

	2013	2014	2015	Dec-15
Administrative Filings	37	52	31	2
Criminal Filing/Felony	3	0	2	1
Letter of Concern	60	146	95	3
Referred to Diversion	1	2	0	0
PR/Outreach	3	4	1	0
Cases Received	710	567	614	52
Case Assigned	676	555	607	52
Closed Cases	731	595	577	47
Citations Issued	103	60	60	4
Pharmacy Inspections	225	335	287	29
Pharmacy Alerts	191	261	200	20
Dr. Shopper Letters	209	571	1122	129

NOTES: Pharmacy Group

Administrative/Criminal

Pharmacy Technician forged prescriptions to obtain quantities of controlled substance, Alprazolam, and Adderall, for his own use. The Technician admitted to taking a valid prescription and photoshopping the prescription to create multiple forged prescriptions. The Technician signed a Surrender Stipulation and Order with the Division.

Administrative

Pharmacy Technician Trainee who was on probation, notified the Division that the Trainee wanted to Surrender the license to the Division since the Trainee no longer intended to comply with the terms and conditions of the probation. The Trainee signed a Surrender Stipulation and Order with the Division.

Citation

Citation was issued for a misfilled prescription by the pharmacy to the patient. The prescription was written for Hydrocodone-Acetaminophen 10/325 mg. It was misfilled for Oxycodone with Acetaminophen 10/325 mg. Fine is for \$1,020.

Citation

During a Random Inspection the following violation were found: 15 expired medications. Citation was issued with a \$1,050 fine.

Citation

During a Random Inspection the following violations were found: 25 expired medications; shelves were dirty; and the sink did not have running hot water; Pharmacy's annual controlled substance inventories for five years did not indicate the time the inventories were conducted, and 2011 and 2015 inventories did not indicate whether they were conducted at the opening or closing of business. Citation was issued with a \$1,050 fine.

Citation

During a Random Inspection the following violations were found: the license of a Pharmacy Technician was not posted or present in the pharmacy; Pharmacy Technician did not have a nametag; a total of 11 medications were found that were either expired or had indeterminate expiration dates; two had no expiration dates or lot numbers; the 12/31/2014 inventory had the following deficiencies: it was conducted over a year from the 2013 inventory; did not list the Schedule II controlled substances separately from the Schedule III, IV, and V controlled substance; and it was not dated by the PIC. Citation was issued with a \$1,050 fine.



State of Utah
Department of Commerce
Division of Occupational and Professional Licensing

New Item #1

GARY R. HERBERT
Governor

FRANCINE A. GIANI
Executive Director

MARK B. STEINAGEL
Division Director

VACCINE ADMINISTRATION PROTOCOL
Standing Order to Administer Immunizations and Emergency Medications

Approved March 27, 2012

The following pharmacist(s), according to and in compliance with Utah Code 58-17b-102 (16-17) and (56) (b-c) and Utah Code 58-17b-502 (9) of the Utah State Pharmacy Practice Act, may administer medications for a fee. Each below-mentioned pharmacist has completed training as prescribed in Utah Administrative Code R156-17b-621 of the Pharmacy Practice Act Rules.

To protect people from preventable infectious diseases, each pharmacist may administer the following immunizations to eligible patients for all appropriate ages, according to indications and contraindications recommended in current guidelines from the Advisory Committee on Immunization Practices (ACIP) of the U.S. Centers for Disease Control and Prevention (CDC) and local/state health departments.

Influenza	Hepatitis B	Tetanus-Diphtheria Toxoids
Hepatitis A	Meningococcal	Pneumococcal
Varicella	Herpes Zoster	Haemophilus Influenza type b
Measles-Mumps-Rubella	Human Papilloma Virus	
Inactivated Polio	Tetanus-Diphtheria Acellular Pertussis	

Striking through the name of any of the above vaccines will indicate deletion from this protocol. Additions must be submitted in writing to the Utah Division of Occupational and Professional Licensing (DOPL) for approval.

No pharmacist may delegate the administration of immunizations to another person, except for a licensed intern who has completed training as prescribed in Utah Administrative Code R156-17b-621 of the Pharmacy Practice Act Rules and who is practicing under the direct supervision of a pharmacist who has completed training as prescribed in Utah Administrative Code R156-17b-621 of the Pharmacy Practice Act Rules.

The pharmacy shall post in a prominent place an emergency plan to be implemented in case of an adverse event. Such plan shall include: the phone number of the local EMS, the phone number of the undersigned licensed practitioner, and the roles of the pharmacist and other participants.

In the course of treating adverse events following immunization, the pharmacist is authorized to administer:

- epinephrine (at a dose of approximately 0.01mg/kg body weight; maximum of 0.5mg per dose) and
- diphenhydramine (at a dose of approximately 1.0mg/kg; maximum dose of 50-100mg per dose) by appropriate routes pending availability of emergency medical services.

