GEORGIA BOARD OF PHARMACY
2 MLK Jr. Dr. SE, East Tower, 11th Floor, Atlanta, GA 30334
Minutes for September 23, 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. Chuck Page

Board Staff present:
Mr. Clint Joiner, Executive Director
Dr. Michael Karnbach, Director, GDNA
Mr. Alec Mathis, Deputy Director, GDNA
Mr. Tommy Roe, Special Agent, GDNA
Ms. Itovia Evans, Deputy Director of Licensing
Mrs. Angela Johnson, Board Admin. Secretary
Mr. Tommy McNulty, Senior Assistant Attorney General
John Oates, Assistant Attorney General
Michael O'Donovan, Intern, Attorney General's Office

Visitors:
Allison Barker, Emory
Gary Long, BotSci
Helen Sloat, Gold Dome Partners
Beth Jarrett, Walmart
Charlotte Davis, McKesson
Kamryn Wham, GHA
Josh Mackey, Capital City Public Affairs
Rebecca Rice, CVS
Lauren Kain, Emory Healthcare
Susan Wright, Wellstar
Salma Stoman
Christopher Jones, Vetsource
Lauren Pollow
Jonathan Marquess, GPhA
Olivia Kosooca, Troutman Strategies
Matt Wilson, Walgreens
Diane Sanders, Kaiser Permanente
Whitney Cook, Emory
Heather Hughes, Publix
Brandon Brooks, Publix
Kenneth Bailey, UGA
Robert Brennan, Parker Hudson/ Wellstar
Keith Mauriello, Wellstar
Todd Pledger, Atrium
Adelaida Jaramillo

Open Session

President Chang called the meeting to order at 09:00 a.m.

Approval of Minutes

Dr. Cordle made a motion to approve the Open Session minutes from the July 22, 2026, meeting. Mr. Page seconded, and the Board voted in favor of the motion.

Dr. Cordle made a motion to approve the Open and Executive Session minutes from the August 19, 2026, meeting. Mr. Page seconded, and the Board voted in favor of the motion.

Report of Licenses Issued

Director Joiner reported that, since the last meeting, the Board has issued a total of 1,104 licenses, including 711 Pharmacy Technician licenses, 306 Pharmacist licenses, and 87 facility licenses.

Director Joiner advised that the Board has issued a total of 2,355 licenses during FY27.

Mr. Brinson made a motion to ratify the list of licenses issued. Dr. Cordle seconded, and the Board voted in favor of the motion.

Renewal Period

President Chang asked about providing a public reminder regarding pharmacist license renewals. Director Joiner advised that renewals typically open around October 1 to allow approximately

three months for completion.

Petitions for Rule Waiver or Variance

Strategic Pharmaceutical Solutions d/b/a Vetsource Home Delivery (Vetsource): The Board considered the request to increase the pharmacist-to-technician ratio pursuant to O.C.G.A. § 26-4-82(d)(2).

Dr. Azzolin presented Strategic Pharmaceutical Solutions d/b/a Vetsource Home Delivery's request to increase its pharmacy technician ratio to allow up to six (6) pharmacy technicians. Director Joiner clarified that the request was not a traditional rule waiver and, therefore, did not require the applicant to demonstrate a unique hardship. Rather, the request was submitted pursuant to O.C.G.A. § 26-4-82(d)(2), which permits the Board to consider an increased technician ratio for a closed-door pharmacy.

Mr. Christopher Jones, representing Vetsource, explained that the facility operates as a veterinary mail-order pharmacy and does not provide services directly to the general public at the pharmacy location. Director Joiner advised that the Board has previously required a GDNA site inspection to verify a pharmacy's closed-door status when considering such requests. Director Karnbach advised that GDNA had already completed a site inspection of the facility.

Mr. Brinson made a motion to approve a pharmacist-to-technician ratio of one (1) pharmacist to six (6) pharmacy technicians for Strategic Pharmaceutical Solutions Inc. dba Vetsource Home Delivery's closed-door pharmacy facility (PHRE011309), subject to the following conditions:

- Maintenance of the facility's closed-door status (not open to the general public); and
- Board review and approval of any material change in operations or practice model.

Dr. Cordle seconded the motion, and the Board voted in favor of the motion.

Alliance Recovery Center - Waiver of Rule 480-18-.05(2)

Dr. Azzolin presented Alliance Recovery Center's request for a waiver of Rule 480-18-.05(2) regarding the requirement to maintain a refrigerator in the pharmacy. The applicant indicated that it does not currently maintain medications requiring refrigeration and would obtain appropriate refrigeration equipment should the need arise.

Dr. Azzolin noted that the Board had considered a similar request at the previous meeting and discussed the Board's intent to review rules containing mandatory equipment requirements to determine whether greater flexibility may be appropriate when certain equipment is not necessary based on a pharmacy's operations.

Director Karnbach noted that the waiver request cited Rule 480-18-.05(2) in its entirety, although the applicant's stated request appeared to pertain only to the refrigerator requirement. Director Joiner advised that the Board has generally considered waiver requests citing an entire rule without identifying the specific requirement to be waived to be overly broad or vague. Director Joiner further advised that the applicant could submit a more specific waiver request identifying the particular provision for which a waiver is sought for consideration at a subsequent Board meeting.

