January 2014 News



# Louisiana Board of Pharmacy

Published to promote compliance of pharmacy and drug law

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#### Election of Board Officers (14-01-448)

During the November 6, 2013 Louisiana Board of Pharmacy meeting, the members conducted their annual election of officers, with the following results:

- ♦ Carl W. Aron, from Monroe, LA, in District 5 President
- ◆ T. Morris Rabb, from Monroe in District 5 First Vice President
- ♦ Marty R. McKay, from Woodworth, LA, in District 8 Second Vice President
- ♦ Chris B. Melancon, from Carencro, LA, in District 7 Third Vice President
- ♦ Brian A. Bond, from Jena, LA, in District 8 Secretary

# Board Meeting Dates for Calendar Year 2014 (14-01-449)

The Board has announced the following tentative meeting dates for calendar year 2014: February 12-13, May 7-8, August 13-14, and November 13-14. All meetings are planned for the Board office in Baton Rouge, LA.

### Board Member Appointments (14-01-450)

Appointments of members to the Board are made in accordance with La. R.S. 37:1175, which provides that whenever a vacancy occurs among the members representing one of the eight pharmacy districts, the pharmacists who are bona fide residents of the district in which the vacancy occurs shall nominate from among their number a representative to the Board. Whenever the vacancy shall occur by reason of an expiring term, the nominations shall be made by mail at least 60 days in advance of the expiration date of the term.

The Board's secretary is responsible for mailing a ballot by United States Postal Service First Class Mail to each pharmacist holding an active license and residing in the district in which the vacancy will occur at the last known address as indicated in the Board's records. The ballot or another enclosed communication will state the date, time, and place for counting ballots. At a gathering open to the public, the secretary and one or more persons designated by him will

open and count the ballots. The secretary will then certify to the governor the names of the three nominees in each district receiving the highest number of votes. For each district in which the vacancy will occur, the governor may appoint one of those three nominees to the Board.

The terms of five current Board members will expire on July 28, 2014. The ballots with the necessary information will be mailed to pharmacists in the respective pharmacy districts on or about March 17. The ballots will be opened and counted at the Board office on April 30 and May 1; information about the exact time will be included with the ballot.

Board member terms that will expire on July 28, 2014, and their districts are as follows.

- ◆ Jacqueline L. Hall: New Orleans, LA (District 2, composed of the parishes of Orleans, Plaquemines, and St Bernard).
- ♦ Richard A. Soileau: New Iberia, LA (District 3, composed of the parishes of Ascension, Assumption, Iberia, Iberville, Lafourche, St Charles, St James, St John the Baptist, St Martin, St Mary, Terrebonne, and West Baton Rouge).
- ◆ Carl W. Aron: Monroe (District 5, composed of the parishes of Caldwell, East Carroll, Franklin, Jackson, Lincoln, Madison, Morehouse, Ouachita, Richland, Tensas, Union, West Carroll, and Winn).
- ♦ Ronald E. Moore: Baton Rouge (District 6, composed of the parishes of East Baton Rouge, East Feliciana, Livingston, St Helena, Tangipahoa, Washington, and West Feliciana).
- ♦ Marty R. McKay: Woodworth (District 8, composed of the parishes of Allen, Avoyelles, Beauregard, Catahoula, Concordia, Evangeline, Grant, LaSalle, Pointe Coupee, Rapides, St Landry, and Vernon).

Should any pharmacist need a list of pharmacists in his or her own district for purposes related to this nomination election, the Board office will supply one complimentary list upon receipt of a written request by the pharmacist.

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# National Pharmacy

(Applicability of the contents of articles in the National Pharmacy Comp and can only be ascertained by examini

### Changes to Fentanyl Pain Patch Warnings Required by FDA

To reduce the risk of accidental exposure, Food and Drug Administration (FDA) has announced new requirements that change the appearance of fentanyl pain patch warnings to make them more visible. The change also requires new language in the warning that emphasizes the risk of death from accidental exposure, particularly in children. The announcement coincided with a Consumer Update that stressed the potential danger of improperly discarded fentanyl patches to children and pets. FDA reminded consumers of the agency's previous advice for securely storing unused patches and disposing of used fentanyl patches by folding the sticky sides together and then flushing them down the toilet. The agency also advises patients to cover in-use patches with an adhesive film to keep them from coming loose, and to regularly check patches to ensure they are securely in place. FDA offers additional information for health care providers on the "Fentanyl Transdermal System (marketed as Duragesic) Information" page, available at www.fda.gov/Drugs/DrugSafety/PostmarketDrug SafetyInformationforPatientsandProviders/ucm114961.htm. Consumer information about safe drug disposal methods is also available on the AWAR<sub>x</sub>E<sup>®</sup> Web site at www.AWARErx.org.

