

KENTUCKY BOARD OF PHARMACY

Board Meeting

125 Holmes Street, Suite 300

Frankfort KY 40601

January 17, 2018

9:00 AM

Agenda

I. CALL TO ORDER

II. OATH OF OFFICE

III. MINUTES

A. *December 20, 2017

IV. APPEARANCES

V. INTERAGENCY

VI. BOARD REPORTS

A. Executive Director

1. *eMars – December 2017

B. *APhA Institute on Alcoholism and Drug Dependencies – May 30-June 3, 2018

C. *NABP Annual Meeting – May 5-8, 2018

D. *CLEAR – Tools to Succeed in Regulatory Governance

VII. CURRENT/PENDING CASES

A. *Case Update and Fines Report

B. *Final Order

C. *Pharmacy Technician Summary

VIII. RECIPROCITY/RELICENSURE/INTERNSHIP/PHARMACY TECHNICIANS

A. *Hayley Jaeger – Pharmacist Intern Application

B. *Michael Petrilli – Reciprocal Application

C. *Reed Smith – Initial Pharmacist Application

IX. CORRESPONDENCE/COMMUNICATION

A. *Malik Zahr – Non-Resident Pharmacy Permit Waiver

B. *St. Matthews Specialty Pharmacy – Pharmacy Equipment Waiver

C. *Kings Daughters Medical Center Pharmacy – Off-site Record Storage Request

D. *UK Healthcare – Containment Segregated Compounding Area Waiver

E. *Daven Sawh – Appeal of Case Number 17-0337

X. NABP

XI. LEGISLATION/REGULATION

- A. *201 KAR 2:074 Pharmacy services in Hospitals – Discussion only
 - 1. *Staff Comments
- B. *201 KAR 2:370 Pharmacy services in long-term care facility [LTCF] – Discussion only
 - 1. *Staff Comments
- C. *201 KAR 2:015 Continuing Education
- E. *KRS 315.450 to KRS 315.460 – Discussion only
- F. *201 KAR 2:250 Pharmacist Recovery Network Committee – Discussion only
- G. *KRS 315.010 [3] – Discussion only
- H. *KRS 315.010[19] and [22] – Discussion only

XII. CONTINUING EDUCATION

- A. *CE Programs – 18-01 through 18-03

XIII. OLD BUSINESS

- A. Update on Hazardous Drug Task Force

XIV. NEW BUSINESS

- A. KPhA, KSHP, APSC – CAPP Grant
- B. Protocols
 - 1. *Naltrexone Therapy
 - a. *Staff Comments
 - 2. *Tuberculin Skin Testing
 - a. *Staff Comments
 - 3. *Selfcare Conditions – Diabetes Testing Supplies
 - a. *Staff Comments
 - 4. *Travel Health Therapies
 - a. *Staff Comments

XV. FYI

- A. Expungement

*Information enclosed with this agenda.

MINUTES

KENTUCKY BOARD OF PHARMACY

State Office Building Annex, Suite 300

125 Holmes Street

Frankfort, KY 40601

January 17, 2018

CALL TO ORDER A regular scheduled meeting was held in the Board office at 125 Holmes Street, Frankfort, Kentucky. President Hanna called the meeting to order on January 17, 2018 at 9:26 a.m.

Members present: Cathy Hanna, Ron Poole, Craig Martin, Peter P. Cohron, Jill Rhodes and Jody Forgy.

Staff: Larry Hadley, Executive Director; Katie Busroe, Pharmacy Inspections and Investigations Supervisor; Amanda Harding, Pharmacy and Drug Inspector; Paul Daniels, Pharmacy and Drug Inspector; Jessica Williams, Pharmacy and Drug Inspector; Rhonda Hamilton, Pharmacy and Drug Inspector; John Romines, Pharmacy and Drug Inspector; Cheryl Lalonde, General Counsel; and Darla Sayre, Executive Staff Advisor. Court Reporter Terri Pelosi recorded the meeting.

Guests: Anne Policastri, KSHP; Trish Freeman, KPhA; Chris Killmeier, Walgreens; Ralph Bouvette, APSC; Dean Cindy Stowe, Sullivan University College of Pharmacy; Brian Fingerson, PRN Committee; Scott Dilley, Pharmerica; Paula York, OIG; Chris Harlow, KPhA; Mark Glaspar, KPhA and Philip Fields, UK Healthcare.

President Hanna introduced and welcomed our new Board members: Peter P. Cohron, Jill Rhodes and Jody Forgy. President Hanna introduced and welcomed the new Executive Director, Larry A. Hadley. Ms. Lalonde administered the Oath of Office for Mr. Cohron, Dr. Rhodes and Mr. Forgy.