Following discussion, Mr. Farmer made a motion to deny the request. Mr. Page seconded, and the Board voted in favor of the motion.

View Point Health Adult CSU – Waiver of Rules 480-13-.01, 480-13-.06(2)(d) & 480-13.06(2)(e)

Dr. Azzolin presented View Point Health – Adult CSU's request for waivers of Rules 480-13-.01, 480-13-.06(2)(d), and 480-13-.06(2)(e) in connection with the relocation of the facility to a new location. View Point Health advised that the Adult CSU had operated under substantially similar exemptions for approximately 26 years and requested that the exemptions be continued at the new location. The waiver requests relate to the facility's use of standard ward inventory, patient profile requirements, and compounding utensils. View Point Health represented that its operational model would remain substantially unchanged following the relocation and that the requested waivers were necessary due to the limited nature of the hospital pharmacy operation.

Director Joiner advised that the waivers associated with the former location could not be transferred or "grandfathered" to the new location and must instead be considered as new waiver requests. He confirmed that View Point Health had submitted the required documentation and completed the applicable waiver process, allowing the Board to consider the three waiver requests for the new location.

Director Karnbach provided historical background regarding Crisis Stabilization Units (CSUs), explaining that certain CSUs were historically issued hospital pharmacy permits as a means of maintaining and providing medications to patients. Because CSUs do not operate as traditional hospitals, waivers from certain hospital pharmacy requirements were necessary. He noted that View Point Health has a Pharmacist-in-Charge but does not maintain a pharmacist on site as ordinarily required for a hospital pharmacy.

Director Karnbach advised that subsequent changes allowing emergency kits (E-kits) at CSUs provide an alternative means of supplying medications to patients. He noted that a hospital pharmacy permit would not be issued today under the same circumstances and suggested that the Board review the permit structure for View Point Health and other similarly situated CSUs.

The Board discussed the potential impact of changing the permit structure for existing CSUs. Dr. Azzolin expressed concern that removing a hospital pharmacy permit could affect the level of pharmacy services and patient care. The Board noted that CSU operations vary and that any regulatory changes should consider continuity of care and patient access to medications.

Director Joiner recommended a broader review of older facilities operating under previously granted waivers to establish consistent regulatory requirements for similarly situated facilities. Director Karnbach agreed and advised that GDNA could compile information regarding CSUs currently operating under hospital pharmacy permits for further Board review..

The Board discussed whether existing pharmacy permit categories adequately address CSU operations. Director Karnbach suggested that a new permit type or revisions to an existing permit type may be necessary. Dr. Azzolin also suggested considering whether legislative changes may be appropriate.

Following discussion, Mr. Brinson made a motion to approve the requests for waivers of Rules 480-13-.01, 480-13-.06(2)(d), and 480-13-.06(2)(e) for the new location. Mr. Farmer seconded, and the Board voted in favor of the motion. Director Joiner clarified for the record that the Board's action constituted the granting of new waivers for the new location and not the transfer or continuation of waivers associated with the former location.

The Board agreed to further review the broader issue of CSUs operating under hospital pharmacy

permits. Director Karnbach advised that GDNA would compile information regarding CSUs currently holding hospital pharmacy permits and bring the information back to the Board for further consideration. The Board established a work group consisting of Mr. Brinson, Dr. Azzolin, and Director Karnbach to review the current permit structure for CSUs and evaluate potential regulatory and/or legislative changes.

Correspondence

Correspondence from Dr. Todd Pledger with Georgia Atrium Clinic Pharmacies – Request for guidance regarding investigative drugs dispensed by clinic-licensed pharmacies

Mr. Page presented correspondence from Atrium Health regarding its clinic-licensed infusion pharmacies located in Rome and Macon. The pharmacies provide services to oncology and non-oncology infusion centers and work with Atrium Health physicians in providing patient care. Atrium Health requested the Board's guidance regarding its plans to expand investigational research activities in Georgia and, specifically, whether its clinic-licensed pharmacies may dispense an oral investigational medication to a clinic patient for self-administration at home as part of an investigational study.

Mr. Page discussed the provisions of Chapter 480-33 governing outpatient clinic pharmacies and noted that the rules contemplate medications being delivered to patients for self-administration but contain provisions that create uncertainty regarding the dispensing of medications for use outside the clinic. He discussed whether Atrium Health would be required to obtain a retail pharmacy permit or whether its existing outpatient clinic pharmacy permits could accommodate the proposed practice, subject to applicable requirements, including appropriate labeling.

Dr. Todd Pledger, representing Atrium Health, explained that the organization currently conducts investigational drug research in its hospitals but has not yet implemented the proposed practice in its Georgia clinic infusion pharmacies. He advised that Atrium Health would like to expand investigational research opportunities for its patients and that most of its existing research protocols involve intravenous medications administered in the clinic. The issue presented to the Board primarily concerned the smaller number of investigational protocols that include an oral medication component that a patient would need to take at home.

Dr. Pledger advised that, under Atrium Health's proposed process, the treating physician would issue a new medication order at each monthly patient visit rather than authorize refills, consistent with the restriction on refills applicable to outpatient clinic pharmacies. Atrium Health would also utilize Vestigo, its software platform for managing and tracking investigational drug inventory, accountability, and dispensing workflows.

