

**KENTUCKY BOARD OF PHARMACY**

via Zoom teleconference

<https://us02web.zoom.us/j/82456623763?pwd=aXFwd0NoWEV0U3VldHpiVkd6cmJZZz09>

Meeting ID: 824 5662 3763

Passcode: 8pCAXX

Dial by your location

+1 646 558 8656 US (New York)

1 312 626 6799 US (Chicago)

Meeting ID: 824 5662 3763

Passcode: 816240

January 28, 2021

8:30 a.m.

**Board Meeting Agenda**

- I. CALL TO ORDER**
- II. NEW BOARD MEMBERS**
- III. ELECTION OF OFFICERS**
- IV. ETHICS TRAINING – Katie Gabhart**
- V. MINUTES**
  - A. \*November 5, 2020
  - B. \*November 17, 2020
- VI. APPEARANCES**
  - A. MPJE Program, Maureen Garrity
  - B. NABP Passport Program, William Cover
- VII. BOARD REPORTS**
  - A. Executive Director
    - 1. \*eMars – November 2020 and December 2020
    - 2. \*Policy and Procedures Manual Annual Review
  - B. General Counsel
    - 1. \*FDA Compounding MOU
    - 2. \*Process to convert 201 KAR 2:410E into an Ordinary Regulation
    - 3. \*KRS 315.010(13)(d)
    - 4. \*FDA enforcement of PDMA
    - 5. Using the Letter of Reprimand
    - 6. \*Addressing confusion on 201 KAR 2:410E
    - 7. \*Declaratory Ruling RE: Role of other healthcare providers within a pharmacy setting.
- VIII. COMMITTEE REPORTS**
  - A. Kentucky Professional Recovery Committee, Brian Fingerson
  - B. Advisory Council, Matt Martin
  - C. Regulation Committee, Ralph Bouvette
  - D. Pharmacy Technician Committee, Sarah Lawrence

- E. Diversity and Inclusion Task Force, Shannon Borden and Crystal Isaacs
- F. Case Review Panel, Jill Rhodes

**IX. CASES**

- A. \*Case Review
- B. \*Fines Report
- C. \*Permit Issuance/Case Revisit to Board - Health & Wellness Compounding Pharmacy, TN
- D. \*17-0496 A

**X. CORRESPONDENCE**

- A. \*Rowan Pharmacist Group Inc DBA Total Care Pharmacy #7 – P07476 -Offsite Storage Request
- B. \*Ross Drugs, P02569 – Offsite Storage Request
- C. \*Cynthiana Hometown Pharmacy, P07853 – Offsite Storage Request
- D. DMS Prescriber Vaccine Protocol for Kentucky Medicaid

**XI. LEGISLATION/REGULATION**

- A. \*Status of regulations filed with LRC
- B. \*201 KAR 2:170, Computerized Recordkeeping.
- C. \*201 KAR 2:040, Registration of pharmacist interns.
- D. \*201 KAR 2:280, Prescription dispensing for formulary compliance
- E. \*201 KAR 2:330, Emergency pharmacy powers
- F. \*201 KAR 2:210, Patient records and patient counseling
  - 1. \*Walgreens request for definition of ‘new prescription’
- G. \*201 KAR 2:061, Procedures followed by the Kentucky Board of Pharmacy in the investigation and hearing of complaints
- H. Introduction of HB 219 per request of KYBOP
- I. \*Review of filed legislation involving pharmacy profession and board response

**XII. OLD BUSINESS**

- A. \*Advisory Council Appointments
- B. \*Pharmacy Recovery Network Appointments
- C. \*Medication Safety Committee
- D. \*APRN Council Member
- E. \*ISMP for Medication Error Prevention
- F. \*Naloxone Regulation – dispensing without a prescription
- G. \*USP 795 – amended language regarding flavorings
- H. \*USP 825 – amending 201 KAR 2:076
- I. \*Emergency Regulation Draft

**XIII. NEW BUSINESS**

- A. \*Pharmacist Diabetes Testing and Injection Supplies Protocol
- B. Assignment of Board Member liaisons to Board Committees
- C. Board of Pharmacy Emergency Preparedness Response

\*Information included in Board Packet

## MINUTES

### KENTUCKY BOARD OF PHARMACY

held at

125 Holmes Street

Frankfort KY 40601

via teleconference

### BOARD MEETING

January 28, 2021

**CALL TO ORDER** A regularly scheduled meeting was held via teleconference from the Kentucky Board of Pharmacy, Frankfort, Kentucky. Vice-President Rhodes called the meeting to order on January 28, 2021 at 8:35 a.m.