MINUTES On motion by Mr. Poole, seconded by Dr. Martin and passed unanimously, the minutes of December 20, 2017 were approved as corrected.

INTERAGENCY Anne Policastri, KSHP, advised that she will be in her current position until mid-March. At that time, another representative from KSHP will attend the Board meetings.

BOARD REPORTS

1. Financial reports and eMars were presented for December 2017.
2. Mr. Hadley informed the Board of NABP grants available on a first come basis to attendees for the APha Institute on Alcoholism and Drug Dependencies and the NABP Annual Meeting. Mr. Hadley requested the PRNC Chair be allowed to apply for the travel grant to the APha Institute on Alcoholism and Drug Dependencies. Mr. Hadley requested that President Hanna be allowed to apply for the travel grant to the NABP Annual Meeting. She is the Board's voting delegate. Mr. Poole believes strongly in the value of the education offered at the NABP meeting so he moved to accept these recommendations and also moved to allow any Board member or Board staff to attend these meetings, as in the past, with approval from the Public Protection Cabinet. Dr. Martin seconded, and the motion passed unanimously.

3. Mr. Hadley proposed for the Board members to participate in CLEAR'S 2018 Introduction to Regulatory Governance Webinar Series. Dr. Martin moved to accept this recommendation. Mr. Poole seconded, and the motion passed unanimously.

CURRENT/PENDING CASES Mr. Poole moved to accept Case Review Committee's recommendations:

17-0416 A Revisit. Pharmacy permit holder allegedly engaged in unprofessional or unethical conduct by engaging in conduct likely to harm the public with or without established proof of actual injury by dispensing medications to a patient that had been discontinued by the treating physician. Pharmacy permit holder allegedly dispensed baclofen and olanzapine to a patient after they were discontinued at the hospital, causing the patient to fall and seek medical treatment. Alleged Violation of Law: KRS 315.121 (1)(a). **CRC Recommendation: There is sufficient evidence developed and the investigator is directed to conduct further investigation.**

17-0416 B Revisit. Pharmacist in charge allegedly engaged in unprofessional or unethical conduct by demonstrating a willful or careless disregard for the health, welfare, or safety of a patient with or without established proof of actual injury by dispensing medications to a patient that had been discontinued by the treating physician. Pharmacist-in-charge allegedly dispensed baclofen and olanzapine to a patient after they were discontinued at the hospital, causing the patient to fall and seek medical treatment. Alleged Violation of Law: KRS 315.121 (2)(d). **CRC Recommendation: There is sufficient evidence developed and the investigator is directed to conduct further investigation.**

17-0508 Revisit. Registered pharmacy technician allegedly knowingly made or caused to be made a false, fraudulent, or forged statement or misrepresentation of a material fact in securing issuance or renewal of a license, permit, or certificate. Alleged Violation of Law: KRS 315.121 (1)(e). **CRC Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice.**

17-0511 A. Pharmacy permit holder allegedly engaged in unprofessional or unethical conduct by dispensing the incorrect medication. Patient was expecting cyclosporine but was dispensed Colcrys (colchicine). Pharmacy permit holder allegedly engaged in unprofessional or unethical conduct by failing to have a system in place for patient counseling. Pharmacy permit holder allegedly did not maintain a patient record including significant individual medical history. Alleged Violations of Law: KRS 315.121 (1)(a) and 201 KAR 2:210 Section 1 (2)(f). **CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing. Standard terms and \$2500 administrative fine, approved corrective action plan for verbal and faxed prescriptions.**

17-0511 B. Pharmacist allegedly engaged in unprofessional or unethical conduct by failing to exercise appropriate professional judgment in determining whether a prescription drug order is lawful. Alleged Violation of Law: KRS 315.121 (2)(j). **CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing. Standard terms and \$500**

administrative fine, additional 6 hours of continuing education on medication errors and their prevention.