The pharmacist may provide cardiopulmonary resuscitation as needed.

For adverse events, the pharmacist shall complete and submit the Vaccine Adverse Event Reporting System (VAERS) form to the CDC, the undersigned licensed practitioner, and the patient's primary care practitioner, if known.

In the course of immunizing, the pharmacist shall maintain perpetual records of all immunizations administered, including: patient name; primary care practitioner (if known); vaccination date; name, address, title of administering pharmacist; name of vaccine; manufacturer; and lot number. Before immunization, all vaccine candidates will be questioned regarding previous adverse events after immunization, food or drug allergies, current health conditions, recent receipt of blood or antibody products, immunosuppression, pregnancy, and underlying diseases.

All vaccine candidates will be informed of the specific benefits and risks of the vaccine(s) offered. Each pharmacist participating in a vaccine immunization collaborative practice agreement will obtain training related to the study of immunizations and associated patient care as described in R156-17b-621.

The pharmacist shall report administered immunizations to the Utah State Immunization Information System (USIIS) electronic registry. Updates to the USIIS registry will be completed within one week of any vaccine administered. Register for UCIIS:
http://www.usiis.org/howtoparticipate_provider.shtml.

As the authorizing licensed practitioner, I will periodically review (not less than annually) the activities of the pharmacist(s) administering vaccines under this protocol and deem authorization valid one year from the date indicated below, unless otherwise revoked or extended in writing.

Pharmacist: License Number: _____ Pharmacist: License Number: _____

Pharmacist: License Number: _____ Pharmacist: License Number: _____

Pharmacist: License Number: _____ Pharmacist: License Number: _____

Licensed Practitioner Name: _____

Licensed Practitioner Signature: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Practitioner License Number: _____ State _____

Prescription Order to Administer Immunizations and Emergency Medications

Pharmacist(s), according to and in compliance with Utah Code 58-17b-102 (56)(c) and Utah Code 58-17b-502 (9) of the Utah State Pharmacy Practice Act who have completed training as prescribed in Utah Administrative Code R156-17b-621 of the Pharmacy Practice Act Rules, may administer medications for a fee.

To protect people from preventable infectious diseases, pharmacist(s) may administer, pursuant to a prescription from a licensed prescriber, any immunization(s) that are not listed in the current VACCINE PROTOCOL: Standing Order to Administer Immunizations and Emergency Medications. This protocol is approved by the Division, in collaboration with the Pharmacy Board and the Physician's Licensing Board, created in Section 58-67-201 according to indications and contraindications recommended in current guidelines from the Advisory Committee on Immunization Practices (ACIP) of the U.S. Centers for Disease Control and Prevention (CDC) and local/state health departments

No pharmacist may delegate the administration of immunizations to another person, except for a licensed intern who has completed training as prescribed in Utah Administrative Code R156-17b-621 of the Pharmacy Practice Act Rules and who is practicing under the direct supervision of a pharmacist who has completed training as prescribed in Utah Administrative Code R156-17b-621 of the Pharmacy Practice Act Rules.

The pharmacy shall post in a prominent place an emergency plan to be implemented in case of an adverse event. Such plan shall include: the phone number of the local EMS, and the roles of the pharmacist and other participants.

In the course of treating adverse events following immunization, the pharmacist is authorized to administer:

-epinephrine (at a dose of approximately 0.01mg/kg body weight; maximum of 0.5mg per dose) and

-diphenhydramine (at a dose of approximately 1.0mg/kg; maximum dose of 50-100mg per dose) by appropriate routes pending availability of emergency medical services.

The pharmacist may provide cardiopulmonary resuscitation as needed.

For adverse events the pharmacist shall complete and submit the Vaccine Adverse Event Reporting System (VAERS) form to the CDC and the patient's primary care practitioner, if known.

In the course of immunizing, the pharmacist must maintain perpetual records of all immunizations administered including patient name; primary care practitioner (if known); vaccination date; name, address, title of pharmacist administering; name of vaccine; manufacturer; lot number. Before immunization, all vaccine candidates will be questioned regarding previous adverse events after immunization, food or drug allergies, current health conditions, recent receipt of blood or antibody products, immunosuppression, pregnancy, and underlying diseases. All vaccine candidates will be informed of the specific benefits and risks of the vaccine(s) offered.

Pharmacist(s) shall report administered vaccines to the Utah State Immunization Information System (USIIS) electronic registry. Updates to the USIIS registry will be completed within one week of any vaccine administered. Register for USIIS: http://www.usiis.org/howtoparticipate_provider.shtml



R156-17b-614a. Operating Standards - General Operating Standards, Class A and B Pharmacy.