Members present: Jill Rhodes, Peter Cohron, Jody Forgy, John Fuller, Jonathan Van Lahr and Chris Harlow.

Staff: Larry Hadley, Executive Director; Eden Davis, General Counsel; Paul Daniels, Pharmacy and Drug Inspector; John Romines, Pharmacy and Drug Inspector; Rhonda Hamilton, Pharmacy and Drug Inspector; Jessica Williams, Pharmacy and Drug Inspector, Amanda Harding, Pharmacy and Drug Inspector; Katie Busroe, Pharmacy Inspections and Investigations Supervisor and Darla Sayre, Executive Staff Advisor.

Guests: Greg Killmeier, Tammy McDowell, Brian Fingerson and Ozair Shariff.

**NEW BOARD MEMBERS** Vice-President Rhodes welcomed the new Board members. Melissa Hall administered the Oath of Office to Jonathan Van Lahr and Christopher Harlow.

**ELECTION OF OFFICERS** Peter Cohron nominated Jill Rhodes as President of the Board. With no other nominations, Peter Cohron moved to appoint Jill Rhodes as President. Jonathan Van Lahr seconded, and the motion passed unanimously with 5 votes and one abstention [Jill Rhodes]. Melissa Hall administered the Oath of Office to President Rhodes.

John Fuller nominated Peter Cohron as Vice-President of the Board. With no other nominations, John Fuller moved to appoint Peter Cohron as Vice-President. Chris Harlow seconded, and the motion passed unanimously with 4 votes and one abstention [Peter Cohron]. Melissa Hall administered the Oath of Office to Vice-President Cohron.

**MINUTES** John Fuller moved to accept the minutes from the November 5, 2020 Board meeting. Jody Forgy seconded, and the motion passed unanimously. John Fuller moved to accept the minutes from the November 17, 2020 Special Called meeting. Jody Forgy seconded, and the motion passed unanimously.

**EXECUTIVE DIRECTOR** Mr. Hadley presented the eMars financial reports for November 2020 and December 2020 for review.

Mr. Hadley presented the Policy and Procedures Manual with the requested edits for Board approval. Chris Harlow moved to table this item until the next meeting for further review. Jody Forgy seconded, and the motion passed unanimously.

**NABP PASSPORT PROGRAM** William Cover, NABP gave an overview of the Passport Program. The NABP Emergency Passport Program was created to provide critical licensure and board action/disciplinary screening to meet criteria set by our member boards of pharmacy as a means for states to grant temporary emergency licensure safely and efficiently for pharmacists, pharmacy technicians, and pharmacist interns in response to the coronavirus disease 2019 (COVID-19). Implementation time for Board's participation is approximately two business days.

**FDA COMPOUNDING MOU** Eden Davis gave a brief overview of the FDA Compounding Memorandum of Understanding that would require 503A facilities dispensing or distributing greater than 50% of compounding human products to report adverse events for information sharing purposes between states. Mr. Cover, NABP informed the Board that NABP had been asked by the FDA to assist in the development of the information network. Functionality in the eProfile was put into production last week. Tammy McDowell, Nutrishare appeared before the Board requesting the Board participate in this program. She stated that reporting is not a burden and provided multiple consumer letters requesting participation. Chris Harlow moved to table this item until the February meeting and requested Board staff elicit comments from participating pharmacies with a second from Jody Forgy. Katie Busroe provided a breakdown of compounding pharmacies permitted in Kentucky. Inspection staff currently conducts a comprehensive annual inspection of these pharmacies and does not see an issue with the additional workload. President Rhodes asked if they were aware of how the inspection of provider offices would impact the inspection staff. Ms. Busroe stated that is unknown at this time or if the Board of Pharmacy would have jurisdiction to inspect those facilities. The motion passed unanimously.

**MPJE PROGRAM** Maureen Garrity, NABP gave an overview of the MPJE program specifically addressing questions from the Board at the November meeting regarding item writing. Item writers from each state are responsible for the content of exam questions. Questions developed by the writers are reviewed and then tested prior to implementation. There is an annual review of the exam content. Ms. Garrity advised the Board that each state is allowed 2 to 10 item writers for the exam review.