### New: Free ISMP Medication Safety Alert! Newsletter for LTC Facilities



This column was prepared by the Institute for Safe Medication Practices (ISMP). INSTITUTE FOR SAFE MEDICATION PRACTICES ISMP is an independent nonprofit agency

and federally certified patient safety organization that analyzes medication errors, near misses, and potentially hazardous conditions as reported by pharmacists and other practitioners. ISMP then makes appropriate contacts with companies and regulators, gathers expert opinion about prevention measures, and publishes its recommendations. To read about the risk reduction strategies that you can put into practice today, subscribe to ISMP Medication Safety Alert!® Community/ Ambulatory Care Edition by visiting www.ismp.org. ISMP is a federally certified patient safety organization, providing legal protection and confidentiality for submitted patient safety data and error reports. ISMP is also an FDA MedWatch partner. Call 1-800/FAIL-SAF(E) to report medication errors to the ISMP Medication Errors Reporting Program or report online at www .ismp.org. ISMP address: 200 Lakeside Dr, Suite 200, Horsham, PA 19044. Phone: 215/947-7797. E-mail: ismpinfo@ismp.org.

In July, ISMP began publishing Long-Term Care Advise-ERR, a new ISMP Medication Safety Alert! newsletter for nurses and administrators in long-term care (LTC) facilities. ISMP receives error reports that have occurred in LTC facilities. The newsletter is provided free to LTC facilities in the United States thanks in part to corporate sponsorship from Lilly and for a nominal subscription fee for pharmacies that service LTC facilities and others. Please visit ISMP's Web site at www.ismp.org/Newsletters/ longtermcare for more information, and let your LTC facilities know about this free offer.

Here are a few excerpts from a recent issue.

#### Immediate Vs Extended Release Error

A physician called a LTC facility to change a resident's oxycodone order from an extended-release formulation to an immediate release formulation at the same dose and frequency. The nurse receiving the verbal order transcribed it as "Discontinue OxyContin 10 mg BID, Start OxyContin 10 mg IR BID," with "IR" meant to represent immediate release. Although OxyContin<sup>®</sup> is a brand of oxycodone, it is only available as an extended-release tablet. The pharmacy had previously been dispensing OxyContin for the resident, so the nurse thought she could communicate the prescriber's order by discontinuing the current OxyContin order and then ordering OxyContin as an immediate-release product. The pharmacy continued dispensing OxyContin. The differences between these products and formulations were brought to the attention of nursing staff via an in-service. To minimize the risk of confusion, do not attach modifiers such as "IR" for immediate-release or "RS" for regular strength unless it is part of the official drug name.

#### **Errors Occur During Transitions of Care**

A pharmacist reported the following hazardous situation that can occur during a hospital to LTC transfer. Residents are often admitted to a LTC facility with a list of medications printed from the hospital pharmacy computer. On these printouts, doses are expressed along with the number of tablets. For example, the printout may list hydrochlorothiazide 50 mg/2 tablets daily for an order in which the total dose was 50 mg because the hospital only stocks the 25 mg tablets. During hospitalization the patient required two tablets for each dose; however, the LTC nurse may misinterpret the order to mean two 50 mg tablets, making the total dose 100 mg, or two times more than prescribed. This issue arises every time the resident's total dose in the hospital requires more than one tablet or capsule. Discharge medication summaries and transfer orders should only list the total dose in mg or mcg and other directions for use (ie, frequency, route, drug name) to avoid misinterpretation.

