

GEORGIA BOARD OF PHARMACY
Board Meeting
2 Peachtree St, NW, 5th Floor
Atlanta, GA 30303
July 18, 2018
9:00 a.m.

The following Board members were present:

Vicki Arnold
Michael Brinson
Mike Faulk
Lisa Harris
Hal Henderson
Bob Warnock

Staff present:

Tanja Battle, Executive Director
Dennis Troughton, Director, GDNA
Ronnie Higgins, Deputy Director, GDNA
Michael Karnbach, Special Agent, GDNA
Max Changus, Assistant Attorney General
Melissa Tracy, Assistant Attorney General
Kimberly Emm, Attorney
Brandi Howell, Business Support Analyst I

Visitors:

Tim Koch, Walmart
Nirmal Patel, Walmart
Beth Jarrett, Walmart
Diane Sanders, Kaiser Permanente
Adam Schnepf, Walgreens
Tiffany Park, Walgreens
Whitney Testorf, Walgreens
Stephanie Kirkland, Eldercare Pharmacy
LeighAnne Jacobson, Publix
Amanda Roberson, Eldercare Pharmacy
Ted A. Green, Eldercare Pharmacy
Helen Sloat, Kaiser, Hemophilia of Georgia
Bethany Sherrer, Medical Association of Georgia
Scott Piper, GVMA
John Rocchio, CVS Health
Amy Krieg, GHA
TJ Kaplan, JLM
Cindy Shepherd, GPhA
Jim Bartling
Keri Taylor
Gabriel Toms
A. Bruce Conn
Shamira Henley

Open Session

Mr. Faulk established that a quorum was present and called the meeting to order at 9:00 a.m.

Approval of Minutes

Lisa Harris made a motion to approve the Public Session minutes from the June 6, 2018 meeting. Vicki Arnold seconded and the Board voted unanimously in favor of the motion.

Vicki Arnold made a motion to approve the Executive Session minutes from the June 6, 2018 meeting. Bob Warnock seconded and the Board voted unanimously in favor of the motion.

Report of Licenses Issued

Bob Warnock made a motion to ratify the list of licenses issued. Lisa Harris seconded and the Board voted unanimously in favor of the motion.

Petitions for Rule Variance or Waiver

Ms. Amanda Roberson, who was present at the meeting, spoke to the Board regarding the following petitions: Rule Variance Petition from Elder-Care Pharmacy #2, Rule Variance Petition from Elder-Care Pharmacy Inc-Corp, Rule Variance Petition from Elder-Care Pharmacy Augusta, Rule Variance Petition from ElderCare Pharmacy Royston, Rule Variance Petition from Magnolia Manor Pharmacy, Rule Waiver Petition from Elder-Care Pharmacy #2, Rule Waiver Petition from Elder-Care Pharmacy Inc-Corp, Rule Waiver Petition from Elder-Care Pharmacy Augusta, Rule Waiver Petition from ElderCare Pharmacy Royston, and Rule Waiver Petition from Magnolia Manor Pharmacy. Ms. Roberson stated that the waiver requests are regarding a sign as required in 480-36-.07(1)(a). She explained that the variance requests pertained to 480-36-07(1)(b). Mr. Faulk commented that he would like to see their policies and procedures. Ms. Roberson stated that they did want to revamp their pharmacy/provider agreement and would develop policies and procedures, but were waiting on outcome of the petition requests first. After further discussion by the Board, the Board recommended tabling the rule variance petitions submitted until the August 1st meeting pending receipt of information on each facility's policies and procedures. Bob Warnock made a motion to grant the rule waiver petitions from Elder-Care Pharmacy #2, Elder-Care Pharmacy Inc-Corp, Elder-Care Pharmacy Augusta, ElderCare Pharmacy Royston, and Magnolia Manor Pharmacy. Michael Brinson seconded and the Board voted unanimously in favor of the motion.

Lisa Harris made a motion to grant the rule variance petition from Elevate Oral Care. Bob Warnock seconded and the Board voted unanimously in favor of the motion.

Bob Warnock made a motion to grant the rule waiver petition from Bioverative US, LLC. Lisa Harris seconded and the Board voted unanimously in favor of the motion.

Lisa Harris made a motion to grant the rule waiver petition from Innocoll, Inc. Bob Warnock seconded and the Board voted unanimously in favor of the motion.

Michael Brinson made a motion to grant the rule waiver petition from Sage Therapeutics, Inc.. Hal Henderson seconded and the Board voted unanimously in favor of the motion.

Hal Henderson made a motion to grant the rule waiver petition from Sirtex Medical, Inc.. Michael Brinson seconded and the Board voted unanimously in favor of the motion.

Michael Brinson made a motion to grant the rule waiver petition from Tetrphase Pharmaceuticals, Inc. Bob Warnock seconded and the Board voted unanimously in favor of the motion.

Bob Warnock made a motion to deny the rule waiver petition from George Farag. Vicki Arnold seconded and the Board voted unanimously in favor of the motion.

Correspondence from Jeremy Crabb

The Board considered this correspondence requesting clarification as to whether or not a DME license would be required if the only equipment provided is an enteral food pump. Bob Warnock made a motion to direct staff to respond by stating that a DME license would be required if the company is providing a pump. Michael Brinson seconded and the Board voted unanimously in favor of the motion.