(1) In accordance with Subsection 58-17b-601(1), the following operating standards apply to all Class A and Class B pharmacies, which may be supplemented by additional standards defined in this rule applicable to specific types of Class A and B pharmacies. The general operating standards include:

- (a) shall be well lighted, well ventilated, clean and sanitary;
- (b) if transferring a drug from a manufacturer's or distributor's original container to another container, the dispensing area, if any, shall have a sink with hot and cold culinary water separate and apart from any restroom facilities. This does not apply to clean rooms where sterile products are prepared. Clean rooms should not have sinks or floor drains that expose the area to an open sewer. All required equipment shall be clean and in good operating condition;
- (c) be equipped to permit the orderly storage of prescription drugs and durable medical equipment in a manner to permit clear identification, separation and easy retrieval of products and an environment necessary to maintain the integrity of the product inventory;
- (d) be equipped to permit practice within the standards and ethics of the profession as dictated by the usual and ordinary scope of practice to be conducted within that facility;
- (e) be stocked with the quality and quantity of product necessary for the facility to meet its scope of practice in a manner consistent with the public health, safety and welfare; and
- (f) if dispensing controlled substances, be equipped with a security system to:
 - (i) permit detection of entry at all times when the facility is closed; and
 - (ii) provide notice of unauthorized entry to an individual; and
- (g) be equipped with a lock on any entrances to the facility where drugs are stored.

(2) The temperature of the pharmacy shall be maintained within a range compatible with the proper storage of drugs. If a refrigerator or freezer is necessary to properly store drugs at the pharmacy, the pharmacy shall keep a daily written or electronic log of the temperature of the refrigerator or freezer on days of operation. The pharmacy shall retain each log entry for at least three years.

(3) Facilities engaged in simple, moderate or complex non-sterile or any level of sterile compounding activities shall be required to maintain proper records and procedure manuals and establish quality control measures to ensure stability, equivalency where applicable and sterility. The following requirements shall be met:

- (a) shall follow USP-NF Chapter 795, compounding of non-sterile preparations, and USP-NF Chapter 797 if compounding sterile preparations;
- (b) may compound in anticipation of receiving prescriptions in limited amounts;
- (c) bulk active ingredients shall:
 - (i) be procured from a facility registered with the federal Food and Drug Administration; and
 - (ii) not be listed on the federal Food and Drug Administration list of drug products withdrawn or removed from the market for reasons of safety or effectiveness;

(d) All facilities that dispense prescriptions must comply with the record keeping requirements of their State Boards of Pharmacy. When a facility compounds a preparation according to the manufacturer's labeling instructions, then further documentation is not required. All other compounded preparations require further documentation as described in this section.

[(d)]e) a [master worksheet sheet] master formulation record shall be approved by a pharmacist or DMP for each batch of sterile or non-sterile pharmaceuticals to be prepared. Once

approved, a duplicate of the ~~[master worksheet sheet]~~ master formulation record shall be used as the ~~[preparation worksheet sheet]~~ compounding record from which each batch is prepared and on which all documentation for that batch occurs. The ~~[master worksheet sheet]~~ master formulation record may be stored electronically and shall contain at a minimum:

- (i) ~~[the formula]~~ official or assigned name;
- (ii) ~~[the components]~~ strength;
- (iii) ~~[the compounding directions]~~ dosage form of the preparation;
- (iv) ~~[a sample label information]~~ calculations needed to determine and verify quantities of components and doses of active pharmaceutical ingredients;
- (v) ~~[evaluation and testing requirements]~~ description of all ingredients and their quantities;
- (vi) ~~[sterilization methods, if applicable]~~ compatibility and stability information, including references when available;
- (vii) ~~[specific equipment used during preparation such as specific compounding device]~~ equipment needed to prepare the preparation;
- (viii) ~~[storage requirements;]~~ mixing instructions shall include:
 - a. order of mixing;
 - b. mixing temperatures or other environmental controls;
 - c. duration of mixing; and
 - d. other factors pertinent to the replication of the preparation as compounded.
- (ix) sample labeling information, which shall contain, in addition to legally required information:
 - a. generic name and quantity or concentration of each active ingredient
 - b. assigned beyond use date
 - c. storage conditions
 - d. prescription or control number, whichever is applicable;
- (x) container used in dispensing;
- (xi) packaging and storage requirements;
- (xii) description of final preparation; and
- (xiii) quality control procedures and expected results.