### 2013 USP Chapter <797> Compliance Survey Shows Compliance Trends Unchanged From 2012

The 2013 United States Pharmacopoeia (USP) Chapter <797> Compliance Survey, the third annual report released since 2011, shows that the overall compliance rate of 77.2% remains nearly unchanged from the 2012 rate. Budgetary restrictions and physical plant limitations were among the top challenges to compliance by survey respondents. The report also details the

# Compliance News

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survey's findings on what types of facilities are participating in compounding, and compliance in specific domain areas such as environmental sampling and gloved fingertip sampling. Of the survey's 1,045 participants, 97% of the survey's respondents said that USP Chapter <797> "has had a positive influence on patient safety." The report notes National Association of Boards of Pharmacy® (NABP®) efforts to assist state boards of pharmacy in evaluating pharmacy compliance with USP Chapter <797> requirements for sterile compounding in their states. The report also noted that those who participated in the 2011 survey had a higher compliance score than those who did not. The survey's authors encouraged pharmacy owners with multiple areas of noncompliance to target one or two areas to improve. They also encouraged organizations that participated in the survey to make use of the free Action Plan – generated upon completion of the survey – and other free resources to "reshape" their sterile compounding practices. The full report on the survey's results is available in the October 2013 issue of *Pharmacy Purchasing* & Products Magazine and on the magazine's Web site at www .pppmag.com/article/1403.

### FDA Recommends Schedule II Classification for Hydrocodone Combination Products

FDA planned to submit a formal recommendation to reclassify hydrocodone combination products as Schedule II controlled substances to the Department of Health and Human Services by early December 2013. FDA expects the National Institute on Drug Abuse to concur with the recommendation, indicates a statement on the FDA Web site. FDA also indicates that while "the value of and access to these drugs has been a consistent source of public debate," the agency has "been challenged with determining how to balance the need to ensure continued access to those patients who rely on continuous pain relief while addressing the ongoing concerns about abuse and misuse." Drug Enforcement Administration makes the final decision about the appropriate scheduling of these drugs. In January 2013, FDA's Drug Safety and Risk Management Advisory Committee made a recommendation that hydrocodone combination products be classified as Schedule II drugs following a 19-to-10 vote that concluded a two-day meeting during which members discussed the potential for abuse and misuse of the medications and the potential impact of rescheduling the drug products. FDA's statement on the recommendation is available at www.fda.gov/Drugs/ DrugSafety/ucm372089.htm.

### New FDA Drug Info Rounds Training Videos Available

FDA Drug Info Rounds, a series of online videos, provides important and timely drug information to practicing clinical and

community pharmacists so they can help patients make better medication decisions. In the latest two Drug Info Rounds videos, pharmacists discuss the review and approval of new drug names and the review of marketing and advertising materials for new drugs. The videos can be viewed at <a href="https://www.fda.gov/Drugs/ResourcesForYou/HealthProfessionals/ucm368620.htm">www.fda.gov/Drugs/ResourcesForYou/HealthProfessionals/ucm368620.htm</a> and <a href="https://www.fda.gov/Drugs/ResourcesForYou/HealthProfessionals/ucm371785.htm">www.fda.gov/Drugs/ResourcesForYou/HealthProfessionals/ucm371785.htm</a>, respectively. Drug Info Rounds is developed with contributions from pharmacists in FDA's Center for Drug Evaluation and Research, Office of Communications, and Division of Drug Information.

# CPPA Developing Specialty Pharmacy Accreditation Program

The Center for Pharmacy Practice Accreditation® (CPPA) has announced the development of a new accreditation program for specialty pharmacy practices. CPPA Executive Director Lynnae Mahaney, MBA, RPh, FASHP, VHA-CM, indicates that "CPPA will be able to develop the new specialty pharmacy standards quickly and efficiently with the existing standards development methodology, infrastructure, and network of specialty pharmacy expertise."

CPPA is a partnership between the American Pharmacists Association, the American Society of Health-System Pharmacists, and NABP. CPPA develops and implements comprehensive programs of pharmacy practice site accreditation, including the promotion, development, and maintenance of principles, policies, and standards. CPPA offers the general public and users of pharmacy services a means of identifying those pharmacies that satisfy the accreditation criteria and are focused on advancing patient care, safety, and quality.

More information may be found in the press release, available at www.pharmacypracticeaccredit.org/news/2013/10/cppa-to-develop-specialty-pharmacy-accreditation-program.



#### Pharmacists & Technicians: Don't Miss Out on Valuable CPE Credit. Set Up Your NABP e-Profile and Register for CPE Monitor Today!

Continuing pharmacy education (CPE) providers who are accredited by the Accreditation Council for Pharmacy Education (ACPE) have integrated CPE Monitor® into their systems and are requiring pharmacists and pharmacy technicians to provide a National Association of Boards of Pharmacy® (NABP®) e-Profile ID number and date of birth (MMDD) in order to process ACPE-accredited CPE credit.