Correspondence from Joseph Gallagher, National Coalition for Drug Quality & Security (NCDQS)

The Board viewed this correspondence for informational purposes only.

Correspondence from Ashley S. Groome, McGuireWoods Consulting, LLC

The Board viewed this correspondence for informational purposes only.

Correspondence from BD Medication Delivery Solutions

The Board viewed this correspondence for informational purposes only.

Correspondence from Leah A. Tinney, Quarles & Brady, LLP

The Board considered this correspondence asking if a pharmacy can transfer an unfilled original non-controlled prescription, and if yes, is there a limit to the number of times the unfilled prescription can be transferred. In response to Ms. Tinney's inquiry, in a non-controlled drug prescription situation, the transfer of an unfilled prescription, with the consent of the patient, does not violate any current state law or rule. The law and rules do not currently address the propriety of this type of transfer, which means there is no prohibition. The Board also noted that this is the final response that will be sent to Quarles & Brady, LLP representatives regarding this matter as it has been addressed multiple times.

Correspondence from Tim Koch, Walmart

The Board considered this correspondence regarding an overview of Walmart's new Opioid Stewardship policies and their request that the Board change a regulation to assist Walmart and Sam's Club Pharmacists with the provision of quality patient care. Mr. Koch was present at the meeting and spoke to the Board regarding this matter. Mr. Koch explained that on June 25, 2018, Walmart changed its internal dispensing policy on opioids and Walmart and Sam's Club Pharmacies began limiting their dispensing of initial opioid prescriptions for acute conditions to no more than a 7-day supply with up to a 50 MME maximum per day. He stated that when initial acute prescriptions are presented with a day's supply in excess of 7 days, the pharmacists will collaborate with the patient to reduce the quantity dispensed. If the patient declines to accept a reduced quantity, the pharmacy will respectfully decline to fill the prescription and the patient may take the prescription to a pharmacy of his/her choice.

Mr. Koch went on to discuss Walmart's request for the Board to consider amending the language in Rule 480-22-.04(8) to allow pharmacists to follow the DEA guidance with respect to the pharmacist's ability to add or change elements of a C-II prescription after consulting with the prescriber and obtaining their authorization. Currently, the rule limits a pharmacist's ability to make changes to a C-II prescription. Mr. Koch provided the Board with suggested language. Mr. Warnock asked if Mr. Koch had an idea of how many states allowed this. Mr. Koch stated there are 18 states in his area and it's an overwhelming majority. Mr. Warnock asked Mr. Changus if Mr. Koch was citing a rule or statute. Mr. Changus stated what he is citing is a rule so the Board has some room to maneuver. He added that he is not aware of anything at present time that would prevent the Board from considering this. Ms. Emm added that the Board would need to consider how it may conflict with Chapter 480-35 Pharmacist Modification of Drug Therapy. Director Troughton commented that he could not find where the DEA has given guidance regarding this matter. Mr. Koch responded by stating the DEA does not often put very strict guidelines out for the registrants. He stated there is language out there that appears to allow for this to occur. Director Troughton stated that he could not find it and requested Mr. Koch provide it to the Board. Mr. Changus commented that it would be worthy of good study to determine when prescriptions are modified. He stated there is language in the statute about it being done per protocol. He added in the wake of the opioid epidemic, the Board would need to proceed cautiously.

Mr. Nirmal Patel, Regional Director, Walmart, spoke to the Board. He stated this change has been enormous for them. He stated it has been one of the biggest changes the pharmacists have seen. To give the Board some feedback regarding this matter, he stated the change is being received positively with

pharmacists feeling empowered to use their professional judgement. With the majority of his interactions, he has only encountered one pharmacist who did understand the perspective, with mostly everyone feeling as though they are working towards preventing the epidemic. Mr. Faulk thanked him for his input.

Mr. Koch stated the other item he will share is really a holistic policy. He stated this applies to initial acute opioid prescriptions. He spoke to efforts to prevent addition, overdose and death especially as it relates to individuals who have an event with no previous opioid use before. Mr. Warnock commented that this is a matter that certainly needs to be discussed. He complimented Mr. Koch and Walmart for their efforts. He added that to Mr. Changus's point, the Board will need to take a close look at this. Mr. Koch stated he would be willing to work with Mr. Changus on this and provide language. Ms. Battle suggested Mr. Koch provide any information to her and she will engage Mr. Changus as necessary.

Next, Mr. Koch spoke to the Board regarding point of care testing. He stated that language found in O.C.G.A. § 31-22-9 appears to be a contradiction with the definition of "practice of pharmacy". He stated the specific tests they are trying to perform are glucose testing, lipid tests and A1C finger stick tests. He asked what pharmacists are allowed to test under Georgia law. Ms. Bethany Sherrer, Medical Association of Georgia (MAG), commented that the intent of the law was to purchase these tests over the counter. She stated if the patient wanted to he/she could purchase the product over the counter and take it to the pharmacist. She added that this was meant to expand that access.

Correspondence from Keith E. Fisher, Point of Care Partners

The Board considered this correspondence regarding dangerous drugs in Georgia. The Board directed staff to respond by referring Mr. Fisher to the law and rules located on the Board's website.

Correspondence from Dr. Jeffrey D. Schultz

The Board considered this correspondence regarding variability of length of prescription for identical quantities of Schedule II opioids. The Board directed staff to respond by stating this would be determined by the pharmacist, but if he would like to specify the day supply he believes is on the prescription, he can designate that on the prescription.

