GEORGIA BOARD OF PHARMACY
2 MLK Jr. Dr. SE, East Tower, 11th Floor, Atlanta, GA 30334
Minutes for July 22, 2026 Board Meeting

Board Members present:
Mr. Young Chang, President
Mr. Michael Farmer, Vice President
Dr. Michael Azzolin
Mr. Michael Brinson
Mr. James Bracewell
Dr. Cecil Cordle
Mr. Dean Stone

Board Staff present:
Mr. Clint Joiner, Executive Director
Mr. Michael Karnbach, Director, GDNA
Mr. Alec Mathis, Deputy Director, GDNA
Ms. Itovia Evans, Deputy Director of Licensing
Mrs. Angela Johnson, Board Admin. Secretary
Ms. Vanessa Alva, Assistant Attorney General

Visitors:
Stephanie Kirkland, Eldercare
Kenneth Bailey, UGA Vet Teaching Hospital
Brandy Burgess, UGA Vet Teaching Hospital
Nichole Northrup, UGA Vet Teaching Hospital
Allison Barker, Emory
Rebecca Rice, CVS
Angie Healy, Wellstar
Kamryn Wham, GHA
Greg Mullins, GPhA
Brandon Brooks, Publix
Jada Evans, PruittHealth
Ben Wright, The Hudson Group
Gary Long, BotSci
Helen Sloat, Gold Dome Partners
Rob Geddas
Jordan Khail, UGA College of Pharmacy
Rusti Houston, Walgreens
Thomas Tucker, Cap City
Mark Clayton
Gabrielle Clevveau, Lever Point Consulting
Heather Upchurch, Emory
Sreegowri Chimalakowda, DPH
Lisley Brooks, DPH
Kimberly Hazelwood, DPH
Charlotte Davis, JL Morgan Co.
Bill Dahlman, Pharm Tech Forward
Chris Cline-Dahlman, Pharm Tech Forward
Olivia Kosooca, Troutman Strategies
Angela Leischner
Susan Brim

Open Session

President Chang called the meeting to order at 09:04 a.m.

Approval of Minutes

Mr. Brinson made a motion to approve the Open and Executive Session minutes from the June 24, 2026, meeting. Mr. Stone seconded, and the Board voted unanimously in favor of the motion.

Report of Licenses Issued

Director Joiner reported that, since the last meeting, the Board has issued a total of 607 licenses, including 422 Pharmacy Technician licenses, 139 Pharmacist licenses, and 46 facility licenses. The facility licenses included 7 Low THC Dispensary permits and 6 Remote Automated Medication System (RAMS) licenses.

Mr. Stone made a motion to ratify the list of licenses issued. Mr. Farmer seconded, and the Board voted unanimously in favor of the motion.

Petitions for Rule Waiver or Variance

AU Medical Center Inc. dba Wellstar Columbia County Medical Center - Waiver of Rule 480-13-.04.

The Board considered a rule waiver request from AU Medical Center d/b/a Wellstar regarding Rule 480-13-.04. The request sought approval for pharmacists to remotely verify medication orders between AU Medical Center, Wellstar MCG, and Columbia County Medical Center for overnight coverage.

Following discussion, the Board determined that the request was not a true rule waiver but instead fell under the Board's existing Remote Order Entry Policy. The Board concluded that the hospitals could operate under the Remote Order Entry Policy upon approval of the required policy and procedures, making a rule waiver unnecessary. The Board denied the rule waiver request and approved the Remote Order Entry Policy for the identified hospital permits.

Mr. Stone made a motion to deny the waiver request but to approve the request as a Remote Order Entry Policy. Dr. Cordle seconded the motion, and the Board voted in favor of the motion.

Archibold Northside – Corp Hospital Pharmacy Waiver of Rule 480-13-.05(2)(a)(1)
The Board considered a rule waiver request from Archbold Northside Hospital seeking relief from the requirement that a hospital pharmacy maintain a refrigerator within the pharmacy. The applicant explained that refrigerated medications were stored in automated dispensing cabinets located outside the pharmacy and that no refrigerated medications were maintained within the pharmacy itself. Director Karnbach noted that, although the request was practical, the refrigerator requirement applies to all pharmacy permits and that granting a waiver without a unique hardship could create a precedent for similar requests. The Board agreed that the issue reflected an outdated rule rather than a unique hardship warranting a waiver.