~~[e] f~~ a ~~[preparation worksheet sheet]~~ compounding record for each batch of sterile or non-sterile pharmaceuticals shall document the following:

- (i) ~~[identity of all solutions and ingredients and their corresponding amounts, concentrations, or volumes]~~ official or assigned name;
- (ii) ~~[manufacturer lot number for each component]~~ strength and dosage of the preparation;
- (iii) ~~[component manufacturer or suitable identifying number]~~ Master Formulation Record reference for the preparation;
- (iv) ~~[container specifications (e.g. syringe, pump cassette)]~~ names and quantities of all components;
- (v) ~~[unique lot or control number assigned to batch]~~ sources, lot numbers, and expiration dates of components;
- (vi) ~~[beyond use date of batch prepared products]~~ total quantity compounded;
- (vii) ~~[date of preparation]~~ name of the person who prepared the preparation;
- (viii) ~~[name, initials or electronic signature of the person or persons involved in the preparation]~~ name of the compounder who approved the preparation;

(ix) [~~names, initials or electronic signature of the responsible pharmacist or DMP~~] name of the person who performed the quality control procedures;

(x) [~~end product evaluation and testing specifications, if applicable; and~~] date of preparation;

(xi) [~~comparison of actual yield to anticipated yield, when appropriate~~] assigned control, if for anticipation of use or prescription number, if patient specific, whichever is applicable;

(xii) assigned beyond use date;

(xiii) duplicate label as described in the Master Formulation Record means the sample labeling information that is dispensed on the final product given to the patient and shall at minimum contain:

(A) active ingredients;

(B) beyond-use-date;

(C) storage conditions; and

(D) lot number.

(xiv) proof of the duplicate labeling information shall be kept at the pharmacy and shall be immediately retrievable. There shall be an audit trail for any altered form. Proof shall be reproduced in:

(A) the original format that was dispensed;

(B) an electronic format; or

(C) a scanned electronic version.

(xv) description of final preparation;

(xvi) results of quality control procedures (e.g., weight range of filled capsules, pH of aqueous liquids); and

(xvii) documentation of any quality control issues and any adverse reactions or preparation problems reported by the patient or caregiver.

(fg) the label of each batch prepared of sterile or non-sterile pharmaceuticals shall bear at a minimum:

(i) the unique lot number assigned to the batch;

(ii) all active solution and ingredient names, amounts, strengths and concentrations, when applicable;

(iii) quantity;

(iv) beyond use date and time, when applicable;

(v) appropriate ancillary instructions, such as storage instructions or cautionary statements, including cytotoxic warning labels where appropriate; and

(vi) device-specific instructions, where appropriate;

(h) all prescription labels for compounded sterile and non-sterile medications when dispensed to the ultimate user or agent shall bear at a minimum in addition to what is required in UCA 58-17b-602L the following.

(i) generic name and quantity or concentration of each active ingredient. In the instance of a sterile preparation for parenteral use, labeling shall include the name and base solution for infusion preparation.

(ii) assigned compounding record or lot number.

(iii) "this is a compounded preparation" or similar language shall be indicated.

(gi) the beyond use date assigned shall be based on currently available drug stability information and sterility considerations or appropriate in-house or contract service stability testing;

- (i) sources of drug stability information shall include the following:
 - (A) references can be found in Trissel's "Handbook on Injectable Drugs", 17th Edition, October 31, 2012;
 - (B) manufacturer recommendations; and
 - (C) reliable, published research;
 - (ii) when interpreting published drug stability information, the pharmacist or DMP shall consider all aspects of the final sterile product being prepared such as drug reservoir, drug concentration and storage conditions; and
 - (iii) methods for establishing beyond use dates shall be documented; and
 - (~~h~~j) there shall be a documented, ongoing quality control program that monitors and evaluates personnel performance, equipment and facilities that follows the USP-NF Chapters 795 and 797 standards.
- (4) The facility shall have current and retrievable editions of the following reference publications in print or electronic format and readily available and retrievable to facility personnel:
- (a) Title 58, Chapter 1, Division of Occupational and Professional Licensing Act
 - (b) R156-1, General Rule of the Division of Occupational and Professional Licensing;
 - (c) Title 58, Chapter 17b, Pharmacy Practice Act;
 - (d) R156-17b, Utah Pharmacy Practice Act Rule;
 - (e) Title 58, Chapter 37, Utah Controlled Substances Act;
 - (f) R156-37, Utah Controlled Substances Act Rule;
 - (g) Title 58, Chapter 37f, Controlled Substance Database Act;
 - (h) R156-37f, Controlled Substance Database Act Rule;
 - (i) Code of Federal Regulations (CFR) 21, Food and Drugs, Part 1300 to end or equivalent such as the USP DI Drug Reference Guides;
 - (j) current FDA Approved Drug Products (orange book); and
 - (k) any other general drug references necessary to permit practice dictated by the usual and ordinary scope of practice to be conducted within that facility.
- (5) The facility shall maintain a current list of licensed employees involved in the practice of pharmacy at the facility. The list shall include individual licensee names, license classifications, license numbers, and license expiration dates. The list shall be readily retrievable for inspection by the Division and may be maintained in paper or electronic form.
- (6) Facilities shall have a counseling area to allow for confidential patient counseling, where applicable.
- (7) A pharmacy shall not dispense a prescription drug or device to a patient unless a pharmacist or DMP is physically present and immediately available in the facility.
- (8) Only a licensed Utah pharmacist, DMP or authorized pharmacy personnel shall have access to the pharmacy when the pharmacy is closed.
- (9) The facility or parent company shall maintain a record for not less than 5 years of the initials or identification codes that identify each dispensing pharmacist or DMP by name. The initials or identification code shall be unique to ensure that each pharmacist or DMP can be identified; therefore identical initials or identification codes shall not be used.
- (10) The pharmacy facility shall maintain copy 3 of DEA order form (Form 222) that has been properly dated, initialed and filed and all copies of each unaccepted or defective order form and any attached statements or other documents.
- (11) If applicable, a hard copy of the power of attorney authorizing a pharmacist, DMP,

