (b), and (c) above at every entity licensed by the Board of the decision in case number 7015, and the terms and conditions imposed thereby in advance of Respondent commencing work at such licensed entity. A record of this notification must be provided to the Board upon request. Furthermore, within thirty (30) days of the effective date of this decision, and within fifteen (15) days of Respondent undertaking any new employment by or through an employment service, Respondent shall cause the person(s) described in (a), (b), and (c) above at the employment service to report to the Board in writing acknowledging that he or she has read the decision in case number, and the terms and conditions imposed thereby. It shall be Respondent's responsibility to ensure that these acknowledgment(s) are timely submitted to the Board.

Failure to timely notify present or prospective employer(s) or failure to cause the identified
person(s) with that/those employer(s) to submit timely written acknowledgments to the Board
shall be considered a violation of probation.

"Employment" within the meaning of this provision includes any full-time, part-time,
temporary, relief, or employment/management service position as a pharmacist, or any position
for which a pharmacist is a requirement or criterion for employment, whether the Respondent is
an employee, independent contractor or volunteer.

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Notification of Change(s) in Name, Address(es), or Phone Number(s)

Respondent shall further notify the Board in writing within ten (10) days of any change in
name, residence address, mailing address, e-mail address or phone number.

Failure to timely notify the Board of any change in employer, name, address, or phonenumber shall be considered a violation of probation.

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Restrictions on Supervision and Oversight of Licensed Facilities

During the period of probation, Respondent shall not supervise any intern pharmacist or 20 serve as a consultant to any entity licensed by the Board. Respondent may be a pharmacist-in-21 charge, designated representative-in-charge, responsible manager or other compliance supervisor 22 of any single entity licensed by the Board, but only if Respondent or that entity retains, at 23 24 Respondent's expense, an independent consultant who shall be responsible for reviewing the operations of the entity on a monthly basis for compliance by Respondent and the entity with 25 state and federal laws and regulations governing the practice of the entity, and compliance by 26 Respondent with the obligations of Respondent's supervisory position. Respondent may serve in 27 28 such a position at only one entity licensed by the Board, only upon approval by the Board or its

designee. Any such approval shall be site specific. The consultant shall be a pharmacist licensed 1 2 by and not on probation with the Board, who has been approved by the Board or its designee to serve in this position. Respondent shall submit the name of the proposed consultant to the Board 3 or its designee for approval within thirty (30) days of the effective date of the decision or prior to 4 5 assumption of duties allowed in this term. Assumption of any unauthorized supervision responsibilities shall be considered a violation of probation. In addition, failure to timely seek 6 7 approval for, timely retain, or ensure timely reporting by the consultant shall be considered a violation of probation. 8

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Reimbursement of Board Costs

As a condition precedent to successful completion of probation, Respondent shall pay to the
Board its costs of investigation and prosecution in the amount of \$13,500.00. Respondent and
CYNOB Pharmacy LLC, dba CYNOB Pharmacy LLC shall be jointly and severally liable for
payment of these costs.

Respondent shall be permitted to pay these costs in a payment plan approved by the Board
or its designee, so long as full payment is completed no later than one (1) year prior to the end
date of probation.

There shall be no deviation from this schedule absent prior written approval by the Board or
its designee. Failure to pay costs by the deadline(s) as directed shall be considered a violation of
probation.

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10. Probation Monitoring Costs

Respondent shall pay any costs associated with probation monitoring as determined by the
Board each and every year of probation. Such costs shall be payable to the Board on a schedule
as directed by the Board or its designee. Failure to pay such costs by the deadline(s) as directed
shall be considered a violation of probation.

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11. Status of License

Respondent shall, at all times while on probation, maintain an active, current Pharmacist
License with the Board, including any period during which suspension or probation is tolled.

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Failure to maintain an active, current Pharmacist License shall be considered a violation of probation.

If Respondent's Pharmacist License expires or is cancelled by operation of law or otherwise at any time during the period of probation, including any extensions thereof due to tolling or otherwise, upon renewal or reapplication Respondent's license shall be subject to all terms and conditions of this probation not previously satisfied.

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12. License Surrender While on Probation/Suspension

Following the effective date of this decision, should Respondent cease practice due to 8 9 retirement or health, or be otherwise unable to satisfy the terms and conditions of probation, Respondent may relinquish Respondent's license, including any indicia of licensure issued by the 10 Board, along with a request to surrender the license. The Board or its designee shall have the 11 discretion whether to accept the surrender or take any other action it deems appropriate and 12 reasonable. Upon formal acceptance of the surrender of the license, Respondent will no longer be 13 14 subject to the terms and conditions of probation. This surrender constitutes a record of discipline and shall become a part of the Respondent's license history with the Board. 15

Upon acceptance of the surrender, Respondent shall relinquish Respondent's pocket and/or wall license, including any indicia of licensure not previously provided to the Board within ten (10) days of notification by the Board that the surrender is accepted if not already provided. Respondent may not reapply for any license from the Board for three (3) years from the effective date of the surrender. Respondent shall meet all requirements applicable to the license sought as of the date the application for that license is submitted to the Board, including any outstanding costs.

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13. Practice Requirement – Extension of Probation

Except during periods of suspension, Respondent shall, at all times while on probation, be employed as a pharmacist in California for a minimum of 100 hours per calendar month. Any month during which this minimum is not met shall extend the period of probation by one month. During any such period of insufficient employment, Respondent must nonetheless comply with

all terms and conditions of probation, unless Respondent receives a waiver in writing from the Board or its designee.

If Respondent does not practice as a pharmacist in California for the minimum number of 3 hours in any calendar month, for any reason (including vacation), Respondent shall notify the 4 5 Board in writing within ten (10) days of the conclusion of that calendar month. This notification shall include at least: the date(s), location(s), and hours of last practice; the reason(s) for the 6 interruption or reduction in practice; and the anticipated date(s) on which Respondent will resume 7 practice at the required level. Respondent shall further notify the Board in writing within ten (10) 8 9 days following the next calendar month during which Respondent practices as a pharmacist in California for the minimum of hours. Any failure to timely provide such notification(s) shall be 10 considered a violation of probation. 11

It is a violation of probation for Respondent's probation to be extended pursuant to the
provisions of this condition for a total period, counting consecutive and non-consecutive months,
exceeding thirty-six (36) months. The Board or its designee may post a notice of the extended
probation period on its website.

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14. Violation of Probation

17 If Respondent has not complied with any term or condition of probation, the Board shall 18 have continuing jurisdiction over Respondent, and the Board shall provide notice to Respondent 19 that probation shall automatically be extended, until all terms and conditions have been satisfied 20 or the Board has taken other action as deemed appropriate to treat the failure to comply as a 21 violation of probation, to terminate probation, and to impose the penalty that was stayed. The 22 Board or its designee may post a notice of the extended probation period on its website.

If Respondent violates probation in any respect, the Board, after giving Respondent notice and an opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If a petition to revoke probation or an accusation is filed against Respondent during probation, or the preparation of an accusation or petition to revoke probation is requested from the Office of the Attorney General, the Board shall have continuing jurisdiction and the period of probation shall be automatically extended until the petition to revoke probation or accusation is

heard and decided.

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15. Completion of Probation

Upon written notice by the Board or its designee indicating successful completion of probation, Respondent's license will be fully restored.