After discussion, the Board determined that the rule waiver request should be denied but directed staff to begin developing amendments to modernize the equipment requirements in the Board's rules. Director Joiner recommended modeling the amendment after the Board's recent revisions regarding laminar flow hood requirements by making equipment requirements conditional upon the services provided. The Board also discussed consolidating common equipment requirements into a single rule applicable to all pharmacy permit types to simplify future rule updates.

Mr. Stone made a motion to deny the waiver request and direct staff to develop amendments to modernize the equipment requirements of Rule 480-13-.05. Mr. Brinson seconded, and the Board voted in favor of the motion.

Correspondence
Correspondence from Kenneth Bailey, Director of Pharmacy – UGA College of Veterinary Medicine
The Board discussed a request from Kenneth Bailey, Director of Pharmacy at UGA's College of Veterinary Medicine, regarding the appropriate licensure for a separate teaching laboratory facility. The teaching laboratories are located in a different building from the veterinary teaching hospital and require access to controlled substances and dangerous drugs for instructional purposes, including animal sedation, diagnostic procedures, and veterinary patient care.

Mr. Bailey explained that the DEA advised UGA that the teaching laboratory could obtain an institutional DEA registration but requested that the College determine the corresponding Georgia state license or permit that would allow multiple veterinarians supervising various teaching laboratories to lawfully access and use medications under a single facility registration. He noted that the current model of relying on an individual veterinarian's registration was not practical because multiple faculty members conduct different laboratory sessions.

Director Karnbach stated that the existing Drug Researcher Permit appeared to be the closest fit, although additional review would be necessary. He explained that research permits are generally issued to a facility with a designated person in charge while allowing multiple authorized individuals to work under that permit, a structure that could potentially accommodate the

College's teaching environment. He also questioned whether the research permit could encompass activities involving patient care performed as part of veterinary instruction.

Director Joiner reviewed the applicable Georgia law and noted that the statute authorizes permits for entities handling controlled substances or dangerous drugs for purposes including research, analysis, animal training, or drug education. He further observed that the restrictions on a Drug Researcher Permit prohibit the sale, distribution, or dispensing of drugs but do not prohibit administration by licensed practitioners in an educational setting. He also noted that the Board's application already requires identification of a person in charge, similar to other facility permits.

The discussion clarified that the proposed teaching laboratory would maintain its own DEA registration, state permit, drug inventory, and purchasing authority, independent of the veterinary teaching hospital. The teaching hospital would not transfer medications to the laboratory. Instead, the laboratory would procure and account for its own controlled substances while allowing multiple veterinarians and licensed veterinary technicians to operate under the facility's designated responsible individual.

Following discussion the Board concluded that the most appropriate path forward was for the University to apply for a Drug Researcher Permit. The Board also indicated that the state inspection could be coordinated with the DEA inspection process if necessary.

Correspondence from Justin Kim regarding intern application.
The Board reviewed correspondence from Justin Kim, a recent graduate of Loma Linda University School of Pharmacy in California, requesting guidance regarding eligibility for a Georgia pharmacy intern license. Mr. Kim intends to return to Georgia to work as a graduate intern while completing the pharmacist licensure process.

The Board discussed the statutory requirements for pharmacy intern licensure and noted that, under current law, an individual applying for an intern license must meet specific eligibility requirements related to enrollment and prior Georgia intern licensure. Because Mr. Kim graduated from an out-of-state pharmacy school without previously obtaining a Georgia intern license, the Board determined that it does not have authority under the current statutory language to issue him an intern license. The Board also noted that intern licenses are not eligible for reciprocity from another state. In the interim, Mr. Kim may apply for registration as a pharmacy technician and work in that capacity while pursuing pharmacist licensure.

The Board discussed concerns that the current statutory requirements create a barrier for graduates of out-of-state pharmacy schools seeking to return to Georgia and work as graduate interns. The Board agreed that the issue should be considered for a future legislative change to provide a pathway for otherwise qualified pharmacy graduates to obtain a Georgia intern license.