Visit **www.MyCPEmonitor.net** to set up your NABP e-Profile and register for CPE Monitor and avoid possible delays in your CPE reporting.

CPE Monitor is a national collaborative service from NABP, ACPE, and ACPE providers that will allow licensees to track their completed CPE credit electronically.

# Printed Newsletters Coming to an End (14-01-451)

During its November 2013 meeting, the Board adopted a proposed budget for fiscal year 2014-2015 that includes approximately \$20,000 for printing costs. That budget line item does not include the approximately \$35,000 necessary to print and mail hard copies of the four quarterly *Newsletters*, but it does include the approximately \$1,000 necessary to publish electronic editions of the four quarterly *Newsletters*. The April 2014 edition of this *Newsletter* will be the final edition printed and mailed to all of its licensees.

As part of the budget discussion, the Board also considered a conversion to virtual, or paperless, credentials. This could have a substantial impact in reducing the Board's expenses for printing and postage. As the Board begins the planning and the implementation of that conversion, the Board will provide plenty of notice to all of its licensees, clients, and stakeholders. As of now, the Board still issues paper copies of all credentials and it still mails renewal reminders for all credentials.

As noted previously, the Board encourages all of its licensees to provide e-mail addresses for its communications with you. Instead of providing mailing addresses to the *Newslet*ter distributor, the Board will provide e-mail addresses. The distributor will send an electronic message to your e-mail address alerting you to the posting of the electronic edition of the *Newsletter* on the Board's Web site.

### Renewal of Nonresident Pharmacy Permits for Calendar Year 2015 (14-01-452)

During its November 2013 meeting, the Board adopted a policy concerning the renewal of pharmacy permits. In particular, the policy requires a nonresident pharmacy to produce a copy of its most recent inspection report, and further, the inspection report shall be dated no more than three years prior to the date of the renewal application. The rationale for the decision for a three-year maximum rests in the fact that every pharmacy within the state is inspected at least once every three years, and most are inspected annually. The Board is responding to stakeholder input to regulate nonresident pharmacies on an equivalent basis with the resident pharmacies.

In the event the inspection report is not produced or if the report is dated more than three years prior to the date of the renewal application, staff has been instructed to return the renewal application as incomplete. The Board requested the publication of this policy now to give all nonresident pharmacies adequate opportunity to ensure their compliance by calendar year 2015.

### Pharmacies – Are You Obtaining Drugs From a Legitimate Distributor? (14-01-453)

As the number of drugs appearing on the drug shortage list continues to increase, the Board hears more about rogue companies attempting to profit from the situation. To minimize your risk of purchasing diverted, counterfeit, or misbranded drugs, the Board encourages you to verify the credentials of all your medication suppliers. The Louisiana Board of Wholesale Drug Distributors maintains a Web site at <a href="https://www.lsbwdd.org">www.lsbwdd.org</a> where you can verify the credentials of every distributor licensed to conduct business in this state.

# Status Report on Rulemaking Activities (14-01-454)

The Board continues to promulgate new rules as well as revisions to existing rules. For its clients who have given the Board their e-mail addresses, the Board sends electronic *Notices of Rulemaking Activity* about these activities.

- ◆ Regulatory Project 2013-1 ~ Compounding for Prescriber Use. The Board has republished the emergency rule that places limits on the amount of compounding for prescriber use a pharmacy may prepare without a patient-specific prescription. The Board's Regulation Revision Committee is working on a proposal that includes new legislative language and includes some of the comments and testimony from the public hearing. You can follow the progress of that proposal in the Public Notices section of the Board's Web site.
- ♦ Regulatory Project 2013-4 ~ Preferential Licensing for Military Personnel. This amendment was mandated by Act 276 of the 2012 Legislature, and it creates preferential licensing procedures for certain military personnel seeking either a pharmacist license or a pharmacy technician certificate. The Board created a new §506 in Chapter 5 — Pharmacists and a new §904 in Chapter 9 — Pharmacy Technicians to describe the new licensing procedures for those eligible military personnel. The final rule was published in the November 20, 2013 edition of the Louisiana Register. The Board has also posted the revised Chapters 5 and 9 in the list of separate chapters of the Louisiana Pharmacy Law Book available on the Board's Web site.
- ♦ Regulatory Project 2013-5 ~ Collaborative Drug Therapy Management. This proposal amended the Board's rules to streamline the administrative burden placed on physicians and pharmacists engaging in collaborative drug therapy management. Further, by amending some definitions, the amended rule deletes the limited list of conditions that were eligible for collaborative drug therapy management. Physicians and pharmacists now may collaborate on the drug therapy for any medical condition. The requirement for a separate collaborative practice agreement requiring advance approval from the Board was also deleted. In its place is a requirement for collaborating pharmacists to notify the Board of the nature of the medical conditions for which the pharmacist is collaborating with a physician to manage the drug therapy. Written protocols identifying the patient and describing the actions to be taken by pharmacists are still required. The final rule was scheduled for publication in the December 20, 2013 edition of the Louisiana Register.
- ♦ Regulatory Project 2013-6 ~ Penal Pharmacy Permit Revision. This proposal clarified the requirements for this Continued on page 5