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16. **Remedial Education**

Within sixty (60) days of the effective date of this decision, Respondent shall submit to the
Board or its designee, for prior approval, an appropriate program of remedial education related to
the following areas: corresponding responsibility and/or prescription drug abuse. The program of
remedial education shall consist of at least ten (10) hours per year, which shall be completed in
each year of probation at Respondent's own expense.

All remedial education shall be in addition to, and shall not be credited toward, continuing
education (CE) courses used for license renewal purposes for pharmacists.

Failure to timely submit for approval or complete the approved remedial education shall be considered a violation of probation. The period of probation will be automatically extended until such remedial education is successfully completed and written proof, in a form acceptable to the Board, is provided to the Board or its designee.

Following the completion of each course, the Board or its designee may require the
Respondent, at Respondent's own expense, to take an approved examination to test the
Respondent's knowledge of the course. If the Respondent does not achieve a passing score on the
examination that course shall not count towards satisfaction of this term. Respondent shall take
another course approved by the Board in the same subject area.

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17. No Ownership or Management of Licensed Premises

Respondent shall not acquire any new ownership, legal or beneficial interest nor serve as a
manager, administrator, member, officer, director, trustee, associate, or partner of any additional
business, firm, partnership, or corporation licensed by the Board. If Respondent currently owns
or has any legal or beneficial interest in, or serves as a manager, administrator, member, officer,
director, trustee, associate, or partner of any business, firm, partnership, or corporation currently
or hereinafter licensed by the Board, Respondent may continue to serve in such capacity or hold

1	that interest, but only to the extent of that position or interest as of the effective date of this
2	decision. Violation of this restriction shall be considered a violation of probation.
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	12 STIPULATED SETTLEMENT (7015)
I	1 STIL OLATED SETTLEMENT (7015)

1	ACCEPTANCE		
2	I have carefully read the Stipulated Settlement and Disciplinary Order. I understand the		
3	stipulation and the effect it will have on my Pharmacist License. I enter into this Stipulated		
4	Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be		
5	bound by the Decision and Order of the Board of Pharmacy.		
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7	DATED:		
8	OBINNA OKEREKE Respondent		
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	STIPULATED SETTLEMENT (7015)		

ACCEPTANCE

I have carefully read the Stipulated Settlement and Disciplinary Order. I understand the
stipulation and the effect it will have on my Pharmacist License. I enter into this Stipulated
Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be
bound by the Decision and Order of the Board of Pharmacy.
DATED: 06117121

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7	DATED: CON124		
8		OBINNA OKEREKE Respondent	
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1	<u>ENDORSEMENT</u>		
2	The foregoing Stipulated Settlement ar	nd Disciplinary Order is hereby respectfully	
3	submitted for consideration by the Board of	Pharmacy.	
4			
5	DATED:6/18/2021	Respectfully submitted,	
6 7		ROB BONTA Attorney General of California	
7		ARMANDO ZAMBRANO Supervising Deputy Attorney General	
8 9		tephanie (ge	
10		STEPHANIE J. LEE Deputy Attorney General	
11		Attorneys for Complainant	
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14	LA2020602322 Stipulated Settlement and Disciplinary Order - Okerel	ka l	
15	Supurated Settlement and Disciplinary Order - Okeren	κ.	
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		STIPULATED SETTLEMENT (7015)	

Exhibit A

Accusation No. 7015

1	XAVIER BECERRA		
2	Attorney General of California ARMANDO ZAMBRANO		
3	Supervising Deputy Attorney General STEPHANIE J. LEE		
4	Deputy Attorney General State Bar No. 279733		
5	300 So. Spring Street, Suite 1702 Los Angeles, CA 90013		
6	Telephone: (213) 269-6185 Facsimile: (916) 731-2126		
7	Attorneys for Complainant		
8	BEFOR	Г ТНГ	
9	BOARD OF H	PHARMACY	
10	DEPARTMENT OF CONSTATE OF CONSTATE OF CONSTANT		
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12	In the Matter of the Accusation Against:	Case No. 7015	
13	CYNOB PHARMACY LLC, DBA CYNOB		
14	PHARMACY LLC, OBINNA OKEREKE, CEO AND SHAREHOLDER,	ACCUSATION	
15	NKECHINYERE EGOWURÉ OKEREKE, COO		
16	13041 Rosecrans Ave. #206 Norwalk, CA 90650		
17	Pharmacy Permit No. PHY 55694,		
18	and		
19	OBINNA OKEREKE		
20	13041 Rosecrans Ave., Ste 206 Norwalk, CA 90650		
21	Pharmacist License No. RPH 65105		
22	Respondents.		
23			
24	PAR	<u>ries</u>	
25	1. Anne Sodergren (Complainant) bring	s this Accusation solely in her official capacity	
26	as the Executive Officer of the Board of Pharmac	y (Board), Department of Consumer Affairs.	
27	2. On or about November 20, 2017, the	Board of Pharmacy issued Pharmacy Permit	
28	Number PHY 55694 to CYNOB Pharmacy LLC,	dba CYNOB Pharmacy LLC, Obinna Okereke,	
		1	
	(CYNOB PHARMACY LLC, DBA CYNOB PHAR	MACY LLC and OBINNA OKEREKE) ACCUSATION	

1	CEO and 65% shareholder, Nkechinyere Egowure Okereke, COO (Respondent CYNOB
2	Pharmacy). Obinna Okereke has been the Pharmacist-in-Charge since November 20, 2017. The
3	Pharmacy Permit was in full force and effect at all times relevant to the charges brought herein
4	and will expire on November 1, 2021, unless renewed.
5	3. On or about December 15, 2010, the Board of Pharmacy issued Pharmacist License
6	Number RPH 65105 to Obinna Okereke (Respondent Okereke). The Pharmacist License was in
7	full force and effect at all times relevant to the charges brought herein and will expire on March
8	31, 2022, unless renewed.
9	JURISDICTION
10	4. This Accusation is brought before the Board, under the authority of the following
11	laws. All section references are to the Business and Professions Code (Code) unless otherwise
12	indicated.
13	5. Section 4011 of the Code provides that the Board shall administer and enforce both
14	the Pharmacy Law [Code sections 4000 et seq.] and the Uniform Controlled Substances Act
15	[Health & Safety Code sections 11000 et seq].
16	6. Section 4300 of the Code states, in pertinent part, that "[e]very license issued may be
17	suspended or revoked."
18	7. Section 4300.1 of the Code states:
19	The expiration, cancellation, forfeiture, or suspension of a board-issued license by
20	operation of law or by order or decision of the board or a court of law, the placement of a license on a retired status, or the voluntary surrender of a license by a licensee shall not
21	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
22	revoking the license.
23	8. Section 4302 of the Code states:
24	The board may deny, suspend, or revoke any license of a corporation where conditions exist in relation to any person holding 10 percent or more of the corporate stock
25	of the corporation, or where conditions exist in relation to any officer or director of the corporation that would constitute grounds for disciplinary action against a licensee.
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	2
	(CYNOB PHARMACY LLC, DBA CYNOB PHARMACY LLC and OBINNA OKEREKE) ACCUSATION