**201 KAR 2:410E to ORDINARY REGULATION** Ms. Davis advised the Board that 201 KAR 2:410E became effective for 270 days on the date of filing. The expiration date is August 20, 2021. The Board can allow it to expire at that time, refile with a minor change or seek to convert the emergency regulation into an ordinary regulation. Conversion to an ordinary regulation would require a statutory change for immunizations down to 3 years of age. A regulatory change is required to allow certified pharmacy technicians and pharmacist interns to immunize down to 9 years of age. Chris Harlow moved to direct the Regulation Committee to proceed with the conversion of 201 KAR 2:410E into an ordinary regulation. Jody Forgy seconded, and the motion passed unanimously.

**KRS 315.010(13)(d)** Ms. Davis advised the Board that amendments to this statute in June 2017 omitted language inadvertently. Ralph Bouvette stated these amendments were made without the advisement or involvement of the Board. Peter Cohron moved to direct the Regulation Committee to draft language for amending the statute to include the original omitted language. Jody Forgy seconded, and the motion passed unanimously.

**ETHICS TRAINING** Kathryn Gabhart, Executive Director of the Executive Branch Ethics Commission presented a training program for the Board members.

**FDA ENFORCEMENT OF PDMA** Ms. Davis provided a brief overview of the Temporary Policy on Prescription Drug Marketing Act Requirements for Distribution of Drug Samples during the COVID-19 Public Health Emergency. The FDA will not take action on a manufacturer or wholesale distributor shipping to a consumer's home if there is a written request from the prescriber authorizing the consumer as their designee/agent and documentation of receipt. They will also allow for shipment to the prescriber's home address if utilizing this address as an office. Ms. Davis sees no issues with our regulations or statutes as this does not allow the shipping of drug samples to pharmacies. The Board has received numerous questions regarding this. Paula York, OIG stated that controlled substance drug samples are not allowed in Kentucky. Peter Cohron moved for the Board to take this under advisement and direct Larry Hadley to provide an explanation to the public regarding the shipping of drug samples excluding controlled substances.

**LETTER OF REPRIMAND** Ms. Davis informed the Board that 201 KAR 2:061, Section 3 references a letter of reprimand as a finding of the case review panel. Historically this has been used infrequently. Ms. Davis requested the Board consider utilizing this practice as a form of informal discipline not reportable to NABP or the NPDB. This regulation is currently with the Regulation Committee for amended language. John Fuller moved for the Board to authorize the use of the letter of reprimand as a non-disciplinary way of disposing of a case in which there is a violation of law. A letter of reprimand is deemed to not be adverse action on a license or permit; and for the Board to address the question regarding letter of reprimand at the February meeting through the use of a declaratory ruling. Jonathan Van Lahr seconded, and the motion passed unanimously.

**201 KAR 2:410E CONFUSION** President Rhodes suggested distributing a table clarifying the path you can take as a pharmacist, pharmacist intern or pharmacy technician if immunizing under the emergency regulation. John Fuller agreed. The information posted on the website does address these questions but a table addressing the many questions received in the Board office would be helpful. Jonathan Van Lahr moved to direct Eden Davis with assistance from Trish Freeman to draft a table/chart addressing the requirements for immunizing pursuant to 201 KAR 2:410E. John Fuller seconded, and the motion passed unanimously.

Jonathan Van Lahr recused himself and was placed in the Waiting Room.

**DECLARATORY RULING** Eden Davis presented a request from a permitted pharmacy to utilize licensed nurses and other licensed healthcare professionals to administer the COVID-19 vaccine within the pharmacy. Ms. Davis suggested the Board use a Declaratory Ruling to address this question. The Board of Pharmacy is authorized to issue Opinion and Declaratory Judgments pursuant to KRS 13A.130(3) and 13A.010(2)(b). A declaratory ruling does not create a new law or modify an existing one. Board of Pharmacy declaratory rulings are not binding, and are only offered as a guideline to licensees, permit-holders and registrants who wish to engage in a safe practice of pharmacy that promotes, preserves and protects public health, safety and welfare of the citizens of the Commonwealth.

John Fuller recused himself and was placed in the Waiting Room.

Chris Harlow moved to approve the ruling as drafted [attached]. Peter Cohron seconded, and the motion passed unanimously.

Jonathan Van Lahr and John Fuller returned to the meeting. President Rhodes called for a lunch break. Meeting resumed at 1:49 p.m.

**PROFESSIONAL RECOVERY NETWORK COMMITTEE** Chair Brian Fingerson provided a report on the committee. There are currently 39 individuals being monitored at this time; 33 pursuant to Agreed Orders and 6 under voluntary basis. The one hour continuing education program [developed with the assistance of Trish Freeman] has been submitted to Larry Hadley.