Correspondence from Zach Frye

The Board considered this correspondence regarding the calculated days' supply for a prescription. The Board directed staff to respond by stating the Board suggests that if a prescriber designates the number of days on the prescription, then the pharmacist should use that number. However, if the prescriber does not designate the number of days on the prescription, then the pharmacist should calculate the number.

Correspondence from Dr. Frank Pickens

The Board considered this correspondence asking who can give advice of specific drugs. The Board directed staff to respond by referring Dr. Pickens to the law and rules located on the Board's website.

Correspondence from Tanya Vegh

The Board considered this correspondence regarding MTM and pharmagenomic consulting. The Board directed staff to respond by referring Ms. Vegh to the law and rules located on the Board's website. Additionally, the Board suggested Mr. Vegh direct her questions to the Georgia Composite Medical Board.

Correspondence from Christine Cassetta, Quarles & Brady, LLP

The Board considered this correspondence regarding ostomy and urological supplies listed on the National Suppliers Clearinghouse list for Georgia; however, these products do not fit within the definition of the new DME provisions. Ms. Battle explained that Ms. Cassetta is still requesting the Board clarify it. Mr. Changus stated the clearinghouse has put these supplies on their list for some reason and the last time the Board responded, it advised that it was not the Board's inclination to notify the clearinghouse what they

should or should not have on their list because the law is clear. After further discussion, Mr. Changus stated he would contact the Clearinghouse to bring to their attention that these two items are not considered DME by Georgia law.

Correspondence from Stephanie Sabillon, AON, LLC

The Board considered this correspondence requesting clarification regarding the practice of physician compounding (i.e., mixing antibiotics, infusion therapy, etc.) in a physician's medical office in Georgia. The Board directed staff to respond to Ms. Sabillon's questions as follows:

1. Does the Board have any laws and regulations governing the practice of "Physician Compounding" if the compounded product is being prepared in a manner that is both specific and for immediate use under the oversight of a licensed physician? *Please refer to O.C.G.A. § 26-4-86 titled Compounding and distribution of drug products. The corresponding rules referred to by this law are found in Board Rule 480-11 Pharmaceutical Compounding.*
2. Does the Board require a pharmacist and /or pharmacy license in this type of setting? *No. Georgia law gives a physician the authority to compound prescription drugs themselves.*

Georgia Drugs and Narcotics Agency – Dennis Troughton

Director Troughton welcomed new members, Mr. Brinson and Mr. Henderson. Director Troughton thanked Laird Miller, Jim Bracewell and Chris Jones for their service on the Board.

Director Troughton reported that GDNA came in under budget for FY2018, which should provide the ability for GDNA to hire another full-time agent and replace one office staff member.

Director Troughton reported that GDNA conducted 2,086 investigations, received 383 complaints, and assisted with 648 wholesale applications for FY2018.

Director Troughton stated that GDNA received a communication from NABP asking for 2 personnel to come review MPJE questions. It was suggested that Ms. Harris, along with Special Agent Karnbach, attend. The dates of the meeting will be 09/06-09/07.

Attorney General's Report – Max Changus

Mr. Changus introduced Melissa Tracy to the Board and then introduced himself to Mr. Brinson and Mr. Henderson. Mr. Changus explained his role with the Board.

Mr. Changus stated the Board had previously discussed the transmission of prescriptions from a hospital to a nursing home. He stated it was a "fax of a fax" issue. He advised there has been some discussion through his office on this matter and will report back to the Board as appropriate.

Executive Director's Report – Tanja Battle

Ms. Battle welcomed Mr. Brinson and Mr. Henderson to the Board. She acknowledged Chris Jones, Laird Miller and Jim Bracewell for their service on the Board.

Ms. Battle explained to Mr. Brinson and Mr. Henderson that now that they have been sworn in, they could expect inquiries regarding board matters such as applications and investigations, both of which are confidential. She indicated that she has shared her contact information via email and that they may use it to refer any inquiries and that she would happy to assist.

Continuing Education Report: Report presented. Michael Brinson made a motion to ratify the below continuing education programs approved since the previous meeting. Lisa Harris seconded and the Board voted unanimously in favor of the motion.

Date of Program	Hours	Sponsoring Group	Program Title	CE Code
06/07/2018	.5	Kaiser Foundation Health Plan of GA	Clinical Information Series: Informatics and Medication Adherence	2018-0008
06/14/2018	.5	Kaiser Permanente Bernard Britton	Update on Pipeline Agents for Alzheimer's Disease	2018-0009
09/20/2018	7.5	National Association of Drug Diversion Investigators	Diversion Training Annual Meeting Investigators	2018-0010

Correspondence from Fran Cullen

The Board considered this correspondence regarding compliance with left over patient medications at a hospice facility from when a patient passes away. The correspondence asks can a kiosk be registered under the pharmacist’s facility/DEA license and placed off-site at the inpatient hospice facility. The Board directed staff to respond by stating it would be dependent upon the DEA’s determination.

Legal Services – Kimberly Emm

Ms. Emm welcomed Mr. Brinson and Mr. Henderson to the Board.

Miscellaneous

Rule 480-13-.01 Definitions: Lisa Harris made a motion to post Rule 480-13-.01 Definitions. Bob Warnock seconded and the Board voted unanimously in favor of the motion.