1	STATUTORY PROVISIONS	
2	9. Section 4059 of the Code states:	
3	(a) A person may not furnish any dangerous drug, except upon the prescription	
4	of a physician, dentist, podiatrist, optometrist, veterinarian, or naturopathic doctor pursuant to Section 3640.7. A person may not furnish any dangerous device, except upon the prescription of a physician, dentist, podiatrist, optometrist, veterinarian, or	
5	naturopathic doctor pursuant to Section 3640.7.	
6	10. Section 4113 of the Code states, in pertinent part: "(c) The pharmacist-in-charge shall	
7	be responsible for a pharmacy's compliance with all state and federal laws and regulations	
8	pertaining to the practice of pharmacy."	
9	11. Section 4301 of the Code states:	
10	The board shall take action against any holder of a license who is guilty of	
11	unprofessional conduct or whose license has been issued by mistake. Unprofessional conduct includes, but is not limited to, any of the following:	
12		
13	(j) The violation of any of the statutes of this state, of any other state, or of the United States regulating controlled substances and dangerous drugs.	
14	Officer States regulating controlled substances and dangerous drugs.	
15		
16 17	(o) Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of or conspiring to violate any provision or term of this chapter or of the applicable federal and state laws and regulations governing pharmacy, including regulations established by the board or by any other state or federal	
18	regulatory agency. 12. Section 4306.5 of the Code states:	
19		
20	Unprofessional conduct for a pharmacist may include any of the following:	
21	(b) Acts or omissions that involve, in whole or in part, the failure to exercise or implement his or her best professional judgment or corresponding responsibility with	
22	regard to the dispensing or furnishing of controlled substances, dangerous drugs, or dangerous devices, or with regard to the provision of services.	
23	13 Section 4307 of the Code states in particulat parts	
24	13. Section 4307 of the Code states, in pertinent part:	
25	(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, summer, member, officiar, director	
26	suspension, or who has been a manager, administrator, owner, member, officer, director, associate, or partner of any partnership, corporation, firm, or association whose application	
27	for a license has been denied or revoked, is under suspension or has been placed on probation, and while acting as the manager, administrator, owner, member, officer, director, associate, or partner had knowledge of or knowingly participated in any conduct for which	
28	the license was denied, revoked, suspended, or placed on probation, shall be prohibited	
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1	from serving as a manager, administrator, owner, member, officer, director, associate, or partner of a licensee as follows:
2 3	(1) Where a probationary license is issued or where an existing license is placed on probation, this prohibition shall remain in effect for a period not to exceed five ware
	five years.
4 5	(2) Where the license is denied or revoked, the prohibition shall continue until the license is issued or reinstated.
	14. Health and Safety Code Section 11153 states, in pertinent part:
6 7	(a) A prescription for a controlled substance shall only be issued for a legitimate medical purpose by an individual practitioner acting in the usual course of his or her
8	professional practice. The responsibility for the proper prescribing and dispensing of controlled substances is upon the prescribing practitioner, but a corresponding responsibility rests with the pharmacist who fills the prescription. Except as authorized by
9	this division, the following are not legal prescriptions:
10 11	(1) an order purporting to be a prescription which is issued not in the usual course of professional treatment or in legitimate and authorized research; or
12	(2) an order for an addict or habitual user of controlled substances, which is issued not in the course of professional treatment or as part of an authorized
13	narcotic treatment program, for the purpose of providing the user with controlled substances, sufficient to keep him or her comfortable by maintaining
14	customary use.
15	15. Health and Safety Code section 11162.1 states:
6	(a) The prescription forms for controlled substances shall be printed with the following features:
17	
18 19	(2) A watermark shall be printed on the backside of the prescription blank; the watermark shall consist of the words "California Security Prescription."
20	(7)(A) Six quantity check off boxes shall be printed on the form so that the
21	prescriber may indicate the quantity by checking the applicable box where the following quantities shall appear:
22	1-24
23	25-49 50-74 75-100
24	101-150 151 and over.
25	(8) Prescription blanks shall contain a statement printed on the bottom of the
26 27	prescription blank that the "Prescription is void if the number of drugs prescribed is not noted."
28	
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1	(10) Check boxes shall be printed on the form so that the prescriber may indicate the number of refills ordered.
2	(b) Each batch of controlled substance prescription forms shall have the lot number
3	printed on the form and each form within that batch shall be numbered sequentially beginning with the numeral one.
4	16. Health and Safety Code section 11164 states, in pertinent part:
5	Except as provided in Section 11167, no person shall prescribe a controlled
6	substance, nor shall any person fill, compound, or dispense a prescription for a controlled substance, unless it complies with the requirements of this section.
7	(a) Each prescription for a controlled substance classified in Schedule II, III, IV, or V,
8	except as authorized by subdivision (b), shall be made on a controlled substance prescription form as specified in Section 11162.1 and shall meet the following requirements:
9	
10	REGULATORY PROVISIONS
11	17. California Code of Regulations, title 16, section 1715 states:
12	(a) The pharmacist-in-charge of each pharmacy as defined under section 4029 or section 4037 of the Business and Professions Code shall complete a self-assessment
13	of the pharmacy's compliance with federal and state pharmacy law. The assessment
14	shall be performed before July 1 of every odd-numbered year. The primary purpose of the self-assessment is to promote compliance through self-examination and education.
15	
16	18. California Code of Regulations, title 16, section 1761 states:
17	(a) No pharmacist shall compound or dispense any prescription which contains any significant error, omission, irregularity, uncertainty, ambiguity or alteration. Upon
18 10	receipt of any such prescription, the pharmacist shall contact the prescriber to obtain the information needed to validate the prescription.
19 20	(b) Even after conferring with the prescriber, a pharmacist shall not compound or
20 21	dispense a controlled substance prescription where the pharmacist knows or has objective reason to know that said prescription was not issued for a legitimate medical purpose.
22	19. Federal Code of Regulations, title 21, section 1306.04 states, in pertinent
23	part:
24	(a) A prescription for a controlled substance to be effective must be issued for a
25	legitimate medical purpose by an individual practitioner acting in the usual course of his professional practice. The responsibility for the proper prescribing and dispensing
26	of controlled substances is upon the prescribing practitioner, but a corresponding responsibility rests with the pharmacist who fills the prescription. An order purporting
27	to be a prescription issued not in the usual course of professional treatment or in legitimate and authorized research is not a prescription within the meaning and intent
28	of section 309 of the Act (21 U.S.C. 829) and the person knowingly filling such a purported prescription, as well as the person issuing it, shall be subject to the
	5
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1	penalties substanc	s provided for violations or es.	f the provisions	of law relating to contro	olled
2			DEFINITION	<u>s</u>	
3	20. Se	ction 4021 of the Code st	ates, in pertinen	t part: "Controlled subs	tances: means any
4	substance liste	d in Chapter 2 (commenc	ing with Sectior	n 11053) of Division 10	of the Health and
5	Safety Code."				
6	21. Se	ction 4022 states:			
 7 8 9 10 11 12 13 14 15 16 17 18 	"Dangerous drug" or "dangerous device" means any drug or device unsafe for self-use in humans or animals, and includes the following: (a) Any drug that bears the legend: Caution: federal law prohibits dispensing without prescription," "Rx only," or words of similar import. (b) Any device that bears the statement: "Caution: federal law restricts this device to sale by or on the order of a," "Rx only," or words of similar import, the blank to be filled in with the designation of the practitioner licensed to use or order use of the device. (c) Any other drug or device that by federal or state law can be lawfully dispensed only on prescription or furnished pursuant to Section 4006. 22. Section 4036.5 states: "Pharmacist-in-charge" means a pharmacist proposed by a pharmacy and approved by the board as the supervisor or manager responsible for ensuring the pharmacy's compliance with all state and federal laws and regulations pertaining to the practice of pharmacy. 23. Drug classifications are as follows: BRAND GENERIC DANGEROUS CONTROLLED INDICATIONS FOR USE BRAND NAME DAUG PER SUBSTANCE PER FOR USE 				
18			BUS. & PROF. CODE § 4022	HEALTH & SAFETY CODE (HSC)	
20 21	Adderall	dextroamphetamine/ amphetamine mixed salts (amphetamine)	Yes	Yes - Schedule II per HSC 11055(d)(l)	ADHD
22 23 24	Norco	hydrocodone/ acetaminophen (hydrocodone/APAP)	Yes	Yes - Schedule II per Title 21 CFR 1308.12(b)(1)(vi)	pain
25 26	OpanaER	oxymorphone extended-release	Yes	Yes - Schedule II per HSC 11055(b)(I)(N)	pain
27 28	Percocet	Oxycodone/ acetaminophen (oxycodone/APAP)	Yes	Yes - Schedule II per HSC 11055(b)(l)(M)	pain
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1	Phenergan with Codeine Syrup	promethazine with codeine syrup	Yes	Yes - Schedule V per HSC 11058(c)(l)	cough
2 3	Roxicodone	oxycodone immediate- release	Yes	Yes - Schedule II per HSC 11055(b)(1)(M)	pain
4 5 6	Soma	carisoprodol	Yes	Yes – Schedule IV per Title 21 CFR 1308.14(c)(6)	muscle relaxant
0 7 8	Tussionex Pennkinetic Suspension	hydrocodone/ chlorpheniramine	Yes	Yes - Schedule II per Title 21 CFR 1308.12(b)(1)(vi)	cough
9 10	Xanax	alprazolam	Yes	Yes – Schedule IV per HSC 11057(d)(1)	Anxiety
11		<u>C0</u>	ST RECO	VERY	
12	24. Sec	tion 125.3 states, in pertin	ent part, tha	at the Board may request th	e administrative
13	law judge to dir	ect a licentiate found to ha	ave commit	ted a violation or violations	s of the licensing
14	act to pay a sum	n not to exceed the reasona	able costs of	f the investigation and enfo	rcement of the
15	case.				
16	FACTUAL ALLEGATIONS				
17	25. On August 21, 2019, a Board complaint analyst spoke with Dr. May M. Lee, who had				
18	reported multiple fraudulent prescriptions generated using her prescribing credentials. Upon				
19	review of Dr. Lee's prescribing history in the CURES ¹ database, the Board determined that				
20	Respondent CY	NOB Pharmacy had filled	the majori	ty of these fraudulent presc	criptions from
21	March through	May 2019. The Board sul	osequently	initiated an investigation.	
22	26. On	February 5, 2020, the Boa	rd inspecto	r assigned to the investigat	ion conducted an
23	inspection at Re	espondent CYNOB Pharm	acy. Respo	ondent Okereke, the pharma	acist-in-charge
24					
25	California's Pre	scription Drug Monitoring	g Program (w and Evaluation System (PDMP). Pharmacies in Ca e II, III, and IV controlled s	lifornia are
26	database every	week. The data is collecte	d statewide	and can be used by license	ed prescribers and
27 28	pharmacists to evaluate and determine whether their patients are utilizing controlled substances correctly and whether a patient has used multiple prescribers and multiple pharmacies to fill controlled substance prescriptions. Law enforcement and regulatory agencies such as the Board have access to the CURES database for official oversight or investigatory purposes.				
			7		
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and co-owner of Respondent CYNOB Pharmacy, and Nkechinyere E. Okereke (RPH Okereke), a
 pharmacist and co-owner, were both present during the inspection.