**REGULATION COMMITTEE** Chair Ralph Bouvette advised the Board the committee is currently working on 201 KAR 2:270, 201 KAR 2:074 and drafting a new regulation to address requirements for non-resident pharmacy permits.

**PHARMACY TECHNICIAN COMMITTEE** Committee Member Peter Cohron stated the committee has reviewed the results from the survey sent to Kentucky licensed pharmacists and registered pharmacy technicians. From those results, the committee recommends moving forward with the following:

- Administration of Adult Immunizations;
- Administration of Pediatric Immunizations;
- Transfer of non-controlled prescriptions;
- Receive verbal orders of new non-controlled prescriptions and clarifications of non-controlled prescriptions from provider; and

- Interpretation of CLIA waived testing or Point of Care testing.

The committee continues to work on the language and training requirements for these duties.

The committee also recommends the Board consider the immunization guidelines and requirements in 201 KAR 2:410E be made permanent.

**DIVERSITY AND INCLUSION COMMITTEE** Larry Hadley informed the Board that Shannon Borden and Crystal Isaacs were named Co-Chairs of the committee with April Cox as Vice-Chair. Moving forward, the committee will be under the direction of Eden Davis. Due to the holidays, the committee has not met since October.

**CASE REVIEW PANEL** President Rhodes advised the Board that 61 cases were reviewed by the panel at the January 19<sup>th</sup> meeting. Twelve of those cases were revisits.

**CASE REVIEW RECOMMENDATIONS** Peter Cohron recused himself from 19-0319 and 19-0364. John Fuller recused himself from 19-0319 D. Both members were placed in the Waiting Room.

Chris Harlow moved to accept the recommendation of 19-0319 D. Jonathan Van Lahr seconded, and the motion passed unanimously.

**Case 19-0319 D.** Pharmacist allegedly engaged in unprofessional or unethical conduct by engaging in conduct likely to deceive the public with or without established proof of actual injury. Pharmacist allegedly was involved in the dispensing a misbranded controlled substance prescription. The prescription was labeled with the incorrect practitioner name. Alleged Violations of Law: KRS 315.121 (1)(h) and (2)(d); KRS 217.065 (11)(b); KRS 218A.180 (8). **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

John Fuller returned to the meeting.

Chris Harlow moved to accept the recommendation of 19-0364 D. Jody Forgy seconded, and the motion passed unanimously.

**Case 19-0364 D.** Pharmacist allegedly engaged in unprofessional or unethical conduct by divulging or revealing to unauthorized persons patient information by dispensing a prescription for a patient with a different patient's monograph attached. Alleged Violations of Law: KRS 315.121(2)(b) and 201 KAR 2:210 Section 3(1). **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

Peter Cohron returned to the meeting.

John Fuller moved to accept the recommendations of the following cases.

**19-0326 B Revisit.** Pharmacist in charge allegedly failed to transmit corrected information to update the Kentucky All-Schedule Prescription Electronic Reporting System (KASPER) database after receiving a request to correct erroneous information. Pharmacist allegedly engaged in unprofessional or unethical conduct by engaging in conduct likely to deceive the public with or without established proof of actual injury. Pharmacist allegedly dispensed a misbranded controlled substance prescription. The prescription was labeled with the incorrect practitioner name. Alleged Violations of Law: KRS 315.121 (1)(h) and (2)(d); KRS 217.065 (11)(b); KRS 218A.180 (8). **CRP 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 additional 6 hours of continuing education on medication errors and their prevention. CRP vote was unanimous.**

**Case 19-0366 A/E Revisit.** Pharmacy permit holder allegedly sold adulterated drugs by dispensing non-sterile preparations compounded with expired components; sold misbranded drugs by dispensing non-sterile compounded preparations with an assigned beyond use date (BUD) past the expiration of a component; and failed to compound non-sterile preparations pursuant to United States Pharmacopeia (USP) 795. Alleged Violations of Law: KRS 217.055 (1)(a)(2); KRS 217.065 (1) and 201 KAR 2:076 Section 2 (1). E. Pharmacist allegedly engaged in unprofessional or unethical conduct by engaging in conduct likely to deceive, defraud, or harm the public, with or without established proof of harm by verifying 25 non-sterile compounded preparations with expired components, and 15 non-sterile compounded preparation that the BUD exceeded that of the components' expiration. Alleged Violation of Law: KRS 315.121 (2)(d). **No change from previous recommendation, CRP 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 \$10,000 administrative fine, monthly compounding reconciliation reports for one year, an additional 6 hours of compounding continuing education. CRP vote passed with one nay vote from Larry Hadley.**