Mr. Brinson discussed the additional requirements and safeguards associated with investigational drugs and emphasized the importance of appropriate policies, procedures, research protocols, storage, access controls, and dispensing practices. Dr. Pledger advised that Atrium Health was in the process of developing policies and procedures for the proposed practice and had an organizational software system that would be utilized to facilitate appropriate labeling and management of the investigational medications.

Dr. Pledger confirmed that the proposed services would be provided through Atrium Health's existing clinic infusion pharmacies. He noted that Atrium Health had delayed implementing a pancreatic cancer research protocol pending clarification of the regulatory requirements to avoid potential interruptions in patient care.

Director Karnbach clarified that the proposed dispensing would be limited to established clinic

outpatients and would not involve dispensing to the general public. He noted that, although the rules are not entirely clear regarding medications dispensed for use outside the clinic, the proposed practice appeared consistent with the outpatient clinic pharmacy provisions, provided all applicable requirements were met.

Director Joiner raised concerns regarding Rule 480-33-.09, which requires investigational drugs to be dispensed and administered in accordance with an approved protocol. Because Atrium Health proposed dispensing investigational medication for patient self-administration at home, he questioned whether the practice was permitted under the current rule.

Director Joiner advised that a variance of Rule 480-33-.09 would provide the clearest mechanism for addressing the request. The Board noted that the issue was specific to investigational drugs and did not necessarily affect an outpatient clinic pharmacy's ability to dispense non-investigational medications to its patients for use at home.

Following discussion, the Board advised Dr. Pledger to submit a Petition for Rule Variance of Rule 480-33-.09 for consideration by the Board. Director Joiner advised that the variance request must be submitted sufficiently in advance of the meeting to allow for the required 15-day public posting period.

Correspondence from Dr. Sajel Lewis with Board of Pharmacy Specialties (BPS) – Request for Recognition of Specialty Pharmacy Credentials

Mr. Page presented correspondence from the Board of Pharmacy Specialties (BPS) requesting Board approval and recognition of certain specialty credentials, including Ambulatory Care Pharmacy, Geriatric Pharmacy, and Pharmacotherapy. Mr. Page advised that he had reviewed the examination, training, and other requirements associated with the identified credentials and did not have concerns regarding the education or training requirements presented.

Mr. Page expressed concern, however, that the correspondence did not clearly explain the practical or regulatory effect of the Board recognizing the credentials. He requested additional information regarding what recognition would authorize or allow a pharmacist to do beyond the pharmacist's existing scope of practice, including whether the credentials would affect practice under a protocol, documentation requirements, reimbursement or insurance billing, credentialing, or other aspects of pharmacy practice. He stated that additional information regarding the purpose and effect of the requested recognition would be helpful before the Board acted on the request.

Mr. Brinson agreed that additional information was needed and recommended that a representative of BPS appear before the Board to explain the request, why Board recognition is being sought, and how recognition of the credentials would be utilized by pharmacists. Director Joiner concurred and recommended inviting BPS to make a presentation to the Board addressing the purpose of the request and the practical implications of Board recognition.

Mr. Page noted that the applicable rule provides the Board authority to approve and recognize credentials demonstrating advanced knowledge; however, he reiterated that additional information was necessary to understand the effect of granting the requested recognition.

Following discussion, the Board agreed to invite a representative of the Board of Pharmacy Specialties to appear before the Board and provide a presentation regarding the requested recognition of the identified specialty credentials, including the purpose of Board recognition and its practical effect on pharmacists holding those credentials.

Correspondence from Robert Brennan, Esq. on behalf of Wellstar MCH Health H@H Program – Request for Guidance Regarding Hospital at Home Standard Ward Inventory
Mr. Page presented correspondence from Wellstar MCG Health requesting the Board's guidance regarding proposed changes to its Hospital at Home (H@H) Program. Susan Wright and Keith Mauriello, and Robert Brennan were present to discuss the request with the Board. Wellstar proposed utilizing Standard Ward Inventory medication kits in dedicated vehicles operated by H@H care teams consisting of nurses and paramedics. Under the proposal, the care team could obtain a patient-specific medication order from the treating physician and access the necessary medication from the secured inventory for administration to the patient in the home. Wellstar advised that the proposed model was intended to improve timely access to medications, reduce unnecessary return trips to the hospital, and reduce medication waste.

Mr. Page expressed concerns regarding whether nurses or paramedics could lawfully maintain possession of medications, including controlled substances, in a dedicated vehicle that is not an ambulance. He also questioned whether removal of medication from the inventory for use in a patient's home would constitute dispensing and therefore require patient-specific labeling and dispensing by a pharmacist.

Wellstar representatives explained that the proposed medication storage unit would operate similarly to an automated dispensing cabinet utilized within a hospital. The unit would be stocked and managed by pharmacy personnel, electronically secured and tracked, and accessed only after receipt of an appropriate medication order. Wellstar advised that the proposed process would allow a nurse or paramedic to remove an individual dose for administration to the patient rather than dispensing quantities of PRN medications to the patient's home that may ultimately go unused.