or DMP designee to sign DEA order forms (Form 222) shall be available to the Division whenever necessary.

(12) A pharmacist, DMP or other responsible individual shall verify that controlled substances are listed on the suppliers' invoices and were actually received by clearly recording their initials and the actual date of receipt of the controlled substances.

(13) The pharmacy facility shall maintain a record of suppliers' credit memos for controlled substances.

(14) A copy of inventories required under Section R156-17b-605 shall be made available to the Division when requested.

(15) The pharmacy facility shall maintain hard copy reports of surrender or destruction of controlled substances and legend drugs submitted to appropriate state or federal agencies.

(16) If the pharmacy does not store drugs in a locked cabinet and has a drop/false ceiling, the pharmacy's perimeter walls shall extend to the hard deck, or other measures shall be taken to prevent unauthorized entry into the pharmacy.



R156-37-305. Qualifications for Licensure- Drug Enforcement Administration (DEA) registration.

(1) An applicant for a controlled substance license, except those applicants described in subsection (3) below, shall obtain an individual practitioner DEA registration, within 120 days of the date a controlled substance license is granted.

(2) If an applicant or licensee does not obtain an individual practitioner DEA registration within 120 days of the date a controlled substance license is granted, the controlled substance license shall be immediately terminated, without any further notice, opportunity to be heard, or administrative process, for the applicant or licensee.

(3) Any applicant who obtains the prior written consent of his or her employer to use the employer's hospital or institution DEA registration to administer and/or prescribe controlled substances, is not required to obtain an individual practitioner DEA registration. Any such prior written consent must be provided immediately to the division.

[The current administrative rule that is numbered as R156-37-305-- "Exemption from Licensure-Animal Euthanasia and Law Enforcement Personnel"-- would be renumbered as R156-37-306, as the DEA registration section described above more naturally fits before the exemption subsection].



National Association of Boards of Pharmacy Foundation

1600 Feehanville Drive • Mount Prospect, IL 60056
 Tel: 847/391-4406 • Fax: 847/391-4502
 Web Site: www.nabp.net

State Board Newsletter Program Letter of Agreement

This Letter of Agreement is entered into between the National Association of Boards of Pharmacy Foundation[®] ("NABPF[®]") and the Utah Board of Pharmacy ("Board") and sets forth the terms and conditions for the Board's participation in the NABPF State Board Newsletter Program.

The Parties agree to the following terms and conditions:

1. Board requests that NABPF produce a newsletter on its behalf, in either electronic or paper format as designated by the Board, through the NABPF State Board Newsletter program.
2. Board agrees to provide NABPF with the content, articles and text ("Copy") for its State Board Newsletter ("Newsletter") in electronic format suitable for word processing. In the event that Board provides NABPF with licensure disciplinary information for publication in the Newsletter such as licensure revocation, suspension, or probation actions, Board agrees to provide NABPF with any licensure restoration or licensure reinstatement information that corresponds to the previously revoked, suspended, or probationary licenses.
3. Board agrees that during the term of this Agreement, it will submit Copy to NABPF on or before the first of the month prior to the issue month for each paper Newsletter or, if the Board utilizes an electronic Newsletter, on or before the fifteenth of the month prior to the issue month for each electronic Newsletter.
4. NABPF produces the Newsletter to include national news and information that NABPF deems relevant for the state newsletters.
5. NABPF agrees to typeset, format, and proofread the Copy and place the Newsletter on the NABPF Web site, www.nabp.net. The Parties agree that NABPF staff will correct "typos" it discovers, such as misspellings or grammatical errors, but will not make substantive edits to the Copy without the prior authorization of the Board.
6. For Newsletter distribution purposes, as applicable, Board agrees to provide NABPF with the current list of recipients' mailing addresses, or e-mail addresses if the Board utilizes an electronic newsletter, in a form to be agreed to by the Parties but not less than 30 days prior to the issue month for **each** Newsletter. If such a list is not timely provided, NABPF will use the most recently submitted list of recipient addresses or e-mail addresses. The parties agree that recipient contact information may be used for professional and public health purposes including, but not limited to, pharmacy practice surveys and disaster/emergency call lists.
7. NABPF, in its sole discretion, determines the national news and formatting for the Newsletter and reserves the right to exclude Copy that NABPF deems unsuitable for the Newsletter.
8. NABPF contracts with a vendor to assist in the production of the paper newsletters, including such tasks as printing, folding, adding inserts if applicable, addressing if applicable, and mailing as applicable. Such activities are not necessary for the production of electronic Newsletters.
9. NABPF prepared a reference guide for the Board that projects the costs to prepare the Newsletter as of July 1, 2015. Such costs are estimations of what NABPF incurs to prepare the Newsletter through June 30, 2016; however, NABPF will invoice the Board for NABPF's actual costs. This reference guide, entitled "State Board

