

MINUTES

**UTAH
PHARMACY
BOARD MEETING**

January 26, 2010

**Room 474 – 4th Floor – 8:00 A.M.
Heber Wells Building
Salt Lake City, UT 84111**

Convened: 8:00 a.m.

Conducting: Dominic DeRose, Chair

Division Director: Mark Steinagel
Bureau Manager: Laura Poe
Board Secretary: Shirlene Kimball
Compliance Specialist: Connie Call
Compliance Officer: Ray Walker

Board Members Present: Roger B. Fitzpatrick
Derek D. Garn
David C. Young
Dominic DeRose
Kelly Lundberg
Andrea Kemper
Jan Bird

Guests: Jens Timothy, Student MWU
Beth Young, USHP
John Sisto, MEDCO
Mark Munger, University of Utah
Michael Rogers, University of Utah student
James Ruble, University of Utah
Evan Vickers, Representative, State Legislature
Craig Belliston, Intern for Rep. Vickers
Gerry Hassell, Career Step
Jaime Peterson, Walgreen's
Greg Jensen, Target
Reid L. Barker UPhA
David Monson, Career Step
Betty Yamashita, IHC
Linda Sandberg, Omnicare
Jacob Smith, University of Utah Student
Carolyn Kowalchik, University of Utah Hospital
Kavish Choudhary, University of Utah Hospital

TOPICS FOR DISCUSSION

ADMINISTRATIVE BUSINESS:

December 15, 2009 Minutes:

Representative Evan Vickers:

DECISIONS AND RECOMMENDATIONS

The minutes from the December 15, 2009 Board meeting were approved with corrections. All Board members in favor.

Rep. Vickers met with the Board to discuss pending legislation that would affect the practice of pharmacy. He identified six bills, including S.B. 88, Pharmacy Practice Act Amendments sponsored by Sen. Curtis Bramble. This bill would allow a prescribing practitioner to be exempt from licensure under the Pharmacy Practice Act when the prescribing practitioner dispenses a cosmetic drug to his/her patient. It would also require certain drug labeling and record keeping standards for the dispensing practitioner. Rep. Vickers stated he spoke with Sen. Bramble who indicated this amendment centers around Latisse, but the bill will define cosmetic drugs. Rep. Vickers acknowledged that in the past, some of these cosmetic drugs were not available at all pharmacies. However, they are now more readily available through a pharmacy. Mr. DeRose stated his concern is that the term cosmetic drug opens the door for a number of different drugs.

Rep. Vickers questioned whether or not this bill was presented before the Board. Mr. Steinagel stated the Division reviewed the bill but did not present it to the Board. He stated there are times when the Division is requested to review a bill that will be presented to the Legislature and this bill was reviewed. Mr. Steinagel stated the Division doesn't usually take a position on a bill other than neutrality and the Division has not taken a position on this bill. However, the Division tried to tighten up and improve the language so that if the bill passes, the Division would be able to enforce it. Mr. Steinagel stated in order to take a position on a bill the Division must obtain permission from the department director and governor's office.

Mr. Fitzpatrick indicated HCG would be a drug that would fall under this language and we should do everything we can to see that this does not go into

effect. Mr. Steinagel reminded Board members that as a Board they cannot take a position on a bill, but as an individual they can. Mr. Walker stated he would encourage Board members to be active in their professional association.

Rep. Vickers also reported on the following bills: H.B. 28 sponsored by Rep. Bradley Daw is an amendment to the controlled substance database that would require a prescriber to register for a tutorial and pass a test related to the controlled substance database.

H.B. 35 requires that if a patient overdoses on prescribed controlled substances, the overdose must be reported to DOPL and DOPL then must notify each prescribing practitioner who prescribed controlled substances for the individual who had overdosed.

H.B. 36 requires a court to report to DOPL an individual who is convicted of a controlled substance DUI. DOPL then notifies any prescribing practitioner.

There is also a bill by Rep. Trisha Beck to schedule Soma as a Class IV controlled substance. Tramadol was initially included, but has been pulled out of the bill. Mr. Barker stated that the association supports this bill.