**Case 19-0366 B Revisit.** Pharmacist in charge (PIC) allegedly engaged in unprofessional or unethical conduct by engaging in conduct likely to deceive, defraud, or harm the public, with or without established proof of harm by verifying 95 compounded preparations with expired components and 65 compounded preparations that the BUD exceeded that of the components; failed to implement a quality assurance program in compounding services; and failed to implement quality assurance program. Alleged Violations of Law: KRS 315.121 (2)(d); 201 KAR 2:076 Section 3 and 201 KAR 2:210 Section 2 (3)(a). **No change from previous recommendation, CRP 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 \$5,000 administrative fine, additional 6 hours of continuing education on compounding. CRP vote passed with one nay vote from Larry Hadley.**

**Case 19-0366 C Revisit.** Pharmacist allegedly engaged in unprofessional or unethical conduct by engaging in conduct likely to deceive, defraud, or harm the public, with or without established proof of harm by verifying 56 non-sterile compounded preparations with expired components, and 16 non-sterile compounded preparation that the BUD exceeded that of the components' expiration. Alleged Violation of Law: KRS 315.121 (2)(d). **No change from previous recommendation, CRP 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 \$3,500 administrative fine, additional 6 hours of continuing education on compounding. CRP vote passed with one nay vote from Larry Hadley.**

**Case 19-0366 D Revisit.** Pharmacist allegedly engaged in unprofessional or unethical conduct by engaging in conduct likely to deceive, defraud, or harm the public, with or without established proof of harm by verifying 23 non-sterile compounded preparations with expired components, and 19 compounded preparation that the BUD exceeded that of the components' expiration. Alleged Violation of Law: KRS 315.121 (2)(d). **No change from previous recommendation, CRP 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 \$2,500 administrative fine, additional 6 hours of continuing education on compounding. CRP vote passed with one nay vote from Larry Hadley.**

**Case 19-0366 F Revisit.** Pharmacist allegedly engaged in unprofessional or unethical conduct by engaging in conduct likely to deceive, defraud, or harm the public, with or without established proof of harm by verifying 23 non-sterile compounded preparations with expired components, and 23 non-sterile compounded preparation that the BUD exceeded that of the components' expiration. Alleged Violation of Law: KRS 315.121 (2)(d). **No change from previous recommendation, CRP 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 \$2,500 administrative fine, additional 6 hours of continuing education on compounding. CRP vote passed with one nay vote from Larry Hadley.**

**Case 20-0094 A.** Pharmacy permit holder allegedly engaged in unethical or unprofessional conduct by failing to notify patient of a consumer level medication recall. Alleged Violation of Law: KRS 315.121 (1)(a) – unprofessional and unethical conduct. **CRP 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 establish procedures for drug recall submitted for Board approval prior to renewal or June 30, 2021. CRP vote was unanimous.**