The Board discussed the distinction between the transportation, possession, distribution, dispensing, and administration of medications. Director Karnbach advised that statutory provisions permitting certain employees or agents to transport medications may potentially apply but questioned whether those provisions were intended to permit the continuing possession of medication inventory in a vehicle. He further noted that the Board would need to determine whether removal of a dose from the unit by a nurse or paramedic constitutes administration or dispensing, as nurses and paramedics are not authorized to dispense medications.

The Board also discussed recently adopted amendments to the hospital pharmacy rules addressing H@H patients. Director Joiner advised that the amendments had recently returned from the Governor's Office and were pending with the Secretary of State and were therefore not yet effective. The Board discussed that recognition of qualifying H@H patients as hospital patients may address certain aspects of the proposal, including labeling requirements, but would not necessarily resolve the separate questions concerning transportation and possession of medication inventory in a vehicle.

Wellstar advised that the proposed medication storage unit would be portable, electronically secured, trackable, connected through cellular technology, and capable of documenting access to medications. A limited formulary, including certain controlled substances, could be maintained in the unit. Wellstar further advised that the unit was not intended to remain in the vehicle overnight and could be returned to the hospital for pharmacy reconciliation. The Board discussed the need for specific policies addressing security, storage, inventory control, reconciliation, controlled-substance accountability, and the frequency with which the unit would be returned to the hospital.

The Board acknowledged the potential benefits of the proposed model, including improved access to medications, reduction of medication waste and unnecessary trips, and increased security by reducing the amount of unused medication, including controlled substances, left in patients' homes. However, Board members determined that additional information was necessary to determine whether the proposed model complies with existing law and Board rules.

Director Karnbach suggested that, if this type of H@H model is to be recognized and permitted, the Board may wish to consider specifically addressing the practice within the hospital pharmacy rules rather than applying existing provisions that were not designed for this type of practice. Director Joiner further clarified that medications stocked in the proposed unit would more appropriately be characterized as being distributed to the unit rather than dispensed, as dispensing involves delivery of appropriately labeled medication to a patient.

Following discussion, the Board requested that Wellstar submit detailed written policies and procedures addressing the transportation and possession of the Standard Ward Inventory unit; security, storage, return, and reconciliation of medications; the proposed formulary and quantities to be maintained, including controlled substances; the process for obtaining medication orders and accessing medications; patient-specific labeling requirements; and whether medications removed from the unit by nurses or paramedics would constitute dispensing or administration.

Georgia Drugs and Narcotics Agency – Dr. Michael Karnbach

Director Karnbach provided an update regarding GDNA activities. He reported that GDNA had received approximately 347 complaints year-to-date, with approximately 73% involving drug loss and 8% involving prescription errors. He further reported that GDNA had conducted approximately 718 inspections, of which 74% were routine inspections, 23% were application-related inspections and the remainder are follow-ups and remodel inspections.

President Chang requested an update regarding GDNA's open positions. Director Karnbach advised that approximately 14 applications had been received, although not all applicants were viable candidates. He noted that several viable candidates had been identified and would be moving forward to the next phase of the hiring process.

Attorney General's Report – Mr. Tommy McNulty

Mr. McNulty introduced John Oates and Michael O'Donovan to the Board. He advised that Mr. Oates, currently serving as an Honors Fellow, will transition to serving as the Board's full-time attorney, with Mr. McNulty assisting with the transition over the next three months. Beginning in the new year, Mr. Oates will serve as the Board's primary attorney.

Mr. McNulty also introduced Mr. O'Donovan, the fall extern and a third-year law student at Emory University School of Law, noting that he has prior experience in the pharmacy profession. Mr. McNulty advised that both Mr. Oates and Mr. O'Donovan have been assisting with Board cases and legal research since beginning their respective roles.

Executive Director's Report and Legal Services– Mr. Clint Joiner

Strive Pharmacy – Voluntary Recall Notice Compounded Tirzepatide/ Glycine/ B12 (Cyanocobalamin)

Director Joiner presented correspondence from Strive Pharmacy Tampa regarding a voluntary recall of compounded tirzepatide/glycine/B12 injectable products and notification of a significant adverse drug reaction involving a Georgia patient. Strive reported that routine internal quality

testing identified an active pharmaceutical ingredient substitution involving a bulk container labeled as tirzepatide that was subsequently determined to contain semaglutide. Strive initiated a voluntary recall of the affected lots and reported that four Georgia patients had received affected product, one of whom reported experiencing significant adverse effects requiring medical treatment.

The Board discussed whether the matter should be referred for investigation. Dr. Azzolin noted that the incorrectly identified ingredient had been used by Strive in compounding preparations for patients and questioned whether the actions of both the pharmacy and the supplier should be reviewed. Director Joiner advised that, based on the information available, responsibility for the substitution may rest with the supplier; however, determining whether the pharmacy committed a violation was a matter for the Board. Director Karnbach discussed potential jurisdictional considerations if the supplier and underlying transaction were located outside Georgia.

The Board discussed the importance of determining the circumstances surrounding the receipt and use of the ingredient, including whether Strive had any indication that the ingredient was incorrectly identified prior to compounding and dispensing the affected preparations.