H.B. 13 brings conformity to drug definitions throughout Title 58 including the Medical Practice Act, Pharmacy Practice Act, Osteopathic Practice Act and the Naturopathic Practice Act. There was some concern expressed that this would allow naturopaths to dispense. Ms. Poe stated she met with Rep. Beck and the language does not give the naturopaths the ability to dispense.

Mr. Steinagel stated Rep. Bramble will also be sponsoring a bill regarding online prescribing, but he has not yet seen the draft. This would create additional classifications of licensure including on-line prescriber, on-line pharmacy and Internet facilitator.

Mr. Steinagel stated Rep. Vickers has been helpful to the Division and sponsored the Hunting Outfitters bill last year. Mr. Steinagel indicated he provided Rep.

Vickers with the e-mail address of Board members. Rep. Vickers stated he appreciates what the Board is doing and thanked them for their time.

Connie Call,
Compliance Report:

Ms. Call reported the following individuals are out of compliance with the terms and conditions of their Orders:

-Sheryl Ledet has not submitted her PIR attendance cards. Ms. Ledet has been non-compliant for four of the last five months and the compliance unit is recommending Ms. Ledet be referred for an Order to Show Cause Hearing.

-Aidee Torres missed her scheduled meeting last month, missed a urine screen, missed calling CVI and tested positive for ETG in January. Ms. Call reported Ms. Torres has been non-compliant for all four quarters since she has been on probation. The compliance unit is recommending she be referred for an Order to Show Cause Hearing.

-Kenny Nielson missed calling CVI; however, Ms. Call reported he was in the process of moving to the Blanding area at the time.

J. Michael Hodges,
Interview:

Mr. Young conducted the interview. Mr. Hodges reported he is working approximately 30 hours a week for Meds for Vets. He stated he has not worked any on call hours for 4-Care Pharmacy this quarter. The psychiatric evaluation was submitted and the evaluation indicated no further treatment is necessary. He will be required to continue to submit employer reports and meet with the Board in April. If he is doing well in April, the Board may consider moving his quarterly meetings to meeting every six months. Mr. Young commended Mr. Hodges for the improvement he has made in complying with his probation. **Mr. Hodges is in compliance with the terms and conditions of his Order.**

Jeremy Boyle,
New Order:

Mr. Garn conducted the interview. Mr. Boyle explained the circumstances that brought him before the Board. He stated he received a DUI and that he began using drugs because of stress at work. Mr. Boyle indicated he has worked at Albertson's for six years as a pharmacy technician. He stated he did not take any medications from the pharmacy. Mr. Boyle stated all court requirements associated with the DUI

have been completed with the exception of a substance abuse and mental health evaluation. He reported the court assessment is scheduled for February. Mr. Boyle stated he has not signed up with CVI and has not attended 12-step meetings. Board members indicated it has been two months since he signed his Order and if he does not sign up with CVI and begin attending his meetings immediately, further action may be taken against the license.

Mr. Boyle questioned what he needed to include in the practice plan. Board members indicated he needs to specify how he will be monitored for access to controlled substances, the name of the supervisor and how he will be supervised in the environment as a pharmacy technician. He also needs to submit a controlled substance audit which was due in December. Board members stated the controlled substance transition count from Albertsons to Fresh Market can be used as the beginning controlled substance inventory; however, he must include an ongoing controlled substance count. The practice plan also needs to include how a discrepancy in the audit is handled. Mr. Boyle also needs to have the employer fax in a statement that he has read and understands the Stipulation and Order. Dr. Lundberg stressed the importance of meeting the terms and conditions of his probation and remaining in compliance. Mr. DeRose suggested he read his Order several times a week and become familiar with it so he will know what he needs to do to remain in compliance.

Mr. Boyle stated he cannot afford all the costs associated with coming into compliance and indicated he is considering surrendering the license. Dr. Lundberg indicated the Board may be able accept the court ordered evaluation and could make that determination upon receipt of the evaluation. Ms. Poe indicated the Board may consider decreasing the number of urine screens through CVI if the court submits copies of urine screens directly to the Division. **Mr. Boyle is out of compliance with the terms and conditions of his Order.** His next appointment will be scheduled for March 2010.