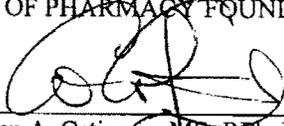
Newsletter Estimated Expenses” is attached to and incorporated herein as “Expense Sheet.” On an annual basis, NABPF will send the Board a new Expense Sheet, which projects the costs to prepare the Newsletter for the next 12 month period (July 1st through June 30th).

10. The Board acknowledges that NABPF uses good faith efforts to limit the amount and frequency of any Newsletter cost increases to those that are reasonably necessary to provide the services described in the Agreement; however, NABPF cannot control vendor fee increases such as US postal service fees. In the interest of informing the Board regarding possible Newsletter preparation fee increases for the remainder of the term of this Agreement, NABPF estimates that the Expense Sheet costs will not be increased more than an average of 5% annually over the term of the Agreement. Upon publication of each Newsletter, NABPF will prepare an invoice for the actual costs to produce the Newsletter and send it to the Board. Board agrees to pay NABPF for its participation in the State Board of Pharmacy Newsletter Program within thirty (30) days of receipt of such invoice. If the Board does not timely pay all charges, NABPF will cancel further production of the Newsletter.
11. Board represents and warrants that the Copy it provides to NABPF for inclusion in the Newsletter will be accurate, true, and original, will not violate any copyright or other right of any person or entity (including, but not limited, to rights of privacy or publicity), and will not libel or otherwise portray in a false light any person or entity.
12. Board agrees to read and adhere to the concepts, principles, and stipulations contained in the State Newsletter Program Editorial and Production Guidelines sheet, which is attached to and incorporated herein as “Guidelines.” NABPF will publish the Newsletter online in a downloadable file that includes a masthead featuring the NABP seal, the state seal, the name of the state board of pharmacy, and address of the board office.
13. Board requests that the following official title of the agency to be used on the standardized masthead: Utah Board of Pharmacy.
14. Board agrees to provide NABPF with a 300dpi, 3x3 inch electronic image of the State (or territorial) seal in JPG, TIFF, or EPS format, if it has not already been provided to NABPF for use on the Newsletter masthead.
15. To the greatest extent possible under applicable law, Board shall indemnify NABPF and its agents, director, and employees against any loss, expense, or damage, including reasonable attorney’s fees, occasioned by any claim, demand, suit, or recovery arising from the breach of any of the foregoing representations and warranties or from any claim of infringement of copyright or proprietary right or from any claim of libel, false light, or invasion of privacy based upon anything contained in Copy that Board provides to NABPF for inclusion in the Newsletter; provided, however, that the Board shall not be liable for any content or text written by the NABPF. In no event shall NABPF be responsible for or liable to the Board or any third party for Copy that Board provides to NABPF.
16. Notwithstanding anything here and before to the contrary, either Party may cancel the Agreement upon sixty (60) days prior written notice to the Party.
17. NABPF will send the agreed upon quantity of Newsletters to the Board at the following address: PO Box 146741, Salt Lake City, UT 84114-6741.
18. The Parties agree that the term of this Agreement begins on July 1, 2015 and terminates on July 1, 2016.
19. This Agreement may not be amended or revised unless agreed to in writing by the Parties.

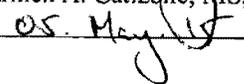
The undersigned warrant that they are authorized representatives of their respective organizations and that they are authorized to enter into this Agreement and bind their respective organizations to its terms and conditions.