<u>Georgia Drugs and Narcotics Agency</u> – Dr. Michael Karnbach
Georgia Drugs and Narcotics Agency (GDNA) Annual Report
Director Karnbach presented the Georgia Drugs and Narcotics Agency's Fiscal Year 2026 year-end report. He reviewed agency accomplishments, future initiatives, complaint and investigation trends, notifications of loss, and pharmacy inspection activity.

Director Karnbach reported that GDNA received funding for one additional agent in Southeast Georgia, realigned its territories from twelve to eleven, and removed routine caseload and inspection requirements from agent supervisors to allow them to provide greater direct assistance and supervision to field agents. GDNA also implemented the General Inspections process and

continued its educational outreach, including guest lectures at all four pharmacy schools and presentations to GPhA, GSHP, and the NABP National Convention. Director Karnbach also discussed staff completion of law enforcement and firearms instructor training.

Director Karnbach outlined future agency goals, including continued evaluation and enhancement of Evoke to better identify complaint and error trends and use the information to proactively educate pharmacists. Additional goals include further agent instructor training, obtaining legal and information technology services, and seeking funding for an in-house attorney and an additional agent.

The Board reviewed FY26 investigation and complaint data. GDNA reported 1,084 total investigations during FY26, including 700 notifications of loss and 254 matters referred by the Board of Pharmacy. Board complaint referrals increased from 73 in FY16 to 254 in FY26, representing a reported 248% increase since 2016 and an average annual increase of 16%. Director Karnbach noted that the significant increase in total investigations during FY26 was attributable in large part to GDNA's tracking of notifications of loss.

Director Karnbach reviewed the nature and disposition of Board complaints. Prescription errors represented 53% of Board complaint allegations. Of the prescription-error allegations investigated, 61% were determined to be unfounded with no violation identified. Among substantiated errors, incorrect drug or strength and incorrect patient were the most frequently identified outcomes. The Board also reviewed the geographic distribution of complaints, with Cobb, Fulton, and Gwinnett counties reporting the highest numbers.

Director Karnbach reported that GDNA received 700 notifications of loss during FY26. Of those, 81% contained a DEA Form 106, 6% involved confirmed theft, burglary, or armed robbery, and 3% were ultimately presented to the Board. Additionally, 52% of Georgia counties reported no losses. Director Karnbach discussed the amount of agency resources required to review and evaluate notifications of loss and encouraged continued evaluation of reporting requirements so that investigative resources may be directed toward matters warranting further action.

Director Karnbach also reviewed pharmacy inspection activity by permit and purpose type. Retail pharmacies accounted for the largest number of inspections. Of the inspections conducted, 1,898, or 82%, were routine inspections; 350, or 15%, were application inspections; 25, or 1%, were remodel inspections; and 55, or 2%, were follow-up inspections. Additionally, 366 inspections, or 14%, required more than one agent. Director Karnbach explained that utilizing multiple agents for facilities with multiple permit or practice types can reduce the amount of time the pharmacist must devote to the inspection process.

The Board discussed opportunities to further utilize GDNA's data to identify trends and improve pharmacy practice. Director Karnbach explained that GDNA has begun collecting additional information during prescription-error investigations to identify where in the dispensing process an error occurred. The intent is to use the information proactively during inspections and educational outreach to help pharmacists recognize common sources of errors and reduce future occurrences. Board members suggested future reports include additional correlations between notifications of loss and resulting cases, as well as inspection activity relative to the number of permits within each permit type.

The Board also discussed the importance of communication and empathy when pharmacies respond to patients following prescription errors, noting that some complaints may arise from

how an incident is handled rather than the underlying error alone. The Board encouraged GDNA to continue sharing complaint and error trends with pharmacists, pharmacy schools, and professional organizations as an educational and preventive measure.

The Board commended Director Karnbach and GDNA staff for their work, educational outreach, data collection, and efforts to use the information proactively to improve pharmacy practice and patient safety.

Attorney General's Report – Ms. Vanessa Alva
No Report.

Legal Services and Executive Director's Report – Mr. James Joiner
Director Joiner reported that the Board issued 7,552 new licenses during the previous fiscal year, averaging approximately 629 licenses per month. Approximately 75% of the new licenses were pharmacy technician licenses, 10% were pharmacist licenses, and approximately 9% were facility licenses. Among facility licenses, wholesalers and non-resident pharmacies represented the largest categories. The Board also issued six Low THC permits during the fiscal year, while recent legislative changes resulted in the issuance of seven Low THC permits and six RAMS permits since the previous Board meeting. Director Joiner noted that Board staff process approximately 700 licenses per month across both the Pharmacy and Dentistry Boards and recognized the licensing staff for managing the significant workload.