17-0511 C. Pharmacist allegedly failed to perform a complete prospective drug use review prior to dispensing a prescription. Alleged Violation of Law: 201 KAR 2:210 Section 4. **CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing. Standard terms and \$500 administrative fine, additional 6 hours of continuing education on medication errors and their prevention/DUR.**

17-0528 A Revisit. Pharmacy permit holder allegedly sold a misbranded drug due to medication error. Patient allegedly was dispensed a prescription for Dexilant 60 mg capsules that contained duloxetine 60 mg capsules. Alleged Violation of Law: KRS 217.065 (1). **CRC Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice.**

17-0528 B Revisit. Pharmacist allegedly engaged in unprofessional or unethical conduct by engaging in conduct likely to harm the public with or without established proof of actual injury by committing a medication error. Patient allegedly was dispensed a prescription for Dexilant 60 mg capsules that contained duloxetine 60 mg capsules. Alleged Violation of Law: KRS 315.121 (2)(d). **CRC Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice.**

17-0530. Pharmacist allegedly engaged in unethical or unprofessional conduct by delaying the dispensing of prescription medications. Alleged Violation of Law: KRS 315.121 (2)(d). **CRC Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice.**

17-0539 A. Wholesale distributor permit holder allegedly engaged in unprofessional or unethical conduct regarding the source of distributed drugs. Permit holder allegedly failed to provide accurate and precise records of all goods shipped or received. Permit holder allegedly failed to employ adequate personnel with the education and experience necessary to safely and lawfully engage in the wholesale distribution of prescription drugs. Permit holder allegedly failed to provide adequate storage conditions. Permit holder allegedly failed to be properly licensed as a Wholesaler of Controlled Substances by the Cabinet for Health Services. Alleged Violations of Law: KRS 315.121(1)(a) and (h); KRS 315.402 (2); 201 KAR 2:105 Section 2 (4)(a) and (c) and Section 5(2)(d); and 902 KAR 55:010 Section 2. **CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing. Standard terms and revocation.**

17-0539 B. Non-resident wholesale distributor permit holder allegedly engaged in unprofessional or unethical conduct regarding the source of distributed drugs. Permit holder allegedly failed to provide accurate and precise records of all goods shipped or received. Alleged Violations of Law: KRS 315.121 (1)(a); KRS 315.402 (2); and 201 KAR 2:105 Section 2 (4)(c). **CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative**

Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing. Standard terms and revocation.

17-0539 C. Non-resident wholesale distributor permit holder allegedly engaged in the wholesale distribution of prescription drugs in the Commonwealth without an active permit. Permit holder allegedly engaged in unprofessional or unethical conduct regarding the source of distributed drugs. Permit holder allegedly failed to provide accurate and precise records of all goods shipped or received. Alleged Violations of Law: KRS 315.121 (1)(a); KRS 315.402 (1) and (2); and 201 KAR 2:105 Section (4)(c). **CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing. Standard terms, \$10000 administrative fine and a corrective action plan to renew licenses.**

17-0539 D. Non-resident wholesale distributor allegedly engaged in unprofessional or unethical conduct by distributing a butalbital-containing product to a Kentucky facility without a Drug Enforcement Agency (DEA) registration. Alleged Violations of Law: KRS 315.121 (1)(a) and (h). **CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing. Standard terms and \$5000 administrative fine or voluntarily surrender the right to renew license.**

17-0559 A. Pharmacy permit holder allegedly failed to provide adequate security and control of drugs. Pharmacy reported a loss of 90 oxycodone/APAP 7.5/325mg tablets and 150 hydrocodone/APAP tablets due to employee pilferage. Alleged Violation of Law: 201 KAR 2:100 Section 1. **CRC Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice.**

17-0559 B. Pharmacist in charge allegedly failed to provide adequate security and control of drugs. Pharmacy reported a loss of 90 oxycodone/APAP 7.5/325mg tablets and 150 hydrocodone/APAP tablets due to employee pilferage. Alleged Violation of Law: 201 KAR 2:205. Section 2 (3) (b). **CRC Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice.**

17-0559 C. Registered Pharmacy Technician allegedly engaged in unprofessional or unethical conduct by selling, transferring, dispensing, ingesting, or administering a drug for which a prescription drug order is required, without first receiving a prescription drug order for the drug. Alleged Violation of Law: KRS 315.121 (2) (f). **CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing. Standard terms and revocation.**

17-0568 A. Pharmacy permit holder allegedly engaged in unprofessional or unethical conduct by failing to exercise appropriate professional judgment in determining whether a prescription drug order is lawful. Pharmacist allegedly dispensed Gabapentin a Schedule V controlled substance in the Commonwealth of Kentucky after prescription was expired 221 times between July 1, 2017 and

December 19, 2017. Alleged Violation of Law: KRS 315.121 (1) (h). **CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing. Standard terms and \$5000 administrative fine.**

17-0568 B. Pharmacist allegedly engaged in unprofessional or unethical conduct by failing to exercise appropriate professional judgment in determining whether a prescription drug order is lawful. Pharmacist allegedly dispensed Gabapentin a Schedule V controlled substance in the Commonwealth of Kentucky after prescription was expired 221 times between July 1, 2017 and December 19, 2017. Alleged Violation of Law: KRS 315.121 (2) (j). **CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing. Standard terms and \$5000 administrative fine, additional 6 hours of continuing education on medication errors and their prevention, additional 6 hours of continuing education on pharmacy law.**