NATIONAL ASSOCIATION OF
BOARDS OF PHARMACY FOUNDATION

Utah Board of Pharmacy

By: 
Carmen A. Catizone, MS, RPh, DPh

By: _____
Printed name/title

Date  _____

_____ Date

STATE BOARD NEWSLETTER ESTIMATED EXPENSES
July 2015-June 2016

Utah E-Newsletter – Four Issues Per Year
 Total Quantity Printed: N/A
 Quantity Sent Bulk Mail: N/A

**PRODUCTION
 AND
 POSTING**

Costs are estimated for a four-page *Newsletter*. Information about costs for *Newsletters* with additional pages can be obtained by contacting the NABP Communications department.

ACTIVITY	COST PER ISSUE	COST PER YEAR (4 ISSUES)
Layout/Typesetting (\$80)	\$80	\$320
Web Hosting Fees (\$75)	\$75	\$300
TOTAL	\$155	\$620

**EMAILING/LIST
 MAINTENANCE**

Email sent to subscribers each time *Newsletter* is posted. Board can request email contact list at any time.

ACTIVITY	COST PER ISSUE	COST PER YEAR (4 ISSUES)
List Maintenance	\$0	\$0
Email Alert	\$0	\$0
TOTAL	\$0	\$0

**TOTAL FOR PRODUCTION,
 POSTING, AND EMAILING**
 Total charges will vary based on the number of pages posted.

COST PER ISSUE	COST PER YEAR (4 ISSUES)
\$155	\$620

BOARD OF PHARMACY TO FURNISH:

- Typed copy for *Newsletter* (sent via email)
- Reproduction of state seal for masthead
- Official title for *Newsletter* masthead
- List of emails (optional)

NABP FOUNDATION TO FURNISH:

- Guidelines for *Newsletter* publication
- Editorial assistance
- Typesetting and layout
- Production supervision
- Email list management (optional)
- Email alert (optional)

State Newsletter Program

Editorial and Production Guidelines

The following guidelines summarize the schedule for the State Newsletter Program. The information specifies the months in which state boards are scheduled to produce newsletters, the deadlines for state boards to provide mailing list updates to NABP, and the deadlines for state boards to submit copy to NABP staff. State boards are encouraged to retain this information for future reference. Please note that those boards who only produce the e-newsletter can submit copy on the 15th instead of the 1st.

First Month of the Quarter

Scheduled States:

Alaska (e-newsletter; runs in January, April, and July), Arizona (e-newsletter), Louisiana (e-newsletter), Massachusetts (e-newsletter), Minnesota (e-newsletter), Montana (e-newsletter + printed), Nevada, New Jersey (e-newsletter), North Carolina (e-newsletter), Oklahoma (e-newsletter), South Dakota, and Washington (e-newsletter).

<u>Issue Month</u>	<u>Newsletter Copy/ Mailing List Deadline*</u>
January	December 1
April	March 1
July	June 1
October	September 1

*Those boards who produce e-newsletters may submit copy on the 15th instead of the 1st of the month.

Second Month of the Quarter

Scheduled States:

Alabama, Arkansas (e-newsletter), Delaware (e-newsletter), Guam (e-newsletter), Nebraska (runs in May and November), Ohio (e-newsletter), Oregon (e-newsletter + printed), South Carolina, Utah (e-newsletter), and Virginia (e-newsletter).

<u>Issue Month</u>	<u>Newsletter Copy/ Mailing List Deadline*</u>
February	January 1
May	April 1
August	July 1
November	October 1

*Those boards who produce e-newsletters may submit copy on the 15th instead of the 1st of the month.

Third Month of the Quarter

Scheduled States:

District of Columbia (e-newsletter), Idaho (e-newsletter + printed), Iowa, Kansas (e-newsletter), Kentucky (e-newsletter + printed), New Mexico (e-newsletter), North Dakota, Tennessee (e-newsletter), Vermont, West Virginia, and Wyoming.

<u>Issue Month</u>	<u>Newsletter Copy/ Mailing List Deadline*</u>
March	February 1
June	May 1
September	August 1
December	November 1

*Those boards who produce e-newsletters may submit copy on the 15th instead of the 1st of the month.



State of Utah
Department of Commerce

Division of Occupational and Professional Licensing

GARY R. HERBERT
Governor

FRANCINE A. GIANI
Executive Director

MARK B. STEINAGEL
Division Director

August 7, 2013

Re: Controlled Substance Prescriptions

This letter is being sent out as a courtesy to educate controlled substance prescribers and pharmacies regarding concerns found during routine pharmacy inspections conducted by DOPL Inspectors. The three most significant concerns are:

1. Schedule III-V prescriptions being filled without the prescriber's manual signature being attached to the prescription. Typically, inspectors are seeing a digital image of a signature attached to the prescription. Upon closer look at the signatures, pixilation can be seen, and by viewing several prescriptions at the same time the signatures appear to be identical. Most of the prescribers submitting these prescriptions have some type of e-prescribing system, but the prescriptions are being sent to the pharmacy by facsimile and do not meet the Utah Code requirements according to the definition of an electronic signature as outlined below:

- **"Electronic signature"** means a trusted, verifiable, and secure electronic sound, symbol, or process attached to or logically associated with a record and executed or adopted by a person with the intent to sign the record.