Director Joiner advised that, effective August 1, pharmacist applicants will be required to complete a criminal background check at the time of initial application, consistent with the existing requirement for pharmacy technicians. Renewal applicants will continue to self-report criminal history but will not be required to undergo another background check. Additionally, applicants who fail to disclose criminal history on their applications will be assessed a $25 service fee per undisclosed offense to offset the administrative burden associated with reviewing incomplete applications. The Board discussed that many applications require additional review solely because applicants fail to disclose criminal history, despite it being revealed through fingerprint-based background checks.

Director Joiner also reported on the Board's educational outreach at the Georgia Society of Health-System Pharmacists (GSHP) meeting, noting that the presentations generated valuable discussions with licensees and identified issues that may lead to future policy changes. He emphasized that feedback received at professional meetings frequently results in improvements to Board policies and procedures.

During discussion, the Board recognized the importance of promptly issuing licenses to military spouses in compliance with the Servicemembers Civil Relief Act (SCRA) and noted that these licenses are now issued through the standard licensing process rather than a temporary licensure process, allowing applications to be processed more efficiently.

Discussion Topics
Southeast Georgia Health System Camden Campus – Request for Remote Order Entry
The Board discussed correspondence from Southeast Georgia Health System regarding remote order entry. It was confirmed that approval of remote order entry meeting the established guidelines and parameters had previously been delegated to staff. No Board action was required.

Treatment Provider Renewal Applications
The Board reviewed renewal applications submitted by Karen Skinner (Athens Area Addiction

Counseling) and UF Health Florida Recovery Center to continue as Board-approved treatment providers. No changes or concerns regarding the providers' services were identified.

Mr. Brinson made a motion to approve the renewal applications for Karen Skinner (Athens Area Addiction Counseling) and UF Health Florida Recovery Center. Mr. Farmer seconded, and the Board voted in favor of the motion.

Review of Policy for Administratively Processing Licenses (Delegated Authority)
The Board reviewed the policy guidelines used by staff for the administrative approval of license applications, as previously requested by the Board. Following review and discussion, the Board determined that no changes were necessary and agreed to maintain the policy as currently written.

Pharmacy Technician Education and Continuing Education
Christine Cline-Dahlman, CPhT-Adv, CPT Ed, appeared before the Board to discuss trends and changes in pharmacy technician education, certification, and continuing education as they relate to the Board's consideration of continuing education requirements for pharmacy technicians. She discussed changes in national education standards, including changes related to sterile and nonsterile compounding, the increasing role of specialty certifications, and the growth of alternative technician education programs.

Ms. Cline-Dahlman encouraged the Board to consider competency-based education and certification as pharmacy technician roles continue to expand and offered to provide additional resources regarding technician education and professional development. The Board thanked Ms. Cline-Dahlman for her presentation and recognized the importance of supporting the education and advancement of pharmacy technicians.

Pruitt Health Pharmacy Services Atlanta – Request to add home infusion therapy
The Board revisited a request from PruittHealth Infusion Pharmacy regarding documentation needed to satisfy insurance contracting requirements. Dr. Jada Evans, a representative from PruittHealth explained that, although the pharmacy holds Accreditation Commission for Health Care (ACHC) accreditation, complies with USP 797 and USP 800, and recently underwent a Board inspection, certain insurers are requesting documentation from the Board specifically recognizing the pharmacy as an infusion pharmacy and confirming its compliance with applicable standards.

Dr. Azzolin asked whether the insurers had reviewed the Board's inspection report and whether they had specifically requested additional documentation after receiving it. Dr. Evans confirmed that the inspection report had been provided but that the insurers continued to request additional confirmation from the Board.

Director Karnbach explained that the Board's inspection report represents a snapshot of the conditions observed during the inspection and that the Board does not issue separate certifications or letters affirming ongoing compliance. Mr. Brinson agreed, noting that the Board does not have the authority to issue the requested compliance certification and that GDNA is the Board's inspection and regulatory agency.