Rule 480-13-.01 Definitions

For purposes of these Rules and Regulations, the following definitions apply:

- (a) Hospital. As defined by the Department of Human Resources;
- (b) Hospital pharmacy. Hospital pharmacy is defined as that portion of a hospital facility which is engaged in the manufacture, production, sale and distribution of drugs, medications, devices, and other materials used in the prevention, diagnosis and treatment of injury, illness and disease (hereinafter referred to as "drugs"); and which is registered with the State Board of Pharmacy pursuant to O.C.G.A. § 26-4-110;
- (c) Hospital pharmacy license. Hospital pharmacy license shall mean a pharmacy license issued by the Georgia State Board of Pharmacy to said hospital pharmacies, pursuant to the provisions of O.C.G.A. Sections 26-4-27, 26-4-28 and 26-4-110 whereas the licensee shall be subject to special hospital pharmacy regulations as set forth herein, but exempt from other certain regulations and requirements. To obtain the hospital pharmacy license, there must be employed a Director of Pharmacy.
 1. The Board authorizes the holder of a hospital pharmacy license to service patients of Nursing Homes, Long Term Care Facilities or Hospices as long as these entities are under the same ownership as the hospital pharmacy; however, such entities can only be serviced by the hospital pharmacy subject to the requirements as set forth by Georgia State Board of Pharmacy Rules 480-24, the rule for providing services to nursing homes, long term care facilities, and hospices. The hospital pharmacy is prohibited from maintaining standard ward (Floor Stock) inventories in such entities, but, it would allow the hospital pharmacy to supply emergency kits.
- (d) In-patient. In-patient shall mean a patient who is confined to the hospital;
- (e) Out-patient. Out-patient shall mean a patient who is not an in-patient, including patients on leave of absence;
- (f) Remote Location. Remote location shall mean a location away from the hospital or hospital pharmacy located within the ~~State of Georgia~~ United States where a pharmacist reviews and enters patient specific prescription drug orders for a hospital's patients.
- (g) Remote Order Entry. Remote order entry shall mean the entry made by a pharmacist licensed in this state, who is an employee or contractor of either a pharmacy licensed in this state or a pharmacy that holds a Georgia nonresident pharmacy permit issued pursuant to Code Section 26-4-114.1, located within the

~~State of Georgia~~ makes from a remote location anywhere in the United States indicating that the pharmacist has reviewed the patient specific drug order for a hospital patient, has approved or disapproved the administration of the drug for said patient, and has entered the information ~~on~~ in the hospital's patient record system.

(h) Remote Order Entry Pharmacist. A remote order entry pharmacist shall mean a pharmacist who is licensed to practice pharmacy in the State of Georgia, who is at a remote location located within the ~~State of Georgia~~ United States, who is an employee or contractor of a pharmacy licensed in this state or that holds a nonresident pharmacy permit issued pursuant to Code Section 26-4-114.1, and who is under contract with or employed by the hospital to review and enter patient specific prescription drug orders for hospital patients when the hospital pharmacy is closed.

(i) Standard ward inventory. The Director of Pharmacy or his/her pharmacist designee may, in the best interest of the patients served, establish one or more lists of the kind and quantity of legend drugs to be kept at one or more locations at all times within said hospital and such stocks of legend drugs shall be known as standard ward inventory. The use of standard ward inventory shall be minimized. A copy of the list of items on standard ward inventory must be kept by the Director of Pharmacy or his/her pharmacist designee. A standard ward inventory may be placed on an emergency vehicle licensed with the State Department of Human Resources. A contract or agreement must be signed between the hospital and the ambulance service and filed with the Department of Human Resources Licensure Division and the Georgia Drugs and Narcotics Agency (GDNA) before any legend drugs may be placed on said licensed vehicle. An agreement can be made with only one hospital.

Rule 480-13-.04 Absence of Pharmacist: Bob Warnock made a motion to post Rule 480-13-.04 Absence of Pharmacist. Michael Brinson seconded and the Board voted unanimously in favor of the motion.

Rule 480-13-.04 Absence of Pharmacist

(1) General. When a licensed pharmacist is not physically present in the hospital and the pharmacy is closed, written policies and procedures shall be prepared in advance by the Director of Pharmacy for the provision of drugs to the medical staff and other authorized personnel of the hospital by use of night cabinets and/or by access to the pharmacy. The policies and procedures may include the use of remote order entry pharmacist to ensure that in-patient needs are met at the hospital when a licensed pharmacist is not physically present. All policies and procedures providing for the use of night cabinets and/or access to the pharmacy when a licensed pharmacist is not physically present shall be made available to the Georgia State Board of Pharmacy, its designee, or a representative of the Georgia Drugs and Narcotics Agency (GDNA), upon request.

(2) A hospital utilizing a remote order entry pharmacist shall maintain a record of the name and address of such pharmacist, evidence of current licensure in the State of Georgia, and the address of each location where the pharmacist will maintain records of remote order entries.