17-0570 A. Pharmacy permit holder allegedly failed to maintain a computerized recordkeeping system with adequate safeguards against improper manipulation or alteration of data. Alleged Violation of Law: 201 KAR 2:170 Section 1 (6). **CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing. Standard terms and \$500 administrative fine, approved corrective action plan to prevent future occurrences and training on the process for cancelling prescriptions.**

17-0570 B. Pharmacist allegedly failed in her responsibility to the completeness and accuracy of entries into the computerized recordkeeping system. Alleged Violation of Law: 201 KAR 2:170 Section 1 (2). **CRC Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice.**

18-0001 A. Pharmacy permit holder allegedly failed to provide adequate security and control of drugs by employing a pharmacist that allegedly engaged in unprofessional or unethical conduct by selling, transferring, dispensing, ingesting, or administering drugs for which prescription drug orders are required, without first receiving prescription drug orders for the drugs. Pharmacy permit holder allegedly failed to maintain a prescription log dated and signed by the pharmacist(s) who filled those prescription orders. Pharmacy permit holder allegedly engaged in unprofessional or unethical conduct by knowing or having reason to know that a pharmacist had engaged in or aided and abetted the unlawful distribution of legend medications, and failing to report any relevant information to the Board. Alleged Violations of Law: 201 KAR 2:100 Section 1, 201 KAR 2:170 Section 1(8), and KRS 315.121 (1)(j) **CRC Recommendation: There is sufficient evidence developed and the investigator is directed to conduct further investigation.**

18-0001 B. Pharmacist allegedly engaged in unprofessional or unethical conduct by selling, transferring, dispensing, ingesting, or administering drugs for which prescription drug orders are required, without first receiving prescription drug orders for the drugs. Alleged Violation of Law: KRS 315.121 (2)(f). **CRC**

Recommendation: There is sufficient evidence developed and the investigator is directed to conduct further investigation.

18-0003. Pharmacist pled nolo contendere to three Class C Felonies, Violation of the Commercial Computer Crimes Act, TennCare Fraud, and Insurance Fraud. Alleged Violation of Law: KRS 315.121(1)(c). **CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing. Standard terms and status of 'Do Not Issue'.**

Dr. Martin seconded, and the motion passed unanimously.

FINAL ORDER Dr. Martin moved to accept the Hearing Officer's Recommended Order, and issue the Final Order for Case 17-0414 as presented. Mr. Poole seconded, and the motion passed unanimously.

PHARMACY TECHNICIAN SUMMARY Dr. Martin moved to approve the application with no further action. Mr. Poole seconded, and the motion passed unanimously.

RECIPROCITY/RELICENSURE/INTERNSHIP/PHARMACY TECHNICIANS

Hayley Jaeger, Pharmacist Intern Application Mr. Poole moved to table this item until information is obtained from the University of Cincinnati and the Ohio Board of Pharmacy.

President Hanna requested a break. Dr. Hanna, Mr. Cohron and Ms. Lalonde left the room. The meeting resumed upon their return.

Michael Petrilli, Reciprocal Application Dr. Martin moved to accept the application with no further action. Dr. Rhodes seconded, and the motion passed unanimously.

Reed Smith, Initial Pharmacist Application Mr. Cohron moved to accept the application with the following stipulation; upon successfully passing the exams, a KYPRN contract must be on file and scrupulously followed for five years following licensure. Mr. Poole seconded, and the motion passed unanimously.

CORRESPONDENCE/COMMUNICATION

Malik Zahr, Non-Resident Pharmacy Permit Waiver Dr. Martin moved to deny this waiver. Mr. Cohron seconded, and the motion passed unanimously.

St. Matthew Specialty Pharmacy, Pharmacy Equipment Waiver Dr. Rhodes recused herself and left the room. Dr. Martin moved to grant the request from St. Matthew Specialty Pharmacy to waive the pharmacy equipment requirement. Mr. Poole seconded, and the motion passed unanimously. Dr. Rhodes returned to the room.

Kings Daughters Medical Center Pharmacy, Off-site Record Storage Request Dr. Martin moved to grant the request for Kings Daughters Medical Center Pharmacy to store prescription records off-site with the most current 2 years stored on-site. Dr. Rhodes seconded, and the motion passed unanimously.