As an alternative, Dr. Azzolin suggested that PruittHealth provide insurers with a copy of the Board meeting minutes documenting the Board's discussion and explaining that the Board does not issue additional compliance certifications beyond its inspection reports. The Board noted that the approved meeting minutes would be publicly available and could be used for that purpose.

Immunization Authority
Mr. Stone raised concerns regarding the uncertainty surrounding pharmacists' authority to administer COVID-19 vaccines due to the inability of the Advisory Committee on Immunization Practices (ACIP) to meet and update the adult immunization schedule. He noted that the Board and GPhA have received numerous inquiries from pharmacists seeking guidance because Georgia law ties pharmacist vaccine authority to the ACIP-recommended immunization schedule.

Mr. Jonanthan Marques from the Georgia Pharmacy Association (GPhA) reported that the Association has been receiving multiple calls each week from pharmacists concerned about administering COVID-19 vaccines. While pharmacists may still administer vaccines pursuant to a patient-specific prescription, the inability to rely on the ACIP schedule creates delays in patient care and operational challenges.

Mr. Stone referenced O.C.G.A. § 43-34-26.1, noting that the statutory definition of a vaccine also includes vaccines administered for illnesses that resulted in a declared public health emergency. He questioned whether that provision could provide authority for pharmacists to continue administering COVID-19 vaccines and requested that Director Joiner review the issue and determine whether guidance or an opinion from the Attorney General's Office would be appropriate.

Board members acknowledged that, although pharmacists could continue administering COVID-19 vaccines pursuant to patient-specific prescriptions, the current statutory framework creates operational challenges, particularly because pharmacy technicians administer many immunizations under protocol. Members also agreed that reliance on a federal advisory committee creates uncertainty and discussed the possibility of pursuing future legislative changes to address the issue.

Director Joiner agreed to review the applicable statutes and provide guidance. He advised that licensees should monitor the Board's website for additional direction.

Old Business – Follow-up
Non-Resident Pharmacies Shipping into Georgia
The Board continued its discussion regarding oversight of non-resident pharmacies dispensing and shipping medications to patients in Georgia. Several Board members expressed concern that Georgia pharmacies are subject to inspection requirements and other regulatory standards that may not be consistently applied to non-resident pharmacies. The Board discussed existing statutory requirements applicable to certain non-resident compounding pharmacies and whether similar inspection requirements could be applied more broadly to non-resident pharmacies serving Georgia patients.

The Board agreed that expanding inspection requirements for non-resident pharmacies would likely require a statutory change and directed that the matter be moved forward for consideration as a potential legislative initiative.

Prescription Transfers – Rule 480-22-.11
The Board reviewed proposed amendments to Rule 480-22-.11 regarding prescription transfers, as well as the proposed repeal of Rules 480-10-.10, 480-27.07 and 480-27-.08. Discussion included the provisions governing transfers between pharmacies utilizing a shared real-time online computerized database and whether current restrictions remain appropriate given advances in pharmacy technology. The Board noted that these provisions may warrant further

consideration following receipt of public comment.

Mr. Farmer made a motion to post the proposed amendments to Rule 480 for a public hearing. Mr. Stone seconded, and the Board voted in favor of the motion.

Closed-Door Pharmacy Definition
The Board discussed whether changes were necessary to the statutory definition of a closed-door pharmacy. The Board reviewed the existing definition, which generally provides that a closed-door pharmacy provides specialized services and is not open to the general public. The Board discussed its ability to evaluate different pharmacy models on a case-by-case basis and determined that no legislative change to the definition was necessary at this time. The Board agreed to maintain the current definition and remove the matter from its ongoing work list.

HIV PrEP and PEP
The Board discussed implementation of recent legislative changes regarding pharmacist-provided HIV pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP). Representatives from the Georgia Department of Public Health (DPH) were recognized, and the Board discussed continued collaboration with DPH in developing the statewide protocol and related rules.

The Board was advised that the workgroup had recently revised the proposed rules, including additional provisions addressing bloodborne pathogens and emergency medical services. An updated draft will be provided to Board members for review in preparation for further consideration at the next meeting.