(3) A hospital pharmacy shall be authorized to utilize remote order entry when:

(a) The licensed pharmacist is not physically present in the hospital, the hospital pharmacy is closed, and a licensed pharmacist will be physically present in the hospital pharmacy within 24 hours or the next business day;

(b) When at least one licensed pharmacist is physically present in the hospital ~~pharmacy and at least one other licensed pharmacist is practicing pharmacy in the hospital but not physically present in the hospital pharmacy~~; or;

(c) When it is a weekend and at least one pharmacist is physically present in another hospital in this state which remotely serves on weekends not more than four other hospitals under the same ownership or management which have an average daily census of less than twelve acute patients. the hospital has a daily census of less than ten acute patients, and the remote licensed pharmacist is physically present in another hospital in this state which is owned or under the same management as the hospital.

(4) Before a hospital may engage in remote order entry as provided in this paragraph, the director of pharmacy of the hospital shall submit to the board written policies and procedures for the use of remote

order entry. The required policies and procedures to be submitted to the board shall be in accordance with the American Society of Health-System Pharmacists and shall contain provisions addressing:

- (a) quality assurance and safety,
- (b) mechanisms to clarify medication orders,
- (c) processes for reporting medication errors,
- (d) documentation and record keeping,
- (e) secure electronic access to the hospital pharmacy's patient information system and to other electronic systems that the on-site pharmacist has access to,
- (f) access to hospital policies and procedures, confidentiality and security, and
- (g) mechanisms for real-time communication with prescribers, nurses, and other care givers responsible for the patient's health care.

(5) Each remote entry record must comply with all recordkeeping requirements and shall identify, by name or other unique identifier, the pharmacist involved in the preview and verification of the order. The remote entry pharmacist shall maintain records of any and all records entered for the hospital for a minimum of two (2) years, and such records shall be readily available for inspection, copying by, or production of upon request by the Board, its designee, or a representative for the Georgia Drugs and Narcotics Agency (GDNA), upon request.

(6) If the board concludes that the hospital's actual use of remote order entry does not comply with this rule or ~~paragraph~~ O.C.G.A. 26-4-80, it may issue a cease and desist order after notice and hearing.

(7) Night cabinets. Access to drugs, in the absence of a licensed pharmacist, shall be by locked cabinet(s) or other enclosure(s) constructed and located outside of the pharmacy area to which only specifically authorized personnel as indicated by written policies and procedures may obtain access by key or combination, and which is sufficiently secure to deny access to unauthorized persons. The Director of Pharmacy shall, in conjunction with the appropriate committee of the hospital, develop inventory listings of those drugs to be included in such cabinet(s) and shall insure that:

- (a) Such drugs are available therein, properly labeled, with drug name, strength, lot number and expiration date;
- (b) Only pre-packaged drugs are available therein, in amounts sufficient for immediate therapeutic requirements;
- (c) Whenever access to such cabinet(s) has been gained, written practitioner's orders and proofs of use for controlled substances must be provided;
- (d) All drugs therein are inventoried no less than once per week. A system of accountability must exist for all drugs contained therein; and
- (e) Written policies and procedures are established to implement the requirements of this subsection.

(8) Access to pharmacy. Whenever a drug is not available from floor supplies or night cabinets, and such drug is required to treat the immediate needs of a patient whose health would otherwise be jeopardized, such drug may be obtained from the pharmacy pursuant to the practitioner's order and the requirements of this subsection. One nursing supervisor (registered professional nurse or licensed practical nurse) in any given shift may have access to the pharmacy and may remove drugs there from. Such licensed nurse shall be designated in writing by the Director of Pharmacy of the hospital and shall, prior to being permitted to obtain access to the pharmacy, receive thorough education and training approved by the Director of Pharmacy, in the proper methods of access, removal of drugs, and records and procedures required. The Director of Pharmacy, or designee, shall document the nurse's competence following the education and training. In addition, such licensed nurse accessing a closed pharmacy must receive specific step-by-step instructions in a policy manual, approved by the Director of Pharmacy, before accessing the pharmacy. At any time that a nurse is accessing a closed pharmacy, the Director of Pharmacy must designate a licensed pharmacist, not a remote order entry pharmacist, who is available to the nurse by telephone, and who, in the event of an emergency, is available to come to the hospital. When a nurse accesses drugs directly from the closed pharmacy, the nurse must:

- (a) provide a copy of the order,

- (b) document on a suitable form the name of the drug, the strength and amount of the drug removed, the date and time it was removed, and sign the form.
- (c) The container from which the drug is removed shall then be placed conspicuously to be promptly reviewed and inspected by the next pharmacist coming on duty. The Director of Pharmacy's policies and procedures must provide that the next pharmacist physically coming into the pharmacy must document that they have reviewed the drugs removed and the orders filled.
- (9) Emergency kits/crash carts. Drugs may also be provided for use by authorized personnel by emergency kits/crash carts, provided such kits/carts meet the following requirements:
- (a) Emergency kit/crash cart drugs defined. Emergency kit/crash cart drugs are those drugs which may be required to meet the immediate therapeutic needs of patients and which are not available from any other authorized source in sufficient time to prevent risk of harm to patients;
- (b) Drugs included. The Director of Pharmacy and the medical staff of the hospital shall jointly determine the drugs, by identity and quantity, to be included in the emergency kits/crash carts;
- (c) Storage. Emergency kits/crash carts shall be sealed and stored in limited access areas to prevent unauthorized access, and to insure a proper environment for preservation of the drugs within them;
- (d) Labeling - exterior. The exterior of emergency kits/crash carts shall be labeled so as to clearly and unmistakably indicate that it is an emergency drug kit/crash cart and is for use in emergencies only. In addition, a listing of the drugs contained therein, including name, strength, quantity, and expiration date of the contents shall be attached. Nothing in this section shall prohibit another method of accomplishing the intent of this section, provided such method is approved by an agent of the Board;
- (e) Labeling - interior. All drugs contained in emergency kits/ crash carts shall be labeled in accordance with such State and Federal Laws and Regulations which pertain thereto; and shall also be labeled with such other and further information as may be required by the medical staff of the hospital to prevent misunderstanding or risk of harm to the patients;
- (f) Removal of drugs. Drugs shall be removed from emergency kits/crash carts only pursuant to a valid practitioner's order, by authorized personnel, or by a pharmacist of the institutional facility;
- (g) Notification. Whenever an emergency kit/crash cart is opened, the pharmacy shall be notified; and pharmacy personnel shall restock and re-seal the kit/cart within a reasonable time so as to prevent risk of harm to patients. In the event the kit/cart is opened in an unauthorized manner, the pharmacy and other appropriate personnel of the facility shall be notified;
- (h) Inspections. Each emergency kit/crash cart shall be opened and its contents inspected by a pharmacist at least once every ninety (90) days. Upon completion of inspection, the emergency kit/crash cart shall be re-sealed;
- (i) Procedures. The Director of Pharmacy shall, in conjunction with the medical staff of the hospital, develop and implement written policies and procedures to insure compliance with the provisions of this subsection.
- (10) Authoritative, current antidote information as well as the telephone number of the regional poison control information center shall be readily available in areas outside the pharmacy where these drugs are stored.
- (11) Nothing in this rule shall be construed to relieve the hospital pharmacy of the requirement of having an on-site pharmacist to provide routine pharmacy services within the hospital in order to qualify as a licensed pharmacy.

A motion was made by Lisa Harris, seconded by Bob Warnock, and the Board voted that the formulation and adoption of these rule amendments do not impose excessive regulatory cost on any licensee and any cost to comply with the proposed amendments cannot be reduced by a less expensive alternative that fully accomplishes the objectives of the relevant code sections.

In the same motion, the Board also voted that it is not legal or feasible to meet the objectives of the relevant code sections to adopt or implement differing actions for businesses as listed at O.C.G.A § 50-13-4(a)(3)(A), (B), (C) and (D). The formulation and adoption of these rule amendments will impact every

licensee in the same manner, and each licensee is independently licensed, owned and operated and dominant in the field of pharmacy.

Institutional Pharmacy Rule Draft: Mr. Faulk stated that Mr. Miller was going to do research on this matter, but is no longer with the Board. He stated he will contact Mr. Miller and requested Mr. Warnock contact Mr. Reybold, GPhA, to get as much information as possible for the August meeting.

Inquiry Regarding Technician Education: Ms. Battle reminded the Board about this matter that was tabled from the June meeting. The Board had previously requested staff inquire with NABP. The response from NABP was provided to the Board. The Board recommended tabling this information until the August meeting.

Election of Officers: Mr. Faulk stated that the Board needed to elect new officers for the Board for the remainder of the 2018 year. Vicki Arnold made a motion to elect Bill Prather as President. Lisa Harris seconded and the Board voted unanimously in favor of the motion. Lisa Harris made a motion for Vicki Arnold to serve as Cognizant and Vice-President. Michael Brinson seconded and the Board voted unanimously in favor of the motion.

Mr. Faulk commented that Laird Miller, Chris Jones, and Jim Bracewell did an exemplary job as members of the Board and stated that he was thankful for their service.

Bob Warnock made a motion and Lisa Harris seconded, and the Board voted to enter into **Executive Session** in accordance with O.C.G.A. § 43-1-19(h)(2) and § 43-1-2(k) 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 Vicki Arnold, Michael Brinson, Mike Faulk, Lisa Harris, Hal Henderson, and Bob Warnock.

Executive Session

Appearances

- N.I.
- K.D.T.
- G.A.T.
- S.K.H.

Georgia Drugs and Narcotics Agency – Dennis Troughton

Director Troughton discussed the following case:

- C.P./C.P./S.S./R.N./U.U./D.J./C.M.

Cognizant's Report – Dennis Troughton

- GDNA Case # B-32422
- GDNA Case # A-32460
- GDNA Case # B-32453
- GDNA Case # A-32295
- GDNA Case # T-32564
- GDNA Case # T-32565
- GDNA Case # T-32577
- GDNA Case # T-32590
- GDNA Case # A-32404
- GDNA Case # B-32505

- GDNA Case # B-32482
- GDNA Case # B-32483
- GDNA Case # A-32561
- GDNA Case # A-32562
- GDNA Case # B-32517
- GDNA Case # B-32415
- GDNA Case # B-32529
- GDNA Case # A-32296
- GDNA Case # A-32583
- GDNA Case # A-32573
- GDNA Case # B-32515
- GDNA Case # A-32584
- GDNA Case # A-32591
- GDNA Case # T-32580
- GDNA Case # T-32598
- GDNA Case # T-32596

Attorney General’s Report – Max Changus

The Board received legal advice regarding O.C.G.A. § 26-4-48 and O.C.G.A. § 50-18-70.

Mr. Changus presented the following consent orders for acceptance:

- I.P.C.
- T.L.P.