UK Healthcare, Containment Segregated Compounding Area Waiver Dr. Martin recused himself and left the room. Mr. Poole moved to grant the waiver from UK Healthcare to operate Markey Cancer

Center as a Containment Segregated Compounding Area for sterile compounding of hazardous drugs following USP 800 until proposed regulation changes by the Board's Hazardous Compounding Task Force are implemented, since the waiver may not apply after implementation of a new regulation. Mr. Cohron seconded, and the motion passed unanimously. Dr. Martin returned to the meeting.

Daven Sawh, Case 17-0337 Appeal Mr. Poole moved to rescind the Agreed Order, refund the fine and all CE obtained during 2017 will apply to his 2018 pharmacist renewal without carryover. Dr. Rhodes seconded, and the motion passed unanimously.

LEGISLATION/REGULATION

201 KAR 2:074, Pharmacy services in hospitals and 201 KAR 2:370, Pharmacy services in long-term care facility These items will be discussed at a work session following the regularly scheduled March meeting.

201 KAR 2:015 Continuing Education Mr. Poole moved to table this discussion until a later date. Dr. Martin seconded, and the motion passed unanimously.

KRS 315.450 to KRS 315.460 President Hanna and Mr. Hadley will work on establishing a work group/task force for this item. Members should include representatives from charitable pharmacies.

201 KAR 2:250 Pharmacist Recovery Network Committee The Board will address the regulation and authorizing statute at a later date.

KRS 315.010 The Board requests additional information regarding vital manufacturers and repackager/relabelers; how other states handle this, guidance from staff and NABP. The Board requests additional information regarding pharmacy services: performing services outside a permitted pharmacy by pharmacists and pharmacy technicians and compounding services performed in a physician's office.

CONTINUING EDUCATION Mr. Poole moved to approve programs 18-02 and 18-03 with the clarification that 18-03 is one contact hour. Dr. Martin seconded, and the motion passed unanimously. The Board requests attendance information for 18-01.

President Hanna requested a break at 10:57 a.m. President Hanna resumed the meeting at 11:12 a.m.

OLD BUSINESS Mr. Poole informed the Board that Hazardous Drug Task Force Committee will be scheduling their first meeting soon.

NEW BUSINESS

KPhA, KSHP, APSC – CAPP Grant Chris Harlow, KPhA, informed the Board that a new Public Health Committee has held two meetings to discuss the grant. He will keep the Board apprised of their recommendations. Ms. Busroe requested the Board consider using a portion of the grant money to be used for drug takeback boxes in pharmacies. Ms. Policastri asked that Board minutes be reviewed to confirm the actual details pertaining to this grant.

Protocols:

1. **Naltrexone Therapy** Dr. Martin moved to approve this protocol with the following changes:
page 2: MEDICATIONS 2) Oral naltrexone (ReVia®, Depade®), **which is used solely for the initial**

withdrawal challenge. Mr. Poole seconded, and the motion passed unanimously.

2. **Tuberculin Skin Testing** Dr. Martin moved to approve this protocol with the following changes:
 - a. page 1: PHARMACIST EDUCATION AND TRAINING, line 5...by the Accreditation Council for Pharmacy Education; **CDC Module 3 Self Study Program; Targeted Testing and Diagnosis of Latent Tuberculosis Infection and Tuberculosis Disease**, or by a comparable provider approved by the Kentucky Board of Pharmacy;
 - b. page 2: reference NDCs in chart with * **[*Any other FDA approved tuberculin antigen serum];**
 - c. page 3: move last bullet point under EDUCATION REQUIREMENTS to item 5 under DOCUMENTATION AND REFERRAL and include reference to reportable regulations.

Mr. Poole seconded, and the motion passed unanimously.

3. **Selfcare Conditions – Diabetes Testing Supplies** Mr. Poole moved to approve this protocol with the following changes:
 - a. page 2, add bullet point under PROCEDURES FOR INITIATING DISPENSING OF DIABETES TESTING SUPPLIES to read **Non-pharmacologically managed diabetics: 1 – 4 test per day**
 - b. page 3: line 1 – Individuals (**caregiver/guardian**) receiving diabetes....

Dr. Rhodes seconded, and the motion passed unanimously.

4. **Travel Health Therapies** Dr. Freeman removed this protocol from Board's consideration until changes are made regarding pediatric dosing in Appendix A and other noted suggestions. This item is tabled until the next regularly scheduled Board meeting.

ADJOURNMENT On motion by Mr. Poole, seconded by Dr. Martin and passed unanimously, President Hanna adjourned the meeting at 12:45 p.m. The next regularly scheduled meeting begins at 9:00 a.m. on March 14, 2018 at the Sullivan College of Pharmacy in Louisville, Kentucky.

Larry A. Hadley
Executive Director