Following discussion, President Chang recommended that the matter be referred for investigation to determine the circumstances surrounding the incident and whether further action or notification to another jurisdiction may be appropriate.

2027 Board Meeting Dates

Mrs. Johnson presented the proposed 2027 Board meeting dates and advised that the Governor's memorandum regarding the 2027 state holidays had been provided for the Board's review. She noted that the proposed meeting schedule was generally consistent with the Board's customary meeting schedule.

Mrs. Johnson requested that Board members review the proposed dates and their calendars and advise of any scheduling conflicts. President Chang also requested that Board members review the dates for potential conflicts. The proposed 2027 meeting schedule will be brought back for finalization at the next Board meeting.

SharePoint Records and Website ADA Compliance

Director Joiner advised that the Board's SharePoint storage is approaching capacity and that the previous practice of permanently deleting items from the system will no longer sufficiently address the storage limitations. He advised that he and Mrs. Johnson will begin removing Board meeting documents that are five years old or older from SharePoint and archiving them on a local hard drive. This change will not affect documents currently available to the public, including Board meeting minutes. Board members requiring access to archived documents may request them from Director Joiner.

Mrs. Johnson provided an update regarding ongoing efforts to make the Board's website ADA compliant. She advised that documents may be temporarily removed from the website while they are reformatted, reviewed, and approved for reposting. Director Joiner explained that Board meeting minutes will be addressed one year at a time and returned to the website in an ADA-compliant format, with each year's minutes consolidated into a single searchable PDF. Mrs. Johnson advised that public actions will eventually be organized in a similar manner by year. If a document is temporarily unavailable on the website, members of the public may contact the Board office to request it.

Director Joiner noted that the ADA remediation process is ongoing throughout DCH and may take considerable time due to the volume of documents involved.

Discussion Topics

President Chang presented the applications for Caron Treatment Center and Cornerstone of Recovery to continue their status as Board-approved providers. Director Joiner clarified that the applications were for renewal of each provider's Board-approved status and required separate Board action.

Caron Treatment Center – Application for Board-Approved Treatment Provider

The Board reviewed Caron Treatment Center's application to continue as a Board-Approved treatment provider.

Following review, Mr. Brinson made a motion to approve Caron Treatment Center's application to continue as a Board-Approved treatment provider. Dr. Cordle seconded, and the Board voted in favor of the motion.

Cornerstone of Recovery – Application for Board-Approved Treatment Provider

The Board reviewed Cornerstone of Recovery's application to continue as a Board-Approved treatment provider.

Following review, Dr. Cordle made a motion to approve Cornerstone of Recovery's application to continue as a Board-Approved treatment provider. Mr. Farmer seconded, and the Board voted in favor of the motion.

COVID-19 Vaccine Administration by Qualified Pharmacy Technicians

Dr. Cordle discussed the Board's previously issued guidance regarding COVID-19 vaccines and advised that questions had been received regarding whether qualified pharmacy technicians may administer COVID-19 vaccines under the guidance. Dr. Cordle stated that his understanding was that the Board intended COVID-19 vaccines to be administered under the same framework applicable to other vaccines, including administration by qualified pharmacy technicians when all applicable requirements are met. He noted that the guidance was being interpreted inconsistently and requested clarification from the Board.

Director Joiner advised that his understanding of the Board's prior interpretation was that the existing framework for vaccine administration in pharmacies was intended to apply to COVID-19 vaccines and that the Board did not intend to disrupt established pharmacy vaccination practices. He discussed the applicable statutory provisions and the Board's previous determination to follow the applicable Advisory Committee on Immunization Practices (ACIP) recommendations.

The Board discussed whether additional clarification should be issued to specifically address administration by qualified pharmacy technicians. Following discussion, the Board agreed that its guidance should be clarified to expressly state that qualified pharmacy technicians may administer COVID-19 vaccines when all applicable requirements are met, consistent with the framework applicable to other vaccines. The Board further agreed that the clarification should be incorporated into the existing guidance to provide consistent direction to pharmacists and pharmacy technicians throughout the state.

Old Business – Follow-up

Controlled Substance Loss Prevention – Proposed Rule Changes

Mr. Farmer presented proposed amendments to Chapter 480-20 regarding controlled substance inventory, accountability, loss prevention, and reporting requirements. He explained that the proposed amendments were developed in response to concerns regarding controlled substance losses and were intended to strengthen inventory controls and accountability.

Mr. Farmer reviewed the proposed requirements, including an annual inventory of all controlled substances; requirements governing how the inventory must be conducted and documented; separate identification of Schedule II controlled substances; and exact counting requirements. The proposed amendments would also require pharmacies to maintain a perpetual inventory of Schedule II controlled substances and benzodiazepines, with electronic perpetual inventory required when such capability is available.

The Board also discussed proposed requirements for periodic reconciliation of perpetual inventories and the reporting and documentation of theft, loss, and unaccounted-for controlled substances. The proposed amendments would require registrants to report such occurrences to GDNA and would establish requirements for submitting a DEA Form 106 when applicable.