Executive Director’s Report – Tanja Battle

- M.J.S.

Legal Services – Kimberly Emm

- E.R.

Applications

- X.D.M.
- C.C.B.
- K.D.T.
- K.B.H.
- C.T.
- S.L.P.
- B.C.H.
- M.F.G.
- H.L.C.
- C.J.M.
- C.S.F.
- H.M.F.
- M.L.B.
- J.D.A.
- S.M.P.
- B.M.
- F.N.M.
- R.A.S.

- E.T.S.
- K.L.H.
- M.U.U.
- R.K.H.
- S.M.V.C.
- D.C.H.
- J.J.C.
- B.A.J.
- M.P.
- D.L.
- R.M.P.
- J.A.U.
- K.A.B.
- R.C.
- W.P.
- A.P.S.
- A.A.P.
- J.L.
- J.J.P.

Correspondences/Requests

- B.S.P.S.I.
- C.C.V.S.S.I.S.
- C.V.S.C.
- C.V.S.S.
- D.C.R.I.P.C.A.
- D.I.
- E.P.
- M.V.S.P.
- P.C.I.
- P.F.P.I.
- R.P.S.
- S.T.C.
- T.P.
- W.P.P.
- T.R.I.
- J.V.
- M.A.Z.
- R.B.T.
- R.L.D.
- R.R.P.
- A.A.L.
- J.A.D
- W.W.S.
- K.R.S.
- J.F.C.
- B.J.T.
- E.E.W.

- H.H.S.
- L.L.N.
- C.M.H.
- E.U.H.P.
- E.U.H.W.W.
- E.U.O.S.H.
- E.R.H.P.S.M.
- H.P.
- Q.R.D.I.
- W.M.H.P.
- S.C.A.P.
- M.A.D.
- G.K.

Miscellaneous

Ms. Battle spoke to the Board regarding the August practical examination.

No voted were taken in Executive Session. Mr. Faulk declared the meeting back in Open Session.

Open Session

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

Appearances

- | | | |
|----------|------------------------------|---|
| • N.I. | Pending Pharmacist Exam | Approve with letter of concern |
| • K.D.T. | Request to reinstate license | Refer to the Department of Law |
| • G.A.T. | Request to reinstate license | Table pending receipt of additional information |
| • S.K.H. | Denied Pharmacy Technician | Overtured denial and approved for registration |

Georgia Drugs and Narcotics Agency – Dennis Troughton

Director Troughton discussed the following case:

- C.P./C.P./S.S./R.N./U.U./D.J./C.M. Update provided

Cognizant’s Report – Dennis Troughton

- | | |
|-----------------------|---|
| • GDNA Case # B-32422 | Refer to the Department of Law |
| • GDNA Case # A-32460 | Close with a letter of concern |
| • GDNA Case # B-32453 | Close with a letter of concern |
| • GDNA Case # A-32295 | Close with a letter of concern |
| • GDNA Case # T-32564 | Revoke Technician Registration |
| • GDNA Case # T-32565 | Accept Voluntary Surrender of Technician Registration |
| • GDNA Case # T-32577 | Revoke Technician Registration |
| • GDNA Case # T-32590 | Accept Voluntary Surrender of Technician Registration |
| • GDNA Case # A-32404 | Close with a letter of concern |
| • GDNA Case # B-32505 | Close and forward complaint to the SC Board of Pharmacy |
| • GDNA Case # B-32482 | Close with no action |
| • GDNA Case # B-32483 | Close with a letter of concern |

- GDNA Case # A-32561 Refer to the Department of Law
- GDNA Case # A-32562 Refer to the Department of Law
- GDNA Case # B-32517 Misfill Policy #2
- GDNA Case # B-32415 Refer to the Department of Law
- GDNA Case # B-32529 Close with no action
- GDNA Case # A-32296 Table
- GDNA Case # A-32583 Refer to the Department of Law
- GDNA Case # A-32573 Refer to the Department of Law
- GDNA Case # B-32515 Close with a letter of concern
- GDNA Case # A-32584 Schedule Investigative Interview
- GDNA Case # A-32591 Accept Private Interim Consent Order for Assessment
- GDNA Case # T-32580 Revoke Technician Registration and schedule investigative interview with the PIC and supervisor.
- GDNA Case # T-32598 Accept Voluntary Surrender of Technician Registration
- GDNA Case # T-32596 Revoke Technician Registration

Attorney General's Report – Max Changus

The Board received legal advice regarding O.C.G.A. § 26-4-48 and O.C.G.A. § 50-18-70.