Monthly Probation Interview:

reported things are going great and he stated he is 142 days sober. He indicated he is working part time at 4 Care Pharmacy and calling CVI daily. He stated he is attending aftercare and it is going well. Dr. Lundberg questioned Mr. Barrow regarding the aftercare and stated that the therapist reported he has been excused from treatment several times because of his work schedule and that he is inconsistent in treatment. Mr. Barrow stated that during the holidays he filled-in for people wanting to take time off. He stated he thought he could make up the treatment sessions and made the decision to work and take care of his family instead of attending meetings. Ms. Call indicated she has not received documentation of completion of the IOP. Mr. Barrow will also need to have Dr. Dusoe submit the therapist to the Division. Mr. Barrow reported the psychological evaluation is scheduled with Janiece Pompa next week. Mr. Barrow stated he began working part-time yesterday and Board members reminded him he will need to submit a practice plan and to make sure the practice plan addresses the controlled substance audit.

Mr. Barrow stated he feels the Board is focusing on the negative not on the positive. Mr. Barrow stated he has been working hard on his recovery. Mr. Young stated he is doing good work, but the paperwork is the only objective way for the Board to measure compliance. Mr. Fitzpatrick stated the Board understands it is difficult for a new probationer to deal with life issues, obtain treatment and meet the conditions of probation. However, it is important he submit the therapist report, documentation of completion of the IOP, the practice plan and Dr. Pompa's evaluation. Board members indicated they would like to meet with Mr. Barrow again next month to make sure he is continuing in the right direction. **Mr. Barrow is out of compliance with the terms and conditions of his probation.**

Andrea Lowry,
Quarterly Probation Interview:

Mr. Fitzpatrick conducted the interview. Ms. Lowry reported things are going well. She indicated her criminal probation has been completed but it has not been officially dismissed. Ms. Lowry stated she would like to keep her license and to return to work eventually, but for now she is enjoying staying at

home with her baby. **Ms. Lowry is in compliance with the terms and conditions of her Order.**

Break at 9:50 a.m.
Reconvened 10:10 a.m.

Review Practice Plan from Kenneth Nielson:

Mr. Nielson indicated he will be working at San Juan Pharmacy in Blanding under the supervision of Dana Nielson. Mr. Fitzpatrick made a Motion to approve Mr. Nielson's Practice Plan. Ms. Kemper seconded the Motion. All Board members in favor.

S. Rich Wright,
Practice Plan:

Mr. Wright submitted his practice plan for review. Board members expressed concern that Mr. Wright will be working for hospice and will have access to a large number of controlled substances. Board members would like Mr. Wright to address this issue in his practice plan. He also needs to add into the practice plan the controlled substance audit, how the controlled substance audit will be handled and how discrepancies will be addressed. Mr. Wright indicated he would submit a standard log, however, the standard log reports discrepancies but does not address how discrepancies are handled. Board members would also like to see how the employer keeps records of daily controlled substance counts.

Susan Macon,
New Order:

Mr. Young conducted the interview. Ms. Macon explained the circumstance that brought her before the Board. Ms. Macon stated when she renewed her license in 2007 she failed to acknowledge a prior criminal history that had occurred in 2003. She indicated she had pleaded guilty to retail theft, but the charge had been expunged in 2007.

A psychological evaluation was completed and submitted by Dr. Etringer. Board members reviewed the evaluation and based on that evaluation, Ms. Macon will not be required to obtain therapy at this time. Ms. Macon is working at Omnicare and she stated she will have access to controlled substances. She submitted a practice plan for review. Mr. Young made a Motion to approve the practice plan. Mr. Fitzpatrick seconded the Motion. All Board members in favor. Ms. Call reminded Ms. Macon that her self assessment reports are due monthly, but all other

reports are due quarterly. Ms. Macon's next meeting will be scheduled for April. **Ms. Macon is in compliance with the terms and conditions of her Order.**

Mary Jo Cates,
Quarterly Interview:

Mr. DeRose conducted the interview. Ms. Cates reported everything is going well. She stated she feels she has made a lot of improvement and that her self confidence is returning. She indicated she still works 15-20 hours per week. Ms. Cates questioned whether or not she could request termination of direct supervision. Board members indicated she can make the request anytime she would like. She would need to submit the request in writing along with a letter from the supervisor in support of the request. **Ms. Cates will be scheduled again in April. Ms. Cates is in compliance with the terms and conditions of her Order.**

Sheryl Ledet,
Quarterly Probation Interview:

Dr. Lundberg conducted the interview. Ms. Ledet reported things are going well and she has been calling CVI routinely. Ms. Ledet stated she is submitting reports to the Division on a monthly basis which helps her maintain her focus on her probation. Dr. Lundberg indicated that the PIR meeting attendance reports have not been submitted. Ms. Ledet indicated she is attending PIR meetings. She stated she spoke with Nancy Carter, the facilitator, who had indicated the reports would be sent quarterly. Ms. Call suggested Ms. Ledet have Ms. Carter sign the PIR attendance cards each time she meets with her and Ms. Carter could still submit quarterly reports. Ms. Ledet also stated she had the wrong fax number and has been sending her reports to Salt Lake Regional Hospital. She stated she has now corrected the fax number and is submitting her reports to the Division. **Ms. Ledet is out of compliance due to the missing PIR attendance report.** Ms. Ledet will be seen in April.

Mark Akagi,
Quarterly Probation Interview:

Mr. Garn conducted the interview. Mr. Akagi stated he is not currently looking for a position in pharmacy. He stated he understands he would need to submit a practice plan prior to resuming practice. Mr. Akagi questioned how he would obtain approval from the Board if he fills-in for another pharmacist on short notice. Mr. Garn stated that he could discuss and

develop a practice plan with the employer and fax it into the Division. Board members also suggested he have a general practice plan ready that could be submitted and approved once the employing pharmacy/pharmacist determined what would be expected of him in that pharmacy. The employer would also need to submit an evaluation and a signed statement that he/she has read and understands the Order. Mr. Akagi has not practiced since he signed his Order and stated he understands the time is not counting toward probation. He stated he is not sure if he will return to the practice of pharmacy. Mr. Young indicated he has a relatively short probation period and he is penalizing himself by not working. Mr. Akagi stated he would be willing to continue quarterly telephone interviews. He will be contacted in April for his quarterly telephone interview. **Mr. Akagi is in compliance with the terms and conditions of his Order.**

Aidee Torres,
Interview:

Dr. Lundberg conducted the interview. Ms. Torres indicated she has returned to work after having her baby and is working at K-Mart full time. Ms. Torres indicated that while she was on maternity leave she was unable to pay CVI and her account had been placed on hold. Dr. Lundberg reported the urine screen collected on January 4, 2010 was positive for alcohol. Ms. Torres stated she had attended a family gathering on New Year's Eve and had a glass of wine. She stated there have been no other instances where she has ingested alcohol. Mr. Garn questioned what she would do the next time her family offers her a drink? She stated she didn't think one glass of wine would hurt but next time will decline the drink. She stated she understands she cannot have any alcohol at all.

Dr. Lundberg informed Ms. Torres that she has been out of compliance for a period of time. The Board tried to contact her last month for an interview; however, her telephone had been disconnected. Dr. Lundberg questioned whether or not she contacted Ms. Call to let her know she had a new telephone number and to let Ms. Call know why she was not calling CVI. Ms. Torres stated she did not keep Ms. Call informed. Dr. Lundberg stated Mr. Torres needs to communicate

better with Ms. Call and let her know when she is having problems. Ms. Torres stated she will keep Ms. Call informed and promised to get back on track.

Ms. Call indicated Ms. Torres has been non-compliant every quarter since October 2008 and stated she may need to be referred for an Order to Show Cause Hearing. Board members questioned how Ms. Torres plans on coming into compliance? Ms. Torres stated she will start calling CVI and is willing to meet with the Board in person. Dr. Lundberg stated she is on the fence regarding referring Ms. Torres for an Order to Show Hearing. Ms. Torres is doing very well at work, but does not appear to be taking the probation seriously. Mr. Fitzpatrick stated his recommendation would be to give her three months to show us she can come into compliance. If she remains out of compliance by March, then she would be referred for an Order to Show Cause Hearing. Ms. Torres stated she understands she needs to call CVI everyday and communicate with Ms. Call regarding any problems that come up. She will be seen again March 23, 2010. **Ms. Torres is out of compliance with the terms and conditions of her Order.**