**Case 20-0094 B.** Pharmacist in charge (PIC) allegedly engaged in unprofessional or unethical conduct likely to harm the public with or without established proof of actual injury by failing to notify patient of a consumer level medication recall. Alleged Violations of Law: KRS 315.121 (2)(d) - engaging in conduct likely to deceive, defraud, or harm the public, demonstrating a willful or careless disregard for the health, welfare, or safety of a patient, or engaging in conduct which substantially departs from accepted standards of pharmacy practice ordinarily exercised by a pharmacist, with or without established proof of actual injury; and 201 KAR 2:205 Section 2 (3)(a) – PIC of a pharmacy is responsible for resolving identified problems related to quality assurance. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0094 C.** Pharmacist allegedly engaged in unprofessional or unethical conduct likely to harm the public with or without established proof of actual injury by failing to notify patient of a consumer level medication recall. Alleged Violation of Law: KRS 315.121 (2)(d) - engaging in conduct likely to deceive, defraud, or harm the public, demonstrating a willful or careless disregard for the health, welfare, or safety of a patient, or engaging in conduct which substantially departs from accepted standards of pharmacy practice ordinarily exercised by a pharmacist, with or without established proof of actual injury. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0104 A.** Pharmacy permit holder allegedly engaged in unprofessional or unethical conduct by divulging or revealing patient information to an unauthorized person(s); and engaged in fraud in connection with the practice of pharmacy by billing one patient's insurance for another patient's prescriptions. Alleged Violations of Law: KRS 315.121(1)(a)—unprofessional or unethical conduct, and KRS 315.121(1)(f)—engaging in fraud in connection with the practice of pharmacy. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0104 B.** Pharmacist allegedly engaged in fraud in connection with the practice of pharmacy by billing one patient's insurance for another patient's prescriptions; engaged in unprofessional or unethical conduct by divulging or revealing patient information to an unauthorized person(s); demonstrated a willful or careless disregard for the health, welfare, or safety of a patient by dispensing one patient's prescriptions to another patient; and willfully or knowingly failed to maintain complete and accurate records of all drugs dispensed by maintaining one patient profile for two different patients after the patient asked pharmacy staff to separate. Alleged Violations of Law: KRS 315.121(1)(f)—engaging in fraud in connection with the practice of pharmacy; KRS 315.121(2)(b)—divulging or revealing to unauthorized persons patient information or the nature of professional services rendered without the patient's express consent; KRS 315.121(2)(d)—engaging in conduct likely to deceive, defraud, or harm the public, demonstrating a willful or careless disregard for the health, welfare, or safety of a patient; and KRS 315.121(2)(g)—willfully or knowingly failing to maintain complete and accurate records of all drugs dispensed in compliance with federal and state laws, rules, or administrative regulations. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0105 A.** Pharmacy permit holder allegedly engaged in unprofessional or unethical conduct by divulging or revealing patient information to an unauthorized person(s); and engaged in fraud in connection with the practice of pharmacy by billing one patient's insurance for another patient's prescriptions. Alleged Violations of Law: KRS 315.121(1)(a)—unprofessional or unethical conduct; and KRS 315.121(1)(f)—engaging in fraud in connection with the practice of pharmacy. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0105 B.** Pharmacist allegedly engaged in fraud in connection with the practice of pharmacy by billing one patient's insurance for another patient's prescriptions; engaged in unprofessional or unethical conduct by divulging or revealing patient information to an unauthorized person(s); demonstrated a willful or careless disregard for the health, welfare, or safety of a patient by dispensing one patient's prescriptions to another patient; and willfully or knowingly failed to maintain complete and accurate records of all drugs dispensed by maintaining one patient profile for two different patients after the patient asked pharmacy staff to separate. Alleged Violations of Law: KRS 315.121(1)(f)—engaging in fraud in connection with the practice of pharmacy; KRS 315.121(2)(b)—divulging or revealing to unauthorized persons patient information or the nature of professional services rendered without the patient's express consent; KRS 315.121(2)(d)—engaging in conduct likely to deceive, defraud, or harm the public, demonstrating a willful or careless disregard for the health, welfare, or safety of a patient; and KRS 315.121(2)(g)—willfully or knowingly failing to maintain complete and accurate records of all drugs dispensed in compliance with federal and state laws, rules, or administrative regulations. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0108 A.** Pharmacy permit holder allegedly engaged in unprofessional or unethical conduct by refusing to fill a patient's prescription, thus delaying care. Alleged Violation of Law: KRS 315.121 (1)(a)—unprofessional or unethical conduct. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0108 B.** Pharmacist allegedly engaged in unprofessional or unethical conduct by refusing to fill a patient's prescription, thus delaying care. Alleged Violation of Law: KRS 315.121 (2)(d)—engaging in conduct likely to deceive, defraud, or harm the public, demonstrating a willful or careless disregard for the health, welfare, or safety of a patient, or engaging in conduct which substantially departs from accepted standards of pharmacy practice ordinarily exercised by a pharmacist or pharmacy intern, with or without established proof

of actual injury. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0111.** Pharmacist allegedly as pharmacist in charge (PIC), failed to take an accurate inventory of all controlled substances in the pharmacy's possession. Alleged Violations of Law: KRS 218A.200 (7)(a) – requirement for pharmacist to taken an inventory of all controlled substances in his possession at least every two (2) years; and 201 KAR 2:205 Section 2 (3)(e) – PIC responsibility to make or file any reports required by state or federal laws and regulations. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote passed with one nay vote from Amanda Harding.**