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27. During the inspection, the Board inspector learned that Respondent CYNOB 3 Pharmacy is an independent retail pharmacy that fills an average of 15 prescriptions a day. RPH 4 Okereke confirmed that only she and her husband Respondent Okereke worked at the pharmacy, 5 and they did not employ other pharmacy staff. When asked about notes or documentation related 6 to a prescription, RPH Okereke indicated that if such notes or documentation exist, they would be 7 attached to or written on the original prescription document. Respondent Okereke indicated that 8 he does not typically speak directly to the prescribers, that he does not always document the 9 10 phone calls he made, and it was his fault. When asked about Dr. May M. Lee's prescriptions, Respondent Okereke stated that he did not initially question Dr. Lee's prescriptions and then later 11 became suspicious and stopped filling those prescriptions around fall of 2019. Respondent 12 Okereke indicated he did not speak to Dr. Lee directly. 13

28. During the inspection, the Board inspector collected original prescription documents
that Respondent CYNOB Pharmacy had filled under the purported prescribing credentials of 10
different prescribers: (1) Dr. May M. Lee; Dr. (2) Dr. Seth Camhi; (3) Dr. David H. Creamer; (4)
Physician's Assistant (PA) Joseph M. Stabley; (5) PA Rushton E. Halbert III; (6) Dr. Amir
Friedman; (7) Dr. Lina E. Shuhaibar; (8) Dr. Andrew H. Thio; (9) Dr. Harsukh J. Savalia; and
(10) Dr. Mark R. Bell.

29. The Board inspector requested Respondent Okereke provide a copy of the
pharmacy's complete Schedules II-V controlled substances inventory list. Respondent Okereke
admitted he did not maintain or take such an inventory list since the pharmacy first opened. The
Board inspector further requested the pharmacy's self-assessment. Respondent Okereke admitted
he did not complete any self-assessments since the pharmacy first opened.

30. On or about April 10, 2020, the Board inspector received Respondent CYNOB
Pharmacy's dispensing records for the time period of November 20, 2017 through February 5,
2020.

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A. <u>General dispensing trends</u>