Phuong Sheffer,
Interview:

Mr. DeRose conducted the interview. Mr. Sheffer reported things are going well. He stated he feels like he is running into a brick wall trying to find a job as a pharmacist. He stated he is interested in becoming a volunteer and has looked at the 4th Street Clinic and with the United Way. He stated he has not had a response from 4th Street Clinic, but questioned whether or not working as a volunteer would be acceptable and if it would meet the terms and conditions of the Order. Mr. Fitzpatrick stated work as a volunteer would count as long as he remains in compliance with the terms and conditions of the Order. According to the paperwork he submitted, his felony was reduced to a misdemeanor. He reported he has 2 ½ years before he can get his record expunged. **Mr. Sheffer is in compliance with the terms and conditions of his Order.**

Richard Anderson,
Renewal application:

Mr. Anderson requested he be rescheduled for next month.

Lunch Break at 12:00 noon
Reconvened at 12:30 p.m.

Pharmacy Technician Program Review:
Oquirrh Mountain Pharmacy:

Ms. Kemper reviewed the documents submitted by Oquirrh Mountain Pharmacy. Additional information will be requested and a letter will be sent asking for further information.

Rima Matt
Pharmacy Intern Application:

Ms. Matt submitted an application as a pharmacy intern. Ms. Matt graduated from a pharmacy program in Saudi Arabia and passed the FPGEC. However, she stated she needs to pass the TOEFL examination before the FPGEC certification will be issued. Ms. Poe indicated our rules require the educational evaluation, but doesn't require the examination or FPGEC certificate. Ms. Matt passed the NAPLEX examination February 2008 for the state of Michigan and has a current Michigan intern license. Ms. Matt indicated she cannot find employment in Michigan and has moved to Utah. She currently has a pharmacy technician license here. Board members indicated if Ms. Matt submits documentation from FPGEC that her education is equivalent, she could be issued the intern license. Once she has completed the 1500 intern hours, she would be eligible to apply for licensure as a pharmacist and for the MPJE examination.

Harmon' Pharmacy,
Notification that the ScriptPro SP 200 Robotic
Prescription Dispensing System will be
installed at specific Harmon's Pharmacies:

Mr. Fitzpatrick stated the intent of the Rule to require notification was that when the pharmacy investigator goes into a pharmacy, he/she will know what to expect in that pharmacy. Board members indicated the Division needs to acknowledge the notification. The Board indicated the Division can review these notifications without bringing them before the Board unless there are questions or concerns.

Planned Parenthood Pharmacy:

Tabled.

MPJE Examination review:

Ms. Poe reported she received an e-mail from NABP regarding review of the MPJE examination. The last review by Utah was in Chicago October 2008. Ms. Poe indicated state travel has been restricted; however, the NABP representative indicated he may be able to arrange to have the Board review the information. Ms. Poe indicated she is in the communication process

and trying to work it out so that the review can take place on a day of the Board meeting. Mr. Fitzpatrick stated he would like to be involved in the review.

Discussion Items:

Ms. Poe questioned whether or not a pharmacy located in the same physical location can be dual licensed as a Class A Retail Pharmacy and a Class B pharmacy. Ms. Poe indicated there are several pharmacies that have dual licensure because they are open to the public and also serve a closed population. Board members indicated the pharmacy could be licensed as both. The pharmacy would need separate inventories and would have to account for both inventories; however, the inventory could be kept in the same room. Mr. Fitzpatrick stated that those pharmacies that have dual licensure probably have a defined patient population that qualifies for discount medications and also have a public population. Mr. Fitzpatrick reported there are specific federal guidelines that need to be followed; however the federal guidelines don't specify the type of license required.