**Case 20-0126 A.** Pharmacy permit holder allegedly failed to provide adequate security and control of drugs. The pharmacy reported the loss of 4 buprenorphine-naloxone 8-2mg films and 4 buprenorphine-naloxone 4-1mg films due to employee pilferage from 8/4/20 to 9/8/20. Alleged Violation of Law: 201 KAR 2:100 Section 1 – requirement of pharmacy to provide adequate security and control of its controlled substances and prescription legend drugs. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0126 B.** Pharmacist-in-charge (PIC) allegedly failed to provide adequate security and control of drugs. The pharmacy reported the loss of 4 buprenorphine-naloxone 8-2mg films and 4 buprenorphine-naloxone 4-1mg films due to employee pilferage from 8/4/20 to 9/8/20. Alleged Violation of Law: 201 KAR 2:205 Section 2 (3)(b) – Pharmacist-in-charge is responsible for the procurement, storage, security, and disposition of drugs. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0126 C.** Pharmacist allegedly has a mental or physical incapacity that prevents the licensee from engaging in the practice of pharmacy with reasonable skill, competence, and safety to the public. Alleged Violation of Law: KRS 315.121 (1)(b) - Mental or physical incapacity that prevents the licensee from engaging in the practice of pharmacy with reasonable skill, competence, and safety to the public. **CRP 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 six month revocation with a KYPRN monitoring agreement. CRP vote was unanimous.**

**Case 20-0199 A.** Pharmacy permit holder allegedly failed to provide adequate security and control of drugs. Pharmacy reported a loss of controlled substances. Pharmacy reported a bottle of 30 tablets of buprenorphine/naloxone 8-2 mg missing from the pharmacy shelf. Alleged Violation of Law: 201 KAR 2:100 Section 1 – a pharmacy shall provide adequate security of its controlled substances and prescription legend drugs. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0199 B.** Pharmacist in charge (PIC) allegedly failed to provide adequate security and control of drugs. Pharmacy reported a loss of controlled substances. Pharmacy reported a bottle of 30 tablets of buprenorphine/naloxone 8-2 mg missing from the pharmacy shelf. Alleged Violation of Law: 201 KAR 2:205. Section 2(3)(b) – the pharmacist-in-charge shall be responsible for the procurement, storage, security, and disposition of drugs. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0199 C.** Pharmacy technician allegedly except as provided in KRS 315.500, selling, transferring, dispensing, ingesting, or administering a drug for which a prescription drug order is required, without having first received a prescription drug order for the drug. Alleged Violation of Law: KRS 315.121 (2)(f) – Except as provided in KRS 315.500, selling, transferring, dispensing, ingesting, or administering a drug for which a prescription drug order is required, without having first received a prescription drug order for the drug. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0201 A.** Pharmacy permit holder allegedly failed to provide adequate security and control of controlled substances. Pharmacy reported a loss of 673 phentermine tablets in an audit period of approximately 10 months due to employee pilferage over approximately 5 months. Alleged Violation of Law: 201 KAR 2:100 Section 1 – security and control regulation. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0201 B.** Pharmacist in charge allegedly failed to provide adequate security and control of controlled substances. Pharmacy reported a loss of 673 phentermine tablets in an audit period of approximately 10 months due to employee pilferage over approximately 5 months. Alleged Violation of Law: 201 KAR 2:205 Section 2 (3)(b) – PIC requirement to provide drug security. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0201 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) – unprofessional conduct to sell or ingest a drug requiring a prescription drug order without a prescription drug order. **CRP 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. CRP vote was unanimous.**

**Case 20-0203 A.** Pharmacy permit holder allegedly dispensed a misbranded prescription due to a medication error. Patient allegedly received ferrous sulfate instead of bupropion HCL XL on two separate occasions. Alleged Violation of Law: KRS 217.065 (1) – Misbranded for false or misleading labeling. **CRP 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 \$1000 administrative fine, completion by PIC of the ISMP Self-Assessment for Community/Ambulatory Care and submission of Board approved corrective action plan by renewal of pharmacy permit or June 30, 2021. CRP vote was unanimous.**

**Case 20-0203 B.** Pharmacist in charge 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 received ferrous sulfate instead of bupropion HCL XL on two separate occasions. Alleged Violation of Law: KRS 315.121 (2)(d) – Unprofessional or unethical conduct for conduct likely to harm public with or without established proof of actual injury. **CRP 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. CRP vote was unanimous.**