Oral Contraceptives
The Board discussed implementation of the recent legislative changes regarding pharmacist-provided oral contraceptives. DPH has identified representatives to participate in the development process, and a meeting will be scheduled between the Board's representatives and DPH to begin developing the statewide protocol and related requirements.

Low-THC Oil
The Board received an update regarding the workgroup addressing pharmacist dispensing of low-THC oil. The workgroup had not yet met due to scheduling conflicts but anticipated meeting within the following weeks. The Board was advised that applications are currently being received and processed in accordance with the statutory changes effective July 1. Applicants may indicate that certain application provisions affected by the new law are not applicable. The application will also be updated to reflect the statutory changes. An update will be provided at the August meeting.

Pharmacy Technician Continuing Education – Rule 480-15-.02
The Board reviewed proposed amendments to Rule 480-15-.02 that would remove the requirement for pharmacy technicians to complete 20 hours of continuing education each renewal period. The proposed amendment would retain the statutory requirement for pharmacy technicians involved in vaccine administration to complete two hours of continuing education related to immunizations.

Board Members discussed pharmacy technician workforce shortages, particularly in rural areas, the lack of regulatory distinction between certified and registered technicians, and whether additional education requirements should be imposed without corresponding expansion of technician duties and responsibilities. The Board also discussed the potential for competency-

based education and expanded technician roles in the future.

Consumer Member, Mr. Jim Bracewell, requested that the Board reconsider its recommendation to eliminate all continuing education requirements for pharmacy technicians, except for the two hours mandated by the General Assembly. Mr. Bracewell noted that only a very few states do not require continuing education to maintain pharmacy technician registration. He also stated that several states allow only nationally certified technicians to practice.

Mr. Bracewell expressed concern that the Board of Pharmacy's action could be perceived as providing an economic benefit to pharmacy owners by making it easier to recruit less qualified and lower-cost staff for pharmacy technician positions. He stated that the Board's primary responsibility is to protect and promote patient safety in the dispensing of prescription drugs. He further noted that Georgia may be the first state to reduce required competency standards for pharmacy staff while assuring the public that patient safety will not be reduced.

By analogy, Mr. Bracewell stated that when chopping wood, it is more efficient to have one sharp axe than one or two dull axes because they are not regularly sharpened.

Mr. Stone made a motion to post the proposed amendments to Rule 480-15-.02 for a public hearing. Mr. Brinson seconded, and the Board voted 5 to 1 in favor of the motion. Voting in favor: Dr. Azzolin, Mr. Brinson, Dr. Cordle, Mr. Farmer, and Mr. Stone. Voting in opposition: Mr. Bracewell.

President Chang asked whether there were any additional questions or comments. He thanked everyone for their attendance and reminded those in attendance that the next scheduled meeting of the Georgia State Board of Pharmacy will be held on Wednesday, August 19, 2026, at 9:00 a.m. at the Board office.

Mr. Bracewell made a motion and Mr. Farmer seconded, and the Board voted to enter into Executive Session in accordance with O.C.G.A. § 43-1-19(h) and § 43-1-2(h) to deliberate and to receive information on applications, investigative reports, and the Assistant Attorney General's report. Voting in favor of the motion were those present who included Michael Azzolin, James Bracewell, Michael Brinson, Cecil Cordle, Michael Farmer and Dean Stone

Executive Session

Appearances: LC, BG, RS

Attorney General's Report – Ms. Vanessa Alva, Assistant Attorney General
Ms. Alva presented the following consent orders for acceptance: BJ
Status Open Cases: AMS, VLR, RHH, TLFP, MP, AB, EHL, SMWL, IHHR, BRGH, WLA, KP, PP, ABM, LR, BJ, EPI, CP, AA, ST

Legal Services: IRD, NGHHO, WLP

Applications

TLW	SK	BZL	VB	LB	CC	AB	NEF	TM	SJJ	SC	JM	KF	NG	SS
MD	SR	AB	MHJ	KG	LD	RSL	SS	JU	DL	AE	JS	AS	AR	NSM

Notices of Discipline: AIF, AHSSC, OCI, TTMT, FO, FH, DA, OI
Miscellaneous: RM, MT, TR, CE

At the close of the Executive Session, President Chang declared the meeting to be back in Open Session.

Open Session

Mr. Stone made a motion for the Board to take the following actions:

Appearance: PMB – Requesting Reconsideration of Reinstatement Denial. Denial upheld.