Mr. Farmer further reviewed provisions authorizing the Board or GDNA to require a registrant to submit an action plan addressing theft, loss, or unaccounted-for controlled substances. The action plan would include the circumstances surrounding the occurrence, the registrant's existing procedures, steps taken during the internal investigation, identification of responsible or suspected individuals, and measures implemented to prevent similar occurrences.

Following discussion, Mr. Page made a motion to post the proposed rule changes for public comment. Dr. Azzolin seconded, and the Board voted in favor of the motion.

President Chang asked whether there were any additional questions or comments. He thanked everyone for their attendance and reminded the Board that the next scheduled meeting of the Georgia State Board of Pharmacy will be held on Wednesday, September 23, 2026, at 9:00 a.m. at South University, 709 Mall Blvd., Savannah, GA 31406.

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 Chuck Page.

Executive Session

Appearances: PD, SK, ST, JF

Cognizant's Report

26-2008	26-2327	26-2941	26-3130	26-3290	26-3377	26-3381	26-3788	26-3793
26-4090	26-411	26-4115	26-4126	26-4238	26-4301	26-4347	26-4448	26-4552
26-4751	26-1913	26-3535	26-3709	26-3710	26-3712	26-3815	26-3953	26-4107
26-4114	26-4117	26-4244	26-4465					

Attorney General's Report – Mr. Tommy McNulty

Mr. McNulty presented the following consent orders for acceptance:

Status Open Cases: AMS, VLR, RHH, TLFP, MP, ABL, EHL, SMWL, IHHR, WLA, KP, PP, ABM, LR, BJ, EPI, AA, ST, DT, SS, MLD, CI, CP, AMSI, CP, EP, LC, CP, CL, IRD, WLP, TAOM, NHL, WW, AXL, AC, CCP, FP, GD, IVS, LP, LS, MS. HI, WH
Orders: CP, SAI, MAPI, CP, RTI, LR, IK, NGHHO, MU
Counterproposals: SS
Legal Services : AMGL

Applications

MH	AH	CB	AW	HC	MB	SG	RB	EC	AG	JH	AO	CW	KN
JL	MF	CB	KM	MB	NB	NH	EH	TE	TS	VA	XL	LH	MC
MM	MP	AH	HK	JC	MD	MP	MM	VM	BDC	GH	LRMC	PPS	EHCS

Notices of Discipline: EMS, MNAI, AI, TAM, HFP, IH, SRP, MWL, AGP, ZSI, SHI, PS
Miscellaneous: RC, MA, NS, JR, TC

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

Open Session

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

Appearances:

Name	Request	Decision
PD	Request for Reinstatement	Referral to AG's Office for Consent Order
SK	Appeal Application Denial	Denial overturned
ST	Request for Reinstatement	Referred to AG's office for Private Consent Order
JF	Private Interim Consent Order	Referred to AG's office for Private Consent Order w/ Fine

Cognizant's Report – Mr. Michael Farmer

GDNA Case #	Licensee	Recommendation
26-2008	CP (Pharmacy)/ MN (Complainant)/ KLZ (Involved Party - Staff Pharmacist) TMG (Subject -PIC)/ AMP (Subject - Remote Pharmacist)/ FCR (Technician) NVN (Involved Party – Pharmacist)	To the PIC and the Remote Pharmacist - Misfill Guidance #1A to the pharmacists. The pharmacists did not provide a statement during the investigation.
26-2327	WG (Pharmacy)/ BM (Involved Party Floater Pharmacist)/ JW (Complainant) KR (Involved Party - Staff Pharmacist) AC (Former PIC)/ ZNM (PIC)/ BTP (Subject - Pharmacist #1)	To Pharmacist #1 and the former PIC - Misfill Guidance #1A to the pharmacists. The former PIC provided a statement during the investigation.
26-2941	CP (Primary Subject – Pharmacy)/ RS (Subject PIC)/ BNS (Involved Party – Staff Pharmacist)	To the PIC and to the Pharmacy - Letter of Concern reminding them to maintain accurate records of all controlled substances as required in O.C.G.A. §16-13-39 & 26-4-60(b).
26-3130	APW (Primary Subject)/ MH (Complainant)/ HTN (Subject - Medical Director)/ JM (Subject Owner #1)/ BR (Involved Party)/ KHB (Subject - Nurse Practitioner)/ ZL (Subject - Unlicensed Wholesale Distributor)/ DH (Subject PIC)/ DS (Involved Party)/ RH (Involved Party)/ SPC (Subject - Unlicensed Nonresident Pharmacy) TCL (Subject Unlicensed Wholesale	To the Facility, the Physician, and the Nurse Practitioner - Cease & Desist for the following: Compounding and dispensing prescription medications to patients in violation of O.C.G.A. §26-4-40(b); Dispensing retatrutide (an unapproved drug) in violation of O.C.G.A. §16-3-4; and Purchasing dangerous drugs from a facility that is not registered with the GA BOP in violation of O.C.G.A. § 26-4-115. AG's office to serve. To the Unlicensed Nonresident Pharmacy - Approve the