1	А.	General dispensing trends		
2	31.	Based on review of the dispensing records, the Board inspector noted the following		
3	general dis	spensing trends from the time period of November 20, 2017 through February 5, 2020:		
4	(a)	Respondent CYNOB Pharmacy filled approximately 8,369 prescriptions, or an		
5		average of 16-17 prescriptions per business day.		
6	(b)	Respondent Okereke was noted in the dispensing records as the verifying pharmacist		
7		for 7,944 prescriptions, or about 95% of the total prescriptions during this period.		
8		RPH Okereke was noted as the verifying pharmacist for the remaining prescriptions.		
9	(c)	The 2 most commonly dispensed medications were promethazine/codeine and		
10		oxycodone 30mg, both commonly abused controlled substances.		
11	В.	Irregularities in prescriptions and prescribing patterns		
12	32.	Based on review of the dispensing records and original prescription documents, the		
13	Board insp	bector determined that while Respondent Okereke was the pharmacist-in-charge, the		
14	pharmacy	had dispensed 416 prescriptions for controlled substances during the time period of		
15	November 20, 2017 through February 5, 2020 that exhibited objective factors of irregularity—or			
16	red flags—indicating that the prescriptions were not issued for a legitimate medical purpose.			
17	Factors of irregularity were evident in the prescription documents and prescribing patterns			
18	generated under the purported prescribing credentials of 10 prescribers, including but not limited			
19	to the follo	owing:		
20	33.	Dr. May M. Lee:		
21	(a)	Respondent CYNOB Pharmacy dispensed approximately 58 prescriptions under Dr.		
22		Lee's prescribing credentials. Respondent Okereke was the verifying pharmacist for		
23		all 58 prescriptions.		
24	(b)	Approximately 63% of the 58 prescriptions were paid in cash, without the aid of		
25		prescription insurance.		
26	(c)	Of the 58 prescriptions, 33 were for controlled substances.		
27	(d)	Prescriptions were written for oxymorphone 40 mg, oxycodone/APAP 10/325 mg,		
28		hydrocodone/APAP 10/325 mg, Adderall, and promethazine/codeine, even though		
		9		
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1		some of these commonly abused controlled substances are intended for treatment
2		outside the scope of Dr. Lee's reported practice (i.e. critical care and pulmonary
3		medicine).
4	(e)	A hydrocodone prescription did not have the written date on the prescription
5		document as required.
6	(f)	An Adderall prescription listed an irregular quantity of 50 tablets.
7	(g)	An oxymorphone prescription had the patient's name, address, and date of birth
8		completely scribbled out and rewritten.
9	(h)	There were numerous misspellings of common medication names on the prescription
10		documents.
11	34.	Dr. Seth Camhi:
12	(a)	Respondent CYNOB Pharmacy dispensed approximately 196 prescriptions under Dr.
13		Camhi's prescribing credentials. Respondent Okereke was the verifying pharmacist
14		for 193 of the total prescriptions.
15	(b)	Approximately 98% of the 196 prescriptions were paid in cash, without the aid of
16		prescription insurance.
17	(c)	Of the 196 prescriptions, 60 were for oxycodone 30 mg, making Dr. Camhi the top
18		purported prescriber of oxycodone at the pharmacy.
19	(d)	Oxycodone 30 mg was the most common medication prescribed under Dr. Camhi's
20		credentials, accounting for approximately 30% of the 196 prescriptions.
21	(e)	Oxycodone was prescribed exclusively at the highest available strength (30 mg)
22		under Dr. Camhi's credentials, notwithstanding inter-patient variability.
23	(f)	Oxycodone was prescribed to all 23 of Dr. Camhi's purported patients.
24	(g)	Oxycodone was prescribed exclusively in quantities of 90 or 120 tablets, which meant
25		the purported patients paid approximately \$500-\$810 out of pocket per prescription.
26	(h)	Of the 23 purported patients, 17 had addresses that were 10 or more miles away from
27		the pharmacy. Of the 23 purported patients, 3 had the same address but different last
28		names.
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1	35.	Dr. David H. Creamer:
2	(a)	Respondent CYNOB Pharmacy dispensed approximately 123 prescriptions under Dr.
3		Creamer's prescribing credentials. Respondent Okereke was the verifying
4		pharmacist for 119 of the total prescriptions.
5	(b)	Approximately 94% of the 123 prescriptions were paid in cash, without the aid of
6		prescription insurance.
7	(c)	An oxycodone 30 mg prescription was dispensed despite evidence that Respondent
8		Okereke had run the patient's CURES record, which showed no history of any
9		controlled substance prescriptions in the previous 12 months.
10	(d)	Prescriptions were written for promethazine/codeine, alprazolam, Adderall, and
11		Tussionex, even though some of these commonly abused controlled substances are
12		intended for treatment outside the scope of Dr. Creamer's reported practice (i.e. pain
13		medicine and sleep medicine/anesthesiology).
14	(e)	Of the 123 prescriptions, 37 were for promethazine/codeine, making Dr. Creamer the
15		second top purported prescriber of promethazine/codeine at the pharmacy.
16	(f)	Promethazine/codeine was the most common medication prescribed under Dr.
17		Creamer's credentials, accounting for approximately 30% of the 123 prescriptions.
18	(g)	Some of the promethazine/codeine prescriptions had a pharmacist's note to change
19		the quantity from 240 mL to 473 mL, which is significantly higher than the
20		recommended dosage.
21	(h)	Of the 34 purported patients of Dr. Creamer, promethazine/codeine was prescribed to
22		24 of them.
23	(i)	The purported patients paid approximately \$200-\$300 out of pocket per
24		promethazine/codeine 240 mL prescription.
25	(j)	Of the 24 purported patients prescribed promethazine/codeine, 7 had addresses that
26		were 10 or more miles away from the pharmacy.
27	(k)	Dr. Creamer's address of record was in Oxnard, California, approximately 78 miles
28		from where Respondent CYNOB Pharmacy is located. Dr. Creamer's primary
		11
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1		practice location was in San Diego, approximately 92 miles from Respondent
2		CYNOB Pharmacy. Dr. Creamer's secondary practice location was in Rossmoor,
3		California, approximately 9 miles from Respondent CYNOB Pharmacy.
4	(1)	Of the 36 original prescription documents collected relating to Dr. Creamer, all 36
5		lacked requisite security features. These omitted security features alone invalidated
6		the prescriptions and visibly indicated that the prescriptions were not written
7		legitimately. The omitted security features included the following:
8		1. A watermark with the words "California Security Prescription" that should be
9		printed on the backside of each prescription document.
10		2. Six quantity check boxes depicting quantities of: 1-24, 25-49, 50-74, 75-100,
11		101-150, 151 and over.
12		3. A statement on the bottom that states: "Prescription is void if the number of
13		drugs prescribed is not noted."
14		4. Check boxes for the prescriber to indicate the number of refills ordered.
15		5. A lot number printed on the controlled substance prescription form, with each
16		form in the batch numbered sequentially beginning with the numeral one.
17	(m)	The original prescription documents had the word "drugs" misspelled and printed as
18		"druges."
19	(n)	The original prescription documents listed Dr. Creamer's office address in Cypress,
20		California. However, none of the locations listed on Dr. Creamer's licensing record
21		were in Cypress.
22	36.	PA Joseph M. Stabley:
23	(a)	Respondent CYNOB Pharmacy dispensed approximately 82 prescriptions under PA
24		Stabley's prescribing credentials. Respondent Okereke was the verifying pharmacist
25		for 80 of the total prescriptions.
26	(b)	Approximately 78% of the 82 prescriptions were paid in cash, without the aid of
27		prescription insurance.
28		
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1	(c)	Of the 82 prescriptions, 38 were for promethazine/codeine, making PA Stabley the
2		top purported prescriber of promethazine/codeine at the pharmacy.
3	(d)	Promethazine/codeine was the most common medication prescribed under PA
4		Stabley's credentials, accounting for approximately 46% of the 82 prescriptions.
5	(e)	Of the 16 purported patients of PA Stabley, promethazine/codeine was prescribed to
6		10 of them.
7	(f)	The purported patients paid approximately \$26-\$300 out of pocket per
8		promethazine/codeine 240 mL prescription.
9	(g)	Of the 10 purported patients prescribed promethazine/codeine, 6 had addresses that
10		were 10 or more miles away from the pharmacy.
11	(h)	Respondent Okereke received many of the promethazine/codeine prescriptions
12		verbally. On December 24, 2019, Respondent Okereke received 5
13		promethazine/codeine prescriptions verbally for 5 purported patients under PA
14		Stabley. Of the 5 patients, 3 had addresses that were 10 or more miles from the
15		pharmacy.
16	(i)	PA Stabley's office address printed on the original prescription documents was in
17		Irvine, California, approximately 25 miles from where Respondent CYNOB
18		Pharmacy is located.
19	(j)	Of the 30 original prescription documents collected relating to PA Stabley, 6 lacked
20		requisite security features. These omitted security features alone invalidated the
21		prescriptions and visibly indicated that the prescriptions were not written
22		legitimately. The omitted security features included the following:
23		1. A watermark with the words "California Security Prescription" that should be
24		printed on the backside of each prescription document.
25	37.	PA Rushton E. Halbert III:
26	(a)	Respondent CYNOB Pharmacy dispensed approximately 72 prescriptions under PA
27		Halbert's prescribing credentials. Respondent Okereke was the verifying pharmacist
28		for all 72 prescriptions.
		13
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1	(b)	Approximately 79% of the 72 prescriptions were paid in cash, without the aid of
2		prescription insurance.
3	(c)	Prescriptions were written for oxycodone and hydrocodone in quantities equivalent to
4		a 1-month supply, an unusual practice for a walk-in clinic. Nearly all of the
5		prescriptions listed PA Halbert's office name as "Walk-In Medical Care."
6	(d)	Oxycodone 30 mg and promethazine/codeine were the most common medications
7		prescribed under PA Halbert's credentials, accounting for approximately 37% of the
8		72 prescriptions.
9	(e)	Of the 16 purported patients of PA Halbert, oxycodone 30 mg or
10		promethazine/codeine was prescribed to 12 of them.
11	(f)	Of the 16 purported patients of PA Halbert, one was prescribed both oxycodone and
12		promethazine/codeine, despite the potentially duplicative effects of the two controlled
13		substances.
14	(g)	The purported patients paid approximately \$598-\$836 out of pocket per oxycodone
15		(120 tablets) prescription. The purported patients paid approximately \$26-\$225 per
16		promethazine/codeine 240 mL prescription.
17	(h)	Of the 12 purported patients prescribed oxycodone 30 mg or promethazine/codeine, 4
18		had addresses that were 10 or more miles away from the pharmacy. On March 29,
19		2019, Respondent Okereke dispensed prescriptions for 3 of these 4 patients in the
20		span of 2 hours.
21	(i)	PA Halbert's office address printed on the original prescriptions documents was in
22		Long Beach, California, approximately 16 miles from where Respondent CYNOB
23		Pharmacy is located.
24	(j)	Of the 14 original prescription documents collected relating to PA Halbert, all 14
25		lacked requisite security features. These omitted security features alone invalidated
26		the prescriptions and visibly indicated that the prescriptions were not written
27		legitimately. The omitted security features included the following:
28		
		14
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1		1. A watermark with the words "California Security Prescription" that should be
2		printed on the backside of each prescription document.
3		2. A lot number printed on the controlled substance prescription form, with each
4		form in the batch numbered sequentially beginning with the numeral one.
5	(k)	The original prescription documents had PA Halbert's first and last names printed in
6		reverse order.
7	38.	Dr. Amir Friedman:
8	(a)	Respondent CYNOB Pharmacy dispensed approximately 69 prescriptions under Dr.
9		Friedman's prescribing credentials. Respondent Okereke was the verifying
10		pharmacist for 68 of the total prescriptions.
11	(b)	Approximately 91% of the 69 prescriptions were paid in cash, without the aid of
12		prescription insurance.
13	(c)	Prescriptions were written for Adderall, even though this commonly abused
14		controlled substance is intended for treatment outside the scope of Dr. Friedman's
15		reported practice (i.e. pain medicine).
16	(d)	Prescriptions were written for a combination of Adderall, oxycodone, and Soma, all
17		commonly abused controlled substances.
18	(e)	Amphetamine 30 mg (the highest available strength) was the most common
19		medication prescribed under Dr. Friedman's credentials, accounting for
20		approximately 24% of the 69 prescriptions. Oxycodone 30 mg was the second most
21		common prescribed medication, accounting for approximately 18% of the 69
22		prescriptions.
23	(f)	Of the 25 purported patients of Dr. Friedman, amphetamine 30 mg was prescribed to
24		16 of them.
25	(g)	Of the 16 purported patients prescribed amphetamine 30 mg, 15 had addresses that
26		were 10 or more miles away from the pharmacy.
27	(h)	Dr. Friedman's address of record was in Thousand Oaks, California, approximately
28		56 miles from where Respondent CYNOB Pharmacy is located. Dr. Friedman's
		15
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1		primary practice location was in Van Nuys, California, approximately 35 miles from
2		Respondent CYNOB Pharmacy. Dr. Friedman's secondary practice location was in
3		Culver City, California, approximately 25 miles from Respondent CYNOB
4		Pharmacy.
5	(i)	Of the 22 original prescription documents collected relating to Dr. Friedman, all 22
6		lacked requisite security features. These omitted security features alone invalidated
7		the prescriptions and visibly indicated that the prescriptions were not written
8		legitimately. The omitted security features included the following:
9		1. A watermark with the words "California Security Prescription" that should be
10		printed on the backside of each prescription document.
11	(j)	The original prescription documents listed four office addresses. Two of the
12		locations, Los Angeles and Santa Ana, California, were not listed on Dr. Friedman's
13		licensing record. The Los Angeles address was approximately 17 miles from
14		Respondent CYNOB Pharmacy.
15	(k)	There were numerous misspellings of common medication names on the prescription
16		documents.
17	(1)	When contacted by the Board inspector regarding the original prescription documents
18		at issue, Dr. Friedman indicated the prescriptions were fraudulent and that the
19		patients listed were not his. Dr. Friedman indicated he had never been contacted by
20		Respondents to verify the prescriptions.
21	39.	Dr. Lina E. Shuhaibar:
22	(a)	Respondent CYNOB Pharmacy dispensed approximately 49 prescriptions under Dr.
23		Shuhaibar's prescribing credentials. Respondent Okereke was the verifying
24		pharmacist for all 49 prescriptions.
25	(b)	100% of the 49 prescriptions were paid in cash, without the aid of prescription
26		insurance.
27	(c)	Prescriptions were written for promethazine/codeine, oxycodone, hydrocodone, and
28		oxymorphone, even though some of these commonly abused controlled substances
		16
	(CYN	OB PHARMACY LLC, DBA CYNOB PHARMACY LLC and OBINNA OKEREKE) ACCUSATION