Ms. Poe indicated a Pharmaceutical Administration Facility received a Class A pharmacy license. She indicated the reason for issuing the Class A pharmacy license was that the facility was open to the public. Ms. Poe reported that a Division investigator is insisting that since they are not retail, they must have a Class B pharmacy license. This facility has indicated that making a license number change would be a nightmare for them because they have established a billing code under the license number that was issued. Mr. Fitzpatrick stated if they have a pharmacist on duty at all times, they could have a Class A pharmacy license. If they have a Class B pharmacy license they do not need a Pharmacist-in-charge. The key is whether or not they have a pharmacist on duty when the facility is open or if they have a consulting pharmacist. Ms. Poe stated it appears that it would be acceptable to hold both a Class A pharmacy license and a Class B pharmacy license if they meet the criteria for both. Separate inventories need to be kept. Ms. Poe questioned if there needs to be a PIC for the Class A pharmacy and one for the Class B pharmacy, and what happens if they work the same hours. The Rule only states that the PIC cannot be the PIC at two

Class A pharmacies, it does not state they cannot be a PIC for a Class A pharmacy and a Class B pharmacy.

Discussion:

Mr. Memmott reported that Class A pharmacies are compounding medications in anticipation for office use. He questioned at what point in time are you compounding a patient's prescription versus becoming a wholesale pharmacy. Mr. Fitzpatrick stated if the physician requests the same compound and the pharmacist knows the physician will be sending in the patient, the pharmacist can compound the drug in anticipation. If the drug is for office use, there is no provision in the law regarding stockpiling for the physician's office. However, it should be done on an as needed basis and the key phrase is for office use. Mr. Memmott questioned if it is acceptable for a pharmacy to prepare drugs for office use and not patient specific? Board members indicated the answer could be yes and no. Board members stated if the drug is not commercially available the pharmacist can compound it for office use. A limit has never been defined. If the drug is commercially available they should be getting it from a manufacturer for office use. The FDA states that if a drug is available commercially, it may not be compounded. If it is more than 5% of the total sale in profits, a wholesaler license would be required. If commercially available the practitioner can obtain it from the pharmacy. If not commercially available the pharmacist can compound. There should be documentation to validate the need and a valid basis to compound ahead. Board members stated that the investigator would need to look at the batch numbers and all appropriate information and that it meets Federal USP <795> requirements. What is not acceptable is to compound and then go to the practitioners and say I have this incredible cream and try to sell it.

Reid Barker,
Legislative Update:

Mr. Barker reported on Senate Bill 41, Drug Utilization Review Board. This bill is in regards to the drug prior approval program for Medicaid. Mr. DeRose stated he sits on this Board and the issue is currently the Board cannot use the word cost when considering placing a drug on the formulary for Medicaid. He stated the Board makes a decision on patient care, then after the meeting, they make a

decision based on cost. Some people feel the only consideration is cost. Mr. DeRose stated there are two separate Committees that place a drug on the formulary.

Mr. Barker stated House Bill 104 makes it a Class B misdemeanor to unlawfully provide identifiable prescription information. Mr. Fitzpatrick stated he would like to know more about this bill.

Mr. Barker stated Pharmacy day on Capital Hill is Thursday, February 18, 2010.

Patrick Baker:

Mr. Baker indicated he is following-up from previous meetings regarding Nuclear medicine. Mr. Baker continued to express his concern regarding an Idaho Pharmacy shipping nuclear medicine into Utah. Mr. Garn stated if they are shipping into Utah patient specific, then we would have jurisdiction, however, if it is not patient specific and the company is licensed in their state, we have no jurisdiction.

Ms. Poe indicated we will need to amend the Pharmacy Practice Act rule to include the USP <797> inspection guidelines under nuclear pharmacy and to expand the radiopharmaceutical section. Once the rule has been adopted, the Board can say this is the standard you need to meet. Ms. Poe indicated the Board is working on the Rules and Mr. Baker can submit his recommendations.

Ms. Poe also discussed adding that out-of-state compounding pharmacy must meet Federal USP <795> and USP <797> guidelines.

Review Rules draft:

Board members reviewed the Rule Draft.
R156-17b-102 – Definitions.

(20) “Legend Drug”. Ms. Poe stated she was informed that the term “legend drug” is not a legal term. There are only controlled and non-controlled drugs. The current definition regarding legend drug will be eliminated and the new proposed wording “means a prescription drug that is not a controlled substance” will be added.