UCA 58-17b-102(27) (http://le.utah.gov/code/TITLE58/htm/58_17b010200.htm)

- Except for emergency situations designated by the division, a person may not issue, fill, compound, or dispense a prescription for a controlled substance **unless the prescription is signed by the prescriber in ink or indelible pencil or is signed with an electronic signature of the prescriber as authorized by division rule, and contains the following information:**

- (i) the name, address, and registry number of the prescriber;
- (ii) the name, address, and age of the person to whom or for whom the prescription is issued;
- (iii) the date of issuance of the prescription; and
- (iv) the name, quantity, and specific directions for use by the ultimate user of the controlled substance.

UCA 58-37-6(7)(d) (http://le.utah.gov/code/TITLE58/htm/58_37_000600.htm)

- Federal law also requires that an electronic prescription must be transmitted from the practitioner to the pharmacy in its electronic form. At no time may an intermediary convert an electronic prescription to another form (e.g., **facsimile**) for transmission.

21 CFR, Section 1311.170(f)

(http://www.deadiversion.usdoj.gov/21cfr/cfr/1311/subpart_c100.htm#170)

2. Incomplete controlled substance prescription records where information such as patient's address, age, and DEA number is missing. Inspectors have seen multiple incomplete controlled substance prescription records where information such as the patient's full name and address, age, and DEA registration number is missing. The minimum information required on a prescription can be found at:

- *UCA 58-17b-602* (http://le.utah.gov/code/TITLE58/htm/58_17b010200.htm)
- *UCA 58-37-6(7)(d)* (http://le.utah.gov/code/TITLE58/htm/58_37_000600.htm)
- *21 CFR, Section 1306.05(a)*
(http://www.deadiversion.usdoj.gov/21cfr/cfr/1306/1306_05.htm)

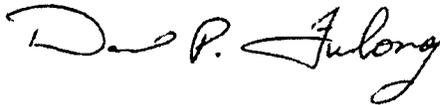
3. Each prescription for a controlled substance may contain only one controlled substance per prescription form and may not contain any other legend drug or prescription item. Please refer to:

- *UCA 58-37-6(7)(f)(vi)* (http://le.utah.gov/code/TITLE58/htm/58_37_000600.htm)

The Division's pharmacy website, <http://dopl.utah.gov/licensing/pharmacy.html>, may be useful to ensure you have a clear understanding of these and other statutes, rules, ethical and professional standards that apply to your practice.

Thank you for your assistance in complying with the State's laws and rules. If you have any questions email doplinvestigations@utah.gov or call 801-530-6630 to speak with a member of our pharmacy investigations team.

Sincerely,



David P. Furlong, Chief Investigator
Bureau of Investigation

Effective 7/1/2014

58-17b-602. Prescription orders -- Information required -- Alteration -- Labels -- Signatures -- Dispensing in pharmacies.

(1) Except as provided in Section 58-1-501.3, the minimum information that shall be included in a prescription order, and that may be defined by rule, is:

- (a) the prescriber's name, address, and telephone number, and, **if the order is for a controlled substance**, the patient's age and the prescriber's DEA number;
- (b) the patient's name and address or, in the case of an animal, the name of the owner and species of the animal;
- (c) the date of issuance;
- (d) the name of the medication or device prescribed and dispensing instructions, if necessary;
- (e) the directions, if appropriate, for the use of the prescription by the patient or animal and any refill, special labeling, or other instructions;
- (f) the prescriber's signature if the prescription order is written;
- (g) if the order is an electronically transmitted prescription order, the prescribing practitioner's electronic signature; and
- (h) if the order is a hard copy prescription order generated from electronic media, the prescribing practitioner's electronic or manual signature.**

Effective 5/13/2014

58-37-6 License to manufacture, produce, distribute, dispense, administer, or conduct research -- Issuance by division -- Denial, suspension, or revocation -- Records required -- Prescriptions.

(7)

- (d) Except for emergency situations designated by the division, a person may not issue, fill, compound, or **dispense a prescription for a controlled substance unless the prescription is signed by the prescriber in ink or indelible pencil or is signed with an electronic signature of the prescriber as authorized by division rule, and contains the following information:**
- (i) the name, address, and registry number of the prescriber;
 - (ii) the name, address, and age of the person to whom or for whom the prescription is issued;
 - (iii) the date of issuance of the prescription; and
 - (iv) the name, quantity, and specific directions for use by the ultimate user of the controlled substance.