1	are intended for treatment outside the scope of Dr. Shuhaibar's reported practice (i.e.
2	psychiatry and pediatrics).
3	(d) Oxycodone 30 mg and promethazine/codeine were the most common medications
4	prescribed under Dr. Shuhaibar's credentials, accounting for approximately 65% of
5	the 49 prescriptions.
6	(e) Of the 18 purported patients of Dr. Shuhaibar, oxycodone 30 mg was prescribed to 12
7	of them.
8	(f) The purported patients paid approximately \$910 out of pocket per oxycodone 30 mg
9	(120 tablets) prescription, and approximately \$127-\$250 out of pocket per
10	promethazine/codeine 240 mL prescription.
11	(g) Of the 12 purported patients prescribed oxycodone 30 mg, 5 had addresses that were
12	10 or more miles away from the pharmacy.
13	(h) Dr. Shuhaibar's address of record was in West Covina, California, approximately 17
14	miles from where Respondent CYNOB Pharmacy is located. Dr. Shuhaibar's
15	primary practice location was in Baldwin Park, California, approximately 16 miles
16	from Respondent CYNOB Pharmacy.
17	(i) When contacted by the Board inspector regarding the original prescription documents at
18	issue, Dr. Shuhaibar indicated the prescriptions were fraudulent and that the patients
19	listed were not hers. Dr. Shuhaibar also indicated that she does not prescribe
20	oxycodone, hydrocodone, promethazine, or oxymorphone. Dr. Shuhaibar also indicated
21	she had never been contacted by Respondents to verify the prescriptions.
22	40. <u>Dr. Andrew H. Thio</u> :
23	(a) Respondent CYNOB Pharmacy dispensed approximately 37 prescriptions under Dr.
24	Thio's prescribing credentials. Respondent Okereke was the verifying pharmacist for
25	35 of the total prescriptions.
26	(b) Approximately 91% of the 37 prescriptions were paid in cash, without the aid of
27	prescription insurance.
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	(CYNOB PHARMACY LLC, DBA CYNOB PHARMACY LLC and OBINNA OKEREKE) ACCUSATION