special type of pharmacy permit to only include those pharmacies within the state or nonresident pharmacies supplying medications and pharmacy care to offenders located within penal institutions owned and/or operated by the Louisiana Department of Public Safety & Corrections, either by in-house pharmacies or on a contractual basis. The amendment also clarifies the penal pharmacy permit may not operate any other type of pharmacy permit on the same premises. The final rule was published in the November 20, 2013 edition of the *Louisiana Register*. The Board has also posted the revised Chapters 18 and 23 in the list of separate chapters of the *Louisiana Pharmacy Law Book* available on the Board's Web site.

- ♦ Regulatory Proposal 2014-A ~ PMP Delegates. This proposal was mandated by Act 110 of the 2013 Legislature. This legislation amended the Prescription Monitoring Program (PMP) Act to authorize prescribers and dispensers to appoint delegates for the purpose of retrieving information about their patients from the PMP database, but only according to rules promulgated by the Board for that purpose. The Board's Regulation Revision Committee has drafted a proposed rule and it will be considered by the Board during its February 12, 2014 meeting.
- ♦ Regulatory Proposal 2014-B ~ Veterinarian Exclusion from PMP. This proposal was mandated by Act 27 of the 2013 Legislature. This legislation amended the PMP Act to exclude veterinarians from the requirement to report any dispensing transactions or from having access to the PMP database. The Board's Regulation Revision Committee has drafted a proposed rule and it will be considered by the Board during its February 12, 2014 meeting.

### Disciplinary Actions (14-01-455)

During its August 2013 meeting, the Board took final action in the following matters.

Nick Christopher Tran (PST.014998): Formal Hearing — Revoked the license, and further, assessed a fine of \$35,000 plus administrative, investigative, and hearing costs; for two counts, including a criminal conviction for diversion of controlled substances (CS).

During its November 2013 meeting, the Board took final action in the following matters.

- **Barry Joseph Robichaux (PST.010309):** Assessed a fine of \$1,500; for eight counts, including repeated failure to perform drug utilization review and dispensing premature refills for prescriptions for CS.
- **Brent Michael Cantrelle (PST.018704):** Assessed a fine of \$1,500; for five counts, including repeated failure to perform drug utilization review and dispensing premature refills for prescriptions for CS.
- Chris Youree Kalstone (PST.010973): Issued a letter of reprimand, and further, assessed a fine of \$2,500; for three counts, including failure to substantiate clinical studies on human patients.