	Distributor)/ VH (Involved Party)	pending application pending a signed Private Consent Order & payment of a $500 fine for shipping dangerous drugs into GA w/o being registered w/ GA BOP in violation O.C.G.A.§26-4-114.1 To Unlicensed Wholesale Distributor #1 and #2 - The Board to send Cease and Desist letters for selling or distributing dangerous drugs without being registered with the GA BOP in violation of O.C.G.A. § 26-4-115. Additionally - BOP office to refer the case to the Composite Medical Board, the Nursing Board, and the TN BOP.
26-3290	PP (Pharmacy)/ JM (Complainant)/ JMS (Subject Staff Pharmacist)/ CW (Involved Party PIC)	To the Staff Pharmacist - Misfill Guidance #1A. A statement was provided by the pharmacist.
26-3377	CP (Primary Subject Pharmacy)/ JD (Complainant)/ DP (Subject PIC)/ IMR (Technician)/ NA (Technician)/ CNE (Subject Floater Pharmacist)/ SKE (Involved Party - District Manager)	To the PIC - Misfill Guidance #1A to the pharmacist for the methylphenidate prescription error. A statement was not provided by the pharmacist during the investigation. To the Pharmacy – Letter of Concern reminding the pharmacy to ensure accurate prescription dispensing. The mother identified the mistake on the Quillivant prescription before pickup, and multiple pharmacists were involved in filling it, though their specific actions are unclear.
26-3381	WG (Pharmacy)/ MC (Complainant)/ ENN (Subject PIC)/ SI (Subject Staff Pharmacist)	To the PIC and the Staff Pharmacist - Misfill Guidance #2A to the pharmacists. The pharmacists did not provide statements during the investigation.
26-3788	WP (Primary Subject Pharmacy) OA (Subject PIC)	To the PIC and to the Pharmacy - Letter of Concern reminding them to maintain accurate records of all controlled substances as required in O.C.G.A. §16-13-39 & 26-4-60(b).
26-3793	WG (Pharmacy)/ JG (Subject PIC)/ BF (Complainant)/ JF (Subject Staff Pharmacist)	To the PIC - Misfill Guidance #1A to the pharmacist. A statement was not provided by the pharmacist during the investigation. To the Staff Pharmacist - Private Consent Order with a $500 fine
26-4090	AJE (Pharmacy Intern)	Approve the application, but the intern must provide final case disposition w/n 30 days of receipt.
26-4111	CP (Pharmacy) / SWN (Former PIC)/ AH (Complainant)/ AR (Involved Party)/ HHB (Pharmacist)/ KP (Floater Pharmacist) / JA (Pharmacist)	To the former PIC - Misfill Guidance #1A. A statement was not provided by the pharmacist.
26-4115	PP (Pharmacy)/ MDC (Complainant) WSC (Complainant)/ VN (Involved Physician)/ NS (Subject Floater Pharmacist)/ APO (Technician)/ EW (PIC)/ NV (Technician)/ YG (Involved Party - Pharmacy Tech)	To the Floater Pharmacist - Letter of Concern to the pharmacist reminding them to dispense the correct quantity on prescriptions and to comply with O.C.G.A. §26-4-84(b) concerning the review of each prescription drug order presented for dispensing for the purpose of promoting therapeutic appropriateness. A statement was not provided by the pharmacist.
26-4126	WG (Pharmacy) / MCA (Subject PIC)/ JLS (Technician)/ HWL (Involved Party)/ MLB (Involved Party)/ GL (Involved Party)/ TWK (Complainant)	To the Pharmacy – Letter of Concern reminding them of the requirement to notify GDNA in writing within three days following any damage by fire and/or water as required by Rule 480-16-.04 (2).
26-4238	PP (Pharmacy)/ IB (PIC)/ JH (Complainant)/ SDB (Primary Subject – Floater Pharmacist)	To the Floater Pharmacist - Misfill Guidance #1A to the pharmacist. A statement was not provided by the pharmacist during the investigation. Also, need to language about keeping accurate records.
26-4301	HDC (Pharmacy) / RTH (Subject PIC)/ PJ (Complainant)/ TW (Technician #2)/ CEP (Technician #1)/ HGD (Involved Party - Floater Pharmacist)	To the PIC – Misfill Guidance #2A to the pharmacist. A statement was not provided by the pharmacists during the investigation.