1	(c)	(c) Prescriptions were written for promethazine/codeine, alprazolam, and Tussionex,			
2		even though some of these commonly abused controlled substances are intended for			
3		treatment outside the scope of Dr. Thio's reported practice (i.e. pain medicine and			
4		anesthesiology).			
5	(d)	Promethazine/codeine was the most common medication prescribed under Dr. Thio's			
6		credentials, accounting for approximately 16% of the 37 prescriptions.			
7	(e)	Of the 18 purported patients of Dr. Thio, promethazine/codeine or Tussionex was			
8		prescribed to 7 of them.			
9	(f)	The purported patients paid approximately \$150-\$300 out of pocket per			
10		promethazine/codeine 240 mL prescription.			
11	(g)	Dr. Thio's address of record and primary practice location were in Murrieta,			
12	California, approximately 65 miles from where Respondent CYNOB Pharmacy is				
13	located. Dr. Thio's secondary practice location was in Riverside, California,				
14		approximately 44 miles from Respondent CYNOB Pharmacy.			
15	(h)	Of the 11 original prescription documents collected relating to Dr. Thio, all 11 lacked			
16		requisite security features. These omitted security features alone invalidated the			
17		prescriptions and visibly indicated that the prescriptions were not written			
18		legitimately. The omitted security features included the following:			
19		1. A watermark with the words "California Security Prescription" that should be			
20		printed on the backside of each prescription document.			
21	2. Six quantity check boxes depicting quantities of: 1-24, 25-49, 50-74, 75-100,				
22	101-150, 151 and over.				
23	3. A statement on the bottom that states: "Prescription is void if the number of				
24	drugs prescribed is not noted."				
25		4. Check boxes for the prescriber to indicate the number of refills ordered.			
26		5. A lot number printed on the controlled substance prescription form, with each			
27		form in the batch numbered sequentially beginning with the numeral one.			
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	(CYN	OB PHARMACY LLC, DBA CYNOB PHARMACY LLC and OBINNA OKEREKE) ACCUSATION			

1	(i)	The original prescription documents had the word "drugs" misspelled and printed as		
2		"druges."		
3	(j)	The original prescription documents listed Dr. Thio's office address in Long Beach,		
4		California. However, none of the locations listed on Dr. Thio's licensing record were		
5		in Long Beach.		
6	(k)	When contacted by the Board inspector regarding the original prescription documents		
7		at issue, Dr. Thio indicated the prescriptions were fraudulent and that the patients		
8		listed were not his. Dr. Thio also indicated he had never been contacted by		
9		Respondents to verify the prescriptions.		
10	41.	Dr. Harsukh J. Savalia:		
11	(a)	Respondent CYNOB Pharmacy dispensed approximately 22 prescriptions under Dr.		
12		Savalia's prescribing credentials. Respondent Okereke was the verifying pharmacist		
13		for all 22 prescriptions.		
14	(b)	100% of the 22 prescriptions were paid in cash, without the aid of prescription		
15		insurance.		
16	(c)	Prescriptions were written exclusively for promethazine/codeine, oxycodone, and		
17		hydrocodone, even though some of these commonly abused controlled substances are		
18		intended for treatment outside the scope of Dr. Savalia's reported practice (i.e.		
19		addiction psychiatry and family medicine).		
20	(d)	Of the 15 purported patients of Dr. Savalia, promethazine/codeine, oxycodone, or		
21		hydrocodone was prescribed to all 15 of them.		
22	(e)	The purported patients paid approximately \$148-\$200 out of pocket per		
23	promethazine/codeine 240 mL prescription; approximately \$630-\$771 per			
24		oxycodone 30 mg (90-100 tablets) prescription; approximately \$586 per oxycodone		
25		20 mg (100 tablets) prescription; and approximately \$376 - \$397 per hydrocodone		
26		prescription.		
27	(f)	Of the 15 purported patients of Dr. Savalia, 9 had addresses that were 10 or more		
28		miles away from the pharmacy.		
		19		
	(CYN	OB PHARMACY LLC, DBA CYNOB PHARMACY LLC and OBINNA OKEREKE) ACCUSATION		

1	(g) When contacted by the Board inspector regarding the original prescription docu				
2		at issue, Dr. Savalia indicated the prescriptions were fraudulent and that the patient			
3		listed were not his. Dr. Savalia indicated he does not prescribe narcotics. Dr. Savali			
4		also indicated he had never been contacted by Respondents to verify the			
5		prescriptions.			
6	42.	Dr. Mark R. Bell:			
7	(a)	Respondent CYNOB Pharmacy dispensed approximately 13 prescriptions under Dr.			
8		Bell's prescribing credentials. Respondent Okereke was the verifying pharmacist for			
9		all 13 prescriptions.			
0	(b)	100% of the 13 prescriptions were paid in cash, without the aid of prescription			
1	insurance.				
12	(c) Prescriptions were written for promethazine/codeine and alprazolam, even though				
3		some of these commonly abused controlled substances are intended for treatment			
4		outside the scope of Dr. Bell's reported practice (i.e. pain medicine according to			
5		prescriptions).			
6	(d)	The purported patients paid approximately \$250 out of pocket per			
17	promethazine/codeine 240 mL prescription; approximately \$76-\$98 per alprazolan				
18	(60 tablets) prescription; approximately \$701 per oxycodone 30 mg (100 tablets)				
9		prescription; and approximately \$1,179 per oxymorphone (60 tablets) prescription.			
20	(e)	Of the 9 purported patients of Dr. Bell, 5 had addresses that were 10 or more miles			
21	away from the pharmacy.				
22	(f)	Dr. Bell's address of record was in El Segundo, California, approximately 21 miles			
23		from where Respondent CYNOB Pharmacy is located. The prescriptions listed Dr.			
24		Bell's address in Van Nuys, California, approximately 33 miles from Respondent			
25	CYNOB Pharmacy.				
26	(g)	Of the 4 original prescription documents collected relating to Dr. Bell, all 4 lacked			
27		requisite security features. These omitted security features alone invalidated the			
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		20			