Mr. Changus presented the following consent orders for acceptance:

- I.P.C. Private Consent Order accepted
- T.L.P. Private Consent Order accepted

Executive Director's Report – Tanja Battle

- M.J.S. Pharmacist Intern Send letter of concern

Legal Services – Kimberly Emm

- E.R. Revoke Technician Registration

Applications

- Xavier D. Morgan Pharmacy Technician Approved for registration
- Cheqweia C. Bullard Pharmacy Technician Approved for registration
- K.D.T. Pharmacy Technician Approved with a letter stating the Board is not waiving its right to take disciplinary action should the final disposition of the criminal case result in a conviction.
- Kelsie B. Harris Pharmacy Technician Approved for registration
- Christopher Thomas Pharmacy Technician Approved for registration
- S.L.P. Pharmacy Technician Table pending receipt of additional information
- B.C.H. Pharmacy Technician Denied registration
- Marco F. Guzman Pharmacy Technician Approved for registration
- Heather L. Clark Pharmacy Technician Approved for registration
- Chaundra J. Marshall Pharmacy Technician Approved for registration
- Crystal S. Franklin Pharmacy Technician Approved for registration
- H.M.F. Pharmacy Technician Denied registration
- Marshall L. Britt, Jr. Pharmacy Technician Approved for registration

• J.D.A.	Pharmacist Exam	Approved to sit for the exam
• S.M.P.	Pharmacist Exam	Approved to sit for the exam
• B.M.	Pharmacist Exam	Approved to sit for the exam
• F.N.M.	Pharmacist Reciprocity	Approved to sit for the exam
• R.A.S.	Pharmacist Reciprocity	Approved to sit for the exam
• Emilyn T. Swales	Pharmacist Reinstatement	Approved application
• Kathryn L. Harris	Pharmacist Reinstatement	Approved application
• Martin U. Ugwu	Pharmacist Reinstatement	Approved application
• Ralph K. Hunt	Pharmacist Reinstatement	Approved application
• S.M.V.C.	Pharmacist Reinstatement	Schedule Investigative Interview
• D.C.H.	Temporary Pharmacist	Denied application
• J.J.C.	Pharmacist Licensee	Refer to the Department of Law
• B.A.J.	Pharmacist Exam	Approved to sit for the exam
• M.P.	Pharmacist Licensee	Refer to the Department of Law
• D.L.	Pharmacist Intern Extension Req	Approved request
• R.M.P.	Pharmacist Intern Extension Req	Approved request
• J.A.U.	Pharmacist Intern	Approve with letter of concern
• Krishan A. Bajnath	Pharmacist Intern	Approved application
• Ricky Chan	Pharmacist Intern	Approved application
• W.P.	Pharmacist Intern	Approved application
• Alix P. Schnibben	Pharmacist Certification of DTM	Approved application
• Allison A. Presnell	Pharmacist Certification of DTM	Approved application
• Jiehyun Lee	Pharmacist Certification of DTM	Approved application
• Julianne J. Padgett	Pharmacist Certification of DTM	Approved application

Correspondences/Requests

• B.S.P.S.I.	Notice of Discipline	No action
• C.C.V.S.S.I.S.	Notice of Discipline	No action
• C.V.S.C.	Notice of Discipline	No action
• C.V.S.S.	Notice of Discipline	No action
• D.C.R.I.P.C.A.	Notice of Discipline	Table pending receipt of additional information
• D.I.	Notice of Discipline	No action
• E.P.	Notice of Discipline	No action
• M.V.S.P.	Notice of Discipline	No action
• P.C.I.	Notice of Discipline	Refer to the Department of Law
• P.F.P.I.	Notice of Discipline	No action
• R.P.S.	Notice of Discipline	No action
• S.T.C.	Notice of Discipline	No action
• T.P.	Notice of Discipline	No action
• W.P.P.	Notice of Discipline	No action
• T.R.I.	Notice of Discipline	No action
• J.V.	Request to take MPJE a 4 th time	Approved request
• M.A.Z.	Request to retake NAPLEX before the 45-day wait period	Approved request
• R.B.T.	Appealing the Board's denial of request to retake NAPLEX a 4 th time.	Uphold denial

- R.L.D. Appealing the Board’s denial of request to retake NAPLEX a 4th time. Uphold denial
- R.R.P. Request regarding August 2nd practical exam Denied request
- A.A.L. Appearance request Approved request
- J.A.D. Request to terminate probation Approved request
- W.W.S. Request to reinstate license Approved request
- K.R.S. Request to terminate consent order Approved request
- J.F.C. Request regarding employment Approved request for G.C.P./Tabled request for R.C.P.
- B.J.T. Self-Report No action
- E.E.W. Response to letter of concern No action
- H.H.S. Request regarding CE Approved request
- L.L.N. CE course for misfill school Denied request
- C.M.H. Remote order entry Table pending receipt of additional information
- E.U.H.P. Remote order entry Table pending receipt of additional information
- E.U.H.W.W. Remote order entry Table pending receipt of additional information
- E.U.O.S.H. Remote order entry Table pending receipt of additional information
- E.R.H.P.S.M. Remote order entry Table pending receipt of additional information
- H.P. Request for reconsideration Uphold denial
- Q.R.D.I. Request to install drive-thru Approved request
- W.M.H.P. Emergency Service Provider Contract The Board viewed this correspondence for informational purposes only.
- S.C.A.P. Voluntary Recall The Board viewed this correspondence for informational purposes only.
- M.A.D. Request to take the practical a 4th time Approved request
- G.K. Request to take NAPLEX a 4th time Denied request and application

Miscellaneous

Ms. Battle spoke to the Board regarding the August practical examination.

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 5:31 p.m.

The next meeting of the Georgia Board of Pharmacy is scheduled for Wednesday, August 1, 2018 at 9:00 a.m. at the Philadelphia College of Osteopathic Medicine (PCOM), 625 Old Peachtree Rd, NW, Suwanee, GA 30024.

Minutes recorded by Brandi Howell, Business Support Analyst I
 Minutes edited by Tanja D. Battle, Executive Director