(29) Added a definition “Prescription drug” means any drug or device that has been determined to be unsafe

for self-medication or any drug or device that bears or is required to bear the legend: (a) “caution: federal law prohibits dispensing without prescription”; (b) “caution: federal law restricts this drug to use by or on the order of a licensed veterinarian”; or (c) “Rx only”.

Added a number (4) to section R156-17b-302 which reads “A graduate of a foreign pharmacy school shall obtain a passing score on the FPGEC examination.”

Move section R156-17b-306(4) which outlines criteria for an approved preceptor to section R156-17b-606, Operating Standards – Approved preceptor.

Board members discussed changing the period of time the preceptor must have been engaged in practice. Mr. Young stated a new graduate should not be allowed to be a preceptor, but he feels that six months would be acceptable. Mr. Garn stated he is aware of an instance where the pharmacist was only licensed in the United States for three months, but had been licensed in their country for a period of time. Ms. Poe indicated that licensed work experience in another country should be acceptable as long as it was licensed practice. Dr. Lundberg stated other professions have the two year requirement and it appears to be the DOPL standard. Mr. Young stated his concern is that the two year requirement excludes highly qualified individuals. Mr. Fitzpatrick stated that if the individual is a resident for one year, then licensed one year, it would be acceptable. After further discussion, Board members indicated section R156-17-606(4)(b) be changed and the period of time engaged in the active practice as a licensed pharmacist be changed from not less than two years to not less than one year.

R156-17b-502 Unprofessional conduct:

Added number (16). Board members stated FED needs to be changed to FDA.

Added number (17) failing to keep or report accurate records of pharmacy technician-in- training hours.

Added number (18). Board members suggested changing to “failing to report any PIC changes to the Division within 30 days of the change.” Board members indicated the pharmacy could appoint a temporary PIC until a permanent PIC is hired. If the

PIC is on medical leave, it would be up to the pharmacy whether or not a temporary PIC is appointed. Ms. Poe suggested adding this concept to section R156-17b-603 and indicate there must be a current PIC, interim or temporary PIC.

Discussion regarding the added number (19) “forcing a PIC or pharmacist to supervise more individuals than the PIC or pharmacist is comfortable supervising”.

Board members indicated that using the word “comfortable” is very subjective and stated that since number (20) covers this issue, number (19) be eliminated. The pharmacist would define unreasonable risk. Board members questioned whether or not the pharmacist would have to define why he feels it is an unreasonable risk. Board members questioned whether or not there would be a fine that could be assessed to the employer. Ms. Poe indicated she would check to see if the fine for “non-licensed” would allow the Division to issue a citation for practicing pharmacy without a license.

R156-17b-601(3) Operating Standards – Pharmacy Technician: eliminated the wording regarding the number of pharmacy technicians that a licensed pharmacist could supervise and added “one technician-in-training actually on duty at any one time.”

Take out R156-17b-602(2) which had stated an approved preceptor can supervise up to two pharmacy interns on duty at the same time.

To section R156-17b-603 add interim PIC language.

R156-17b-606(1) Operating Standards – Approved Preceptor. Add “supervising no more than two interns” and eliminated working for compensation and interns who are doing educational, observational rotations.

R156-17b-613 added “Part 1304.04 of section 21 of the CFR”.

Ms. Poe stated she will make the changes as discussed. She indicated she will clarify that Class B Pharmacies need to meet the compounding standards and then send the Rules out for Board member review. These

changes could become effective in June.

Ms. Poe stated the online pharmacy is a separate issue and we need to wait to see if the Legislature addresses this issue.

Principle Pharmacy Group:

Tabled.

Adjourned:

3:25 p.m.

Note: These minutes are not intended to be a verbatim transcript but are intended to record the significant features of the business conducted in this meeting. Discussed items are not necessarily shown in the chronological order they occurred.

March 23, 2010
Date Approved

(ss) Dominic DeRose
Dominic DeRose, Chairperson, Utah Pharmacy
Licensing Board

March 23, 2010
Date Approved

(ss) Laura Poe
Laura Poe, Bureau Manager, Division of Occupational
& Professional Licensing