1	prescriptions and visibly indicated that the prescriptions were not written	
2	legitimately. The omitted security features included the following:	
3	1. A watermark with the words "California Security Prescription" that should be	
4	printed on the backside of each prescription document.	
5	2. Six quantity check boxes depicting quantities of: 1-24, 25-49, 50-74, 75-100,	
6	101-150, 151 and over.	
7	3. Check boxes for the prescriber to indicate the number of refills ordered.	
8	4. A lot number printed on the controlled substance prescription form, with each	
9	form in the batch numbered sequentially beginning with the numeral one.	
10	(h) When contacted by the Board inspector regarding the original prescription documents	
11	at issue, Dr. Bell indicated the prescriptions were fraudulent and that the patients	
12	listed were not his.	
13	43. Based on review of CURES data for the purported patients of these 10 prescribers,	
14	the Board inspector further determined that from the time period of November 20, 2017 through	
15	February 5, 2020, approximately 23 patients had not been prescribed any controlled substances	
16	from December 1, 2016 up until their first prescription dispensed at Respondent CYNOB	
17	Pharmacy. Despite inter-patient variability, these 23 patients received opioid controlled	
18	substances at the highest available strengths as an initial treatment at Respondent CYNOB	
19	Pharmacy.	
20	FIRST CAUSE FOR DISCIPLINE	
21	(Failure to Exercise or Implement Corresponding Responsibility)	
22	44. Respondent CYNOB Pharmacy and Respondent Okereke are subject to disciplinary	
23	action under sections 4301, subdivisions (j), and (o); 4306.5, subdivision (b); and 4113,	
24	subdivision (c); in conjunction with Health and Safety Code section 11153, subdivision (a);	
25	California Code of Regulations, title 16, section 1761; and Federal Code of Regulations, title 21,	
26	section 1306.04, in that Respondents failed to exercise or implement their best professional	
27	judgment or corresponding responsibility with regard to the dispensing or furnishing of controlled	
28	substances or dangerous drugs, or with regard to the provision of services. Complainant refers to,	
	21	
	(CYNOB PHARMACY LLC, DBA CYNOB PHARMACY LLC and OBINNA OKEREKE) ACCUSATION	

and by this reference incorporates, the allegations set forth in above paragraphs 25 through 43, as though set forth in full herein.

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SECOND CAUSE FOR DISCIPLINE

(Filling or Dispensing Improper Prescriptions for Controlled Substances) 45. Respondent CYNOB Pharmacy and Respondent Okereke are subject to disciplinary action under sections 4301, subdivisions (j), and (o); 4306.5, subdivision (b); and 4113, subdivision (c); in conjunction with Health and Safety Code sections 11162.1, subdivisions (a) and (b), and 11164; California Code of Regulations, title 16, section 1761; and Federal Code of Regulations, title 21, section 1306.04; in that Respondents filled or dispensed controlled substance prescriptions that did not comply with the form requirements of Health and Safety Code section 11162.1, or contained any significant error, omission, irregularity, uncertainty, ambiguity or alteration. Complainant refers to, and by this reference incorporates, the allegations set forth in above paragraphs 25 through 43, as though set forth in full herein.

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THIRD CAUSE FOR DISCIPLINE

(Failure to Complete Self-Assessment)

46. Respondent CYNOB Pharmacy and Respondent Okereke are subject to disciplinary 16 action under sections 4301, subdivision (o); and 4113, subdivision (c); in conjunction with 17 California Code of Regulations, title 16, section 1715, in that Respondents failed to complete a 18 19 self-assessment of the pharmacy's compliance with federal and state pharmacy law since the pharmacy first opened. Complainant refers to, and by this reference incorporates, the allegations 2021 set forth in above paragraphs 25 through 43, as though set forth in full herein.

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DISCIPLINE CONSIDERATIONS

47. To determine the degree of discipline, if any, to be imposed on Respondent Obinna 23 24 Okereke, Complainant alleges that on or about September 21, 2018, in a prior action, the Board of Pharmacy issued Citation Number CI 2018 81311 for a violation of California Code of 25 Regulations, title 16, section 1716 [variation from prescription]. An order of abatement was 26 issued for either a \$500.00 fine or two hours of remedial education pursuant to the final citation. 27 The basis for the citation was that on or about October 20, 2016, Respondent Okereke while 28 22

(CYNOB PHARMACY LLC, DBA CYNOB PHARMACY LLC and OBINNA OKEREKE) ACCUSATION

1	employed at CVS Pharmacy dispensed prescribed propylthiouracil tablets with another		
2	medication (pioglitazone tablets) commingled in the container.		
3	OTHER MATTERS		
4	48. Pursuant to Code section 4307, if discipline is imposed on Pharmacy Permit Number		
5	PHY 55694 issued to Respondent CYNOB Pharmacy, Respondent CYNOB Pharmacy shall be		
6	prohibited from serving as a manager, administrator, owner, member, officer, director, associate,		
7	or partner of a licensee for five years if Pharmacy Permit Number PHY 55694 is placed on		
8	probation or until Pharmacy Permit Number PHY 55694 is reinstated if it is revoked.		
9	49. Pursuant to Code section 4307, if discipline is imposed on Pharmacy Permit Number		
10	PHY 55694 issued to Respondent CYNOB Pharmacy while Respondent Okereke has been a		
11	manager, administrator, owner, member, officer, director, associate, partner, and had knowledge		
12	of or knowingly participated in any conduct for which the licensee was disciplined, Respondent		
13	Okereke shall be prohibited from serving as a manager, administrator, owner, member, officer,		
14	director, associate, or partner of a licensee for five years if Pharmacy Permit Number PHY 55694		
15	is placed on probation or until Pharmacy Permit Number PHY 55694 is reinstated if it is revoked.		
16	<u>PRAYER</u>		
17	WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,		
18	and that following the hearing, the Board of Pharmacy issue a decision:		
19	1. Revoking or suspending Pharmacy Permit Number PHY 55694, issued to CYNOB		
20	Pharmacy LLC, dba CYNOB Pharmacy LLC;		
21	2. Revoking or suspending Pharmacist License Number RPH 65105, issued to Obinna		
22	Okereke;		
23	3. Prohibiting CYNOB Pharmacy LLC, dba CYNOB Pharmacy LLC from serving as a		
24	manager, administrator, owner, member, officer, director, associate, or partner of a licensee for		
25	five years if Pharmacy Permit Number PHY 55694 is placed on probation or until Pharmacy		
26	Permit Number PHY 55694 is reinstated if Pharmacy Permit Number PHY 55694 issued to		
27	CYNOB Pharmacy LLC, dba CYNOB Pharmacy LLC is revoked;		
28	///		
	23		
	(CYNOB PHARMACY LLC, DBA CYNOB PHARMACY LLC and OBINNA OKEREKE) ACCUSATION		

1	4.	4. Prohibiting Obinna Okereke from serving as a manager, administrator, owner,				
2	member, officer, director, associate, or partner of a licensee for five years if Pharmacy Permit					
3	Number PH	Number PHY 55694 is placed on probation or until Pharmacy Permit Number PHY 55694 is				
4	reinstated i	reinstated if Pharmacy Permit Number PHY 55694 issued to CYNOB Pharmacy LLC, dba				
5	CYNOB Pharmacy LLC is revoked;					
6	5. Ordering CYNOB Pharmacy LLC and Obinna Okereke to pay the Board of Pharmacy					
7	the reasonable costs of the investigation and enforcement of this case, pursuant to Business and					
8	Professions Code section 125.3; and,					
9	6. Taking such other and further action as deemed necessary and proper.					
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11						
12	DATED:	12/24/2020	Signature on File ANNE SODERGREN			
13			Executive Officer Board of Pharmacy			
14			Department of Consumer Affairs State of California			
15			Complainant			
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