- CVS Pharmacy No. 4743 (PHY.006485): Assessed a fine of \$10,000; for two counts, including failure to appoint a replacement pharmacist-in-charge (PIC) in a timely manner and the subsequent operation of a pharmacy without a PIC for 25 days.
- CVS Pharmacy No. 5331 (PHY.005773): Assessed a fine of \$10,000; for two counts, including failure to appoint a replacement PIC in a timely manner and the subsequent operation of a pharmacy without a PIC for 44 days.
- CVS Pharmacy No. 5360 (PHY.005774): Assessed a fine of \$10,000; for two counts, including failure to appoint a replacement PIC in a timely manner and the subsequent operation of a pharmacy without a PIC for four months.
- CVS Pharmacy No. 5396 (PHY.005963): Assessed a fine of \$10,000; for two counts, including failure to appoint a replacement PIC in a timely manner and the subsequent operation of a pharmacy without a PIC for 63 days.
- CVS Pharmacy No. 5432 (PHY.005782): Assessed a fine of \$2,500; for seven counts, including repeated occasions of dispensing premature refills for prescriptions for CS.
- CVS Pharmacy No. 7224 (PHY.006153): Assessed a fine of \$5,000; for four counts, including employing a pharmacy technician candidate for approximately one month prior to the issuance of the candidate's registration.
- Emma Harris Porter (CPT.001663): Accepted voluntary surrender, resulting in active suspension of the certificate for an indefinite period of time, effective August 26, 2013, and further, agreed to the permanent prohibition on any future reinstatement application.
- **Jade Mychel Schultz (CPT.008106):** Revoked the certificate, effective September 5, 2013, and further, agreed to the permanent prohibition on any future reinstatement application; for four counts, including the alleged diversion of CS from her employer pharmacy.
- **John David May (PST.020387):** Approved application for pharmacist licensure by reciprocity and issued license, then suspended the license for five years and suspended the execution of the suspension, then placed the license on probation for five years, effective November 6, 2013, subject to certain terms enumerated in the consent agreement.
- Lanny Joseph Richard (PST.011807): Granted request for reinstatement of the previously suspended license, converted the duration of the suspensive period from an indefinite term to a term of five years and suspended the execution of the suspension, then placed the license on probation for five years, effective November 6, 2013, subject to certain terms enumerated in the consent agreement.
- **LaToya Michelle Franklin (CPT.007151):** Revoked the certificate, effective September 5, 2013, and further, agreed to the permanent prohibition on any future reinstatement application; for five counts, including the alleged diversion of CS from her employer pharmacy.

Matthew Paul Dixon (PST.020388): Approved application for pharmacist licensure by reciprocity and issued license,

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then suspended the license for a period of time ending November 16, 2016, and suspended the execution of the suspension, then placed the license on probation for a period of time ending November 16, 2016, subject to certain terms enumerated in the consent agreement.

**Michael Glenn Harlton (PTC.020106):** Revoked the registration, effective August 19, 2013; for two counts, including failure to pay costs assessed by the Board.

**Noel Gerard Faucheux (PST.011765):** Accepted voluntary surrender, resulting in active suspension of the license for an indefinite period of time, effective October 24, 2013.

Randi Lea Cassidy (CPT.010273): Accepted voluntary surrender, resulting in active suspension of the license for an indefinite period of time, effective October 15, 2013.

Robert Blake Vidrine (PST.010232): Suspended the license for an indefinite period of time, effective September 26, 2013, and further, assessed a fine of \$5,000, and further, conditioned the acceptance of any future reinstatement application upon the satisfaction of certain requirements identified in the consent agreement; for one count, including violation of previously imposed terms of probation.

**Scott Nolan Gewin (PST.017104):** Accepted voluntary surrender, resulting in suspension of the license for an indefinite period of time, effective September 30, 2013.

**Sharron Renee Michael (PST.017155):** Accepted voluntary surrender, resulting in active suspension of the license for an indefinite period of time, effective October 3, 2013.

**Tony Xavier Neustadter (PTC.019472):** Revoked the registration, effective August 23, 2013, and further, agreed to the permanent prohibition on any future reinstatement application; for five counts, including the alleged diversion of CS from his employer pharmacy.

William Francis McCarthy, Jr (PST.013008): Granted request for reinstatement of the previously suspended license, converted the duration of the suspensive period from an indefinite term to a term of five years and suspended the execution of the suspension, then placed the license on

probation for five years, effective November 6, 2013, subject to certain terms enumerated in the consent agreement.

During the same meeting, the Board granted approval for the reinstatement of expired certificates for two technicians, as well as conditional approval for the reinstatement of expired licenses for three pharmacists, pending satisfaction of certain terms enumerated in their consent agreements. The Board also issued letters of warning to the owners of three pharmacy permits as well as one pharmacist and one technician, and further, suspended the controlled dangerous substance licenses for one podiatrist and five physicians whose medical licenses were suspended by the Louisiana State Board of Medical Examiners.

### Calendar Notes (14-01-456)

The next Board meeting and administrative hearing will be held on February 12-13, 2014, at the Board office. The office will be closed January 20, in observance of Martin Luther King, Jr, Day and March 4, in observance of Mardi Gras Day.

### Special Note (14-01-457)

The Louisiana Board of Pharmacy Newsletter is considered an official method of notification to pharmacies, pharmacists, pharmacy interns, pharmacy technicians, and pharmacy technician candidates credentialed by the Board. These Newsletters will be used in administrative hearings as proof of notification. Please read them carefully. The Board encourages you to keep them in the back of the Louisiana Pharmacy Law Book for future reference.

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