Cognizant's Report – Mr. Michael Farmer

GDNA Case #	Licensee	Decision
25-1074	CP (Primary Subject)/ AA (Subject PIC)/ LPC (Involved Party)/ GJ (Complainant)/ AP (Subject Physician #1)/ JS (Subject Physician #2)/ DM (Involved Party)/ JS (Subject Physician #3)/ ST (Subject Physician #4)/ BB (Subject Physician #5)/ LT (Subject Pharmacist #1)/ ED (Pharmacist #2)/ MAH (Pharmacist #3)	To the PIC, and Pharmacists #1-3 - Letter of Concern To Physicians #1-5 - The Board office to refer the case to the Medical Board.
26-2064	IP (Primary Subject Pharmacy #2)/ MA (Subject)/ TJ (Complainant)/ IP (Subject - Pharmacy #1)/ CC (Subject)/ IP (Subject)/ IMP (Subject)/ IM (Subject)/ IP (Subject)/ IMP (Subject)/ IP (Subject)/ IP (Subject)/ IMP (Subject)/ IP (Subject)/ TM (Involved Party)	To Pharmacy #2 - Letter of Concern
26-2190	IH (Primary Subject - Unlicensed Wholesale Distributor)/ JH (Complainant)/ JB (Subject Owner)/ CCBN (Subject)/ ND (Involved Party)/ TW (Involved Party)	To the unlicensed wholesale drug distributor: Cease and Desist
26-303	CP (Primary Subject)/ AB (Subject – PIC)/ BT (Involved Party Technician)	To the PIC and to the Pharmacy- Letter of Concern
26-2329	LVGMT (Primary Subject)/ CK (Complainant)/ JGR (Subject)/ RA (Involved Party)/ MR (Involved Party)	Cease and desist
26-2507	WP (Primary Subject Pharmacy)/ EN (PIC)/ VP (Complainant)/ SI (Staff Pharmacist)/ YU (Involved Party)/ CB (Involved Party)	To the PIC and the staff pharmacist – Letter of Concern
26-2508	WP (Pharmacy)/ PT (Former PIC)/ KK (Complainant)/ SA (Subject - Staff Pharmacist)/ SG (Involved Party PIC)	Misfill Guidance #1A to the staff pharmacist.
26-2815	WLL (Primary Subject)/ NE (Involved Party)/ WLL (Primary Subject)/ BP (Involved Party)	Letter of Concern to the facilities
26-3024	CP (Primary Subject)/ LC (Subject PIC)	Referred to AG's Office
26-3533	WP (Subject)/ LB (PIC)/ CR (Complainant)	Letter of Concern to the PIC
26-3673	CP (Primary Subject)/ BC (PIC)/ EM (Involved Party Pharmacist)/ AF (Involved Party Floater Pharmacist #1)/ SD (Involved Party Technician)	Referred to AG's Office
26-3706	KP (Subject)/ RG (PIC)/ DN (Complainant)/ DSH (Primary Subject Staff Pharmacist)	Misfill Guidance #1A to the staff pharmacist.
26-3732	KH (Primary Subject Technician)/ WP (Involved Party)/ ME (Involved Party)/ AL (Former PIC)/ KH (Involved Party)/ NG (Complainant)/ MM (Involved Party PIC)/ KC (Involved Party)	Revoke the technician's registration