26-4347	AC (Subject - DME Supplier)/ JE (Designated Representative)/ JB (Involved Party/ DS (Involved Party)/ ECOHT (Unlicensed Wholesale Distributor)	To the DME Supplier – Private Order with a $5,000 fine To the Unlicensed Wholesale Distributor – Approve the application pending a signed Private Order with a $5,000 fine
26-4448	K L (Primary Technician) BA (PIC)/ SS (Complainant Pharm)/ BWP (Pharmacy)	Accept the signed Voluntary Surrender
26-4552	CTI (Subject - Unlicensed Wholesale Distributor)/ BUI (Primary Subject)	To the Manufacturer – Private Consent Order with a $5,000 fine; To the Unlicensed Wholesale Distributor – Cease & Desist from unlawfully distributing drugs at wholesale in this state w/o license in violation of O.C.G.A. §26-4-115.
26-4751	WWW (Technician)/ MCOE (PIC)/ MP (Primary Subject Pharmacy)	To the Pharmacy – Approve the Low-THC application pending signed Public Consent Order & payment of a $1,000 fine; To the PIC – Letter of Concern reminding her of the requirement to follow O.C.G.A. § 26-4-82(c)(2) regarding technician supervision.
26-1913	JT (Complainant)/ KDE (Party)/ CSP (Nonresident Pharmacy)/ CSP (Nonresident Pharmacy)/ CSP (Involved Party Nonresident Pharmacy)	Close
26-3535	JR (Complainant)/ OR (Nonresident Pharmacy)/ BC (PIC)/ AH (Pharmacist) ES (Pharmacist)/ NR (Pharmacist)/ OP (Subject – Nonresident Pharmacy)	Close
26-3709	CP (Pharmacy) / MY (PIC)/ HC (Complainant)/ MLN (Pharmacist) / DTF (Floater Pharmacist)/ CR (Technician #1)/ OD (Technician #2)	Close
26-3710	CP (Pharmacy)/ RS (Floater Pharmacist) JDF (Complainant)	Close
26-3712	WG (Pharmacy)/ LJC (PIC)/ RLB (Staff Pharmacist)/ CSD (Technician)/ HC (Complainant)	Close
26-3815	WP (Pharmacy)/ EKP (PIC)/ BD (Complainant)	Close
26-3953	CP (Pharmacy) / BS (Complainant)/ JH (Involved Party)/ TW (PIC)/ HH (Staff Pharmacist)/ VRS (Technician)	Close
26-4107	WP (Pharmacy #1)/ PPP (PIC)/ EV (Complainant)/ JJHL (Staff Pharmacist)/ MBA (Technician)/ DAP (PIC)/ WP (Involved Party - Pharmacy #2)	Close
26-4114	RBS (Subject) / KB (Complainant)/ CR (Complainant Physician)	Close
26-4117	GHL (Subject)/ DML (Subject)/ KF (Complainant)/ HLB (Technician)	Close
26-4244	PP (Pharmacy #1)/ HH (Complainant)/ SH (Complainant) / PP Pharmacy #3)/ PP (Pharmacy #2)/ VP (PIC)/ SS (Floater)/ VB (Floater) / MT (PIC)/ ELO (Floater)/ TB (PIC)/ SCL (Floater)/ JDJ (Former PIC) / LJ (District Manager)	Close
26-4465	CP (Pharmacy) / PS (Technician)/ EHC (PIC)/ RP (Complainant)/ TR (Staff Pharmacist)	Close

Legal Services:

Licensee	Violation	Decision

AMGL dba PAA	Facility changed their address online on 6/23/25 w/o proper notification to Board	Referred to AG's Office for Public Consent Order and Fine

Applications

Name	Type of License	Decision
MH	Pharmacy Technician	Approved
AH	Pharmacy Technician (Self-Report)	Approved with conditions
CB	Pharmacy Technician	Approved
AW	Pharmacy Technician	Approved
HC	Pharmacy Technician	Approved
MB	Pharmacy Technician	Approved
SG	Pharmacy Technician	Approved
RB	Pharmacy Technician	Approved with conditions
EC	Pharmacy Technician	Approved
AG	Pharmacy Technician	Approved
JH	Pharmacy Technician	Approved
AOH	Pharmacy Technician	Approved
CW	Pharmacy Technician	Approved
KN	Pharmacy Technician	Approved with Conditions
JL	Pharmacy Technician	Approved
MF	Pharmacy Technician	Approved
CB	Pharmacy Technician	Approved
NB	Pharmacy Technician	Tabled
NH	Pharmacy Technician	Approved
EH	Pharmacy Technician	Denied
TME	Pharmacy Technician	Approved
TS	Pharmacy Technician	Approved
VA	Pharmacy Technician	Approved
XL	Pharmacy Technician	Approved
LHH	Pharmacy Technician	Approved
MC	Pharmacy Technician	Approved
MM	Pharmacy Technician	Approved
MP	Pharmacist	Approved
AH	Pharmacist	Approved
HK	Pharmacist	Approved
JC	Pharmacist	Approved
MD	Pharmacist	Approved
MP	Pharmacist	Approved
MM	Certification of DTM	Approved
VMM	Certification of DTM	Approved
BDC – PRTU	Emergency Kit Requests	Approved
GH – BV	Emergency Kit Requests	Approved
LRMCRP – CMNH	Emergency Kit Requests	Approved
PPS – AHH dba FH	Emergency Kit Requests	Approved
OA-MMH	Emergency Kit Requests	Approved

PPS -TKM	Emergency Kit Requests	Approved
PPS– TC	Emergency Kit Requests	Approved
EHCS	DME	Denied
TCR	Wholesaler	Denied with Conditions

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
RC	3rd Request for Extension	Approved
MA	Request for an Extension	Approved
NS	2nd Request for an Extension	Approved
JR	7th Attempt to Take MPJE	Approved
TC	Request to Appear/ Private Interim Consent Order	Approved

Mr. Farmer seconded, and the Board voted unanimously in favor of the motion. There being no further business to discuss, the meeting was adjourned at 3:49 p.m.

The next scheduled meeting of the Georgia Board of Pharmacy will be held on Wednesday, October 14, 2026 at 9:00 a.m. at South University, 709 Mall Blvd., Savannah, GA 31406.

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.