26-3738	PCSL (Subject)/ ET (Primary Subject – Owner)	To the supplement store: Cease and Desist
26-3748	MVA (Primary Subject Pharmacy)/ MC (Subject PIC)/ BC (Involved Party Pharmacist)	Referred to AG's Office
26-3835	AN (Primary Subject)/ CW (Complainant)	The Board accepts the request to change license to an "Inactive" status. Flag the file for the intern to appear before the Board before license can be reactivated.
25-1501	MP (Subject)/ TO (PIC)/ UU (Staff)/ ABDC (Complainant)/ APL (Involved Party)/ QPI (Involved Party)	Close
26-2196	CP (Pharmacy)/ EB (PIC)/ KL (Complainant)/ RB (Involved Party Staff Pharmacist #2)/ KO (Involved Party Staff Pharmacist #1)	Close
19	WP (Pharmacy)/ KD (PIC)/ RS (Complainant)/ NP (Involved Party)/ YJ (Involved Party)/ DM (Involved Party)/ TH (Involved Party)/ IS (Involved Party)	Close
26-2679	PD (Pharmacy)/ CE (PIC)/ SH (Complainant)/ KF (Complainant)/ VS (Complainant)/ YO (Involved Party Staff)/ LH (Involved Party)/ MN (Involved Party)/ SO (Involved Party)/ VW (Involved Party)/ SW (Involved Party)	Close
26-2899	CP (Pharmacy)/ JR (PIC)/ LO (Complainant)	Close
26-3070	NG (Technician)/ CJ (Involved Party)/ KS (Complainant)/ EFP (Pharmacy) / FN (PIC)	Close
26-3078	CP (Pharmacy)/ JS (PIC)/ MP (Complainant)/ NL (Technician)	Close
26-3129	WP (Pharmacy)/ MRM (PIC)/ AC (Complainant)	Close
26-3291	VDH (Pharmacist)/ AJ (Complainant)/ GBHCP (Primary Subject)/ JI (Involved PIC)	Close
26-3541	CP (Pharmacy)/ JK (PIC)/ DLB (Complainant)/ EG (Involved Pharmacist)	Close
26-3542	QC (Pharmacist)/ TW (Complainant)	Close
26-3684	CP (Pharmacy)/ JP (PIC)/ KD (Complainant)	Close

Legal Services –

Licensee	Violation	Decision
IRD	Changed names & ownership without notifying the Board	Referred to AG's Office
NGHHO	Changed ownership without properly notifying the Board	Referred to AG's Office
DL	DHHS-OIG Notice of Conviction	Taken as Information
WLP	Obtained License Renewal by Fraud	Referred to AG's Office

Applications

Name	Type of License	Decision
TLW	Pharmacy Technician	Approved
SK	Pharmacy Technician	Denied
BZL	Pharmacy Technician	Approved
VB	Pharmacy Technician	Approved
LB	Pharmacy Technician	Approved
CC	Pharmacy Technician	Approved
AB	Pharmacy Technician	Approved
NEF	Pharmacy Technician	Approved

TM	Pharmacy Technician	Approved
SJJ	Pharmacy Technician	Approved
SC	Pharmacy Technician	Approved
JM	Pharmacy Technician	Approved
KF	Pharmacy Technician	Approved
NG	Pharmacy Technician	Approved
SS	Pharmacy Technician	Approved
MD	Pharmacy Technician	Approved
SR	Pharmacy Technician	Approved
AB	Pharmacy Technician	Approved
MHJ	Pharmacy Technician	Approved
KG	Pharmacy Technician	Approved
LD	Pharmacy Technician	Approved
RSL	Pharmacy Technician	Approved
SS	Pharmacy Technician	Approved
JU	Pharmacist	Approved
DL	Pharmacist	Approved
AE	Pharmacist	Tabled
JS	Pharmacist	Approved
AS	Certification of DTM	Approved
AR	Nuclear Pharmacist	Approved
NSM	Durable Medical Equipment	Approved

Notices of Discipline: The Board reviewed the notices and agreed that these notices are to be taken as information only and that no further action is necessary at this time.

Miscellaneous:

Licensee	Issue	Decision
RM	Correspondence and request for guidance	Take as information; no further action
MT	Request for Inactive Status	Approved
TR	Request to Retake MPJE for 7th Attempt	Approved
CE	Statement Regarding SC Pharmacist Order	Take as information; no further action

Mr. Brinson seconded, and the Board voted unanimously in favor of the motion. There being no further business to discuss, the meeting was adjourned at 3:46 p.m.

The next scheduled meeting of the Georgia Board of Pharmacy will be held on Wednesday, August 19, 2026 at 9:00 a.m. at the Georgia State Board of Pharmacy, 2 Martin Luther King, Jr. Drive SW, East Tower, 11th Floor, Atlanta, GA 30334.

Minutes recorded by Angela Johnson, Board Administrative Secretary
Edited by J. Clinton Joiner, II, Executive Director

The views, thoughts, and opinions expressed by individual members of the board are solely those of the individual and do not necessarily reflect the official policy or position of the Georgia State Board of Pharmacy, or any other individual member of the board.