**Case 20-0206 A.** Pharmacy permit holder allegedly sold a misbranded drug due to medication error. Patient allegedly was dispensed a prescription for Hydrocodone/Acetaminophen 10/325 mg that contained Hydrocodone/Acetaminophen 5/325 mg tablets. Alleged Violation of Law: KRS 217.065 (1) - If its labeling is false or misleading in any particular. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0206 B.** 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 Hydrocodone/Acetaminophen 10/325 mg that contained Hydrocodone/Acetaminophen 5/325 mg tablets. Alleged Violation of Law: KRS 315.121 (2) (d) – Engaging in conduct likely to deceive, defraud, or harm the public, demonstrating a willful or careless disregard for the health, welfare, or safety of a patient, or engaging in conduct which substantially departs from accepted standards of pharmacy practice ordinarily exercised by a pharmacist or pharmacy intern, with or without established proof of actual injury. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0208.** Pharmacy technician allegedly has a mental or physical incapacity that prevents registrant from engaging in assisting in the practice of pharmacy with reasonable skill, competence, and safety to the public. Alleged Violation of Law: KRS 315.121 (1)(b) – mental or physical incapacity preventing registrant from safely assisting in the practice of pharmacy.

**CRP 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. CRP vote was unanimous.**

**Case 20-0213 A.** Pharmacy permit holder allegedly engaged in unethical or unprofessional conduct by failing to sell a prescription for the full quantity of a medication and failing to sell a prescription in a timely manner. Alleged Violation of Law: KRS 315.121 (1)(a) – general unprofessional or unethical conduct. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0213 B.** Pharmacist in charge (PIC) allegedly engaged in unprofessional or unethical conduct by making false, misleading, or deceptive statements concerning the practice of pharmacy; and failed in the appropriate provision of pharmacy services. Alleged Violations of Law: KRS 315.121 (2)(a) – unprofessional or unethical to circulate false, misleading, or deceptive statements concerning the practice of pharmacy; and 201 KAR 2:205 Section 2 (3)(b) – PIC responsible for provision of pharmacy services. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous..**

**Case 20-0213 C.** Pharmacist allegedly engaged in unprofessional or unethical conduct by making false, misleading, or deceptive statements concerning the practice of pharmacy. Alleged Violation of Law: KRS 315.121 (2)(a) – unprofessional or unethical to circulate false, misleading, or deceptive statements concerning the practice of pharmacy. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0215 A.** Pharmacy permit holder allegedly sold a misbranded drug by dispensing an expired medication. Patient allegedly was dispensed Cefdinir for Suspension 125 mg/5 ml bottle that was expired. Alleged Violation of Law: KRS 315.121 (1)(a) – unprofessional or unethical conduct. **CRP Recommendation:**

**There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote passed with Paul Daniels abstaining.**

**Case 20-0215 B.** Pharmacist in charge (PIC) allegedly failed to implement quality assurance programs for pharmacy services designed to objectively and systematically monitor care, pursue opportunities for improvement, resolve identified problems as may exist; and failed in the proper disposition of drugs and the provision of pharmacy services. Alleged Violations of Law: 201 KAR 2:205 Section 2 (3)(a)- Quality assurance programs for pharmacy services designed to objectively and systematically monitor care, pursue opportunities for improvement, resolve identified problems as may exist; and 201 KAR 2:205 Section 2 (3)(b)- The procurement, storage, security, and disposition of drugs and the provision of pharmacy services. **CRP 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 quality assurance, corrective action plan regarding out dated drug product submitted within three months. CRP vote passed with Paul Daniels abstaining.**

**Case 20-0215 C.** 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 Cefdinir for Suspension 125 mg/ 5ml bottle that was expired. Alleged Violation of Law: KRS 315.121 (2)(d) - Engaging in conduct likely to deceive, defraud, or harm the public, demonstrating a willful or careless disregard for the health, welfare, or safety of a patient, or engaging in conduct which substantially departs from accepted standards of pharmacy practice ordinarily exercised by a pharmacist, with or without established proof of actual injury. **CRP 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. CRP vote passed with Paul Daniels abstaining.**

**Case 20-0216 A.** Pharmacy permit holder allegedly engaged in unprofessional or unethical conduct by not selling prescriptions in a timely manner; sold a misbranded prescription; and auxiliary directions for titrated dose dispensed with prescription included misspelling of the word days. Alleged Violations of Law: KRS 315.121 (1)(a) – general unprofessional or unethical conduct; and KRS 217.065(1)(a) – misbranded if labeling is false or misleading in any particular. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0216 B.** Pharmacist in charge (PIC) allegedly engaged in unprofessional or unethical conduct by engaging in conduct likely to deceive, defraud, or harm the public, with or without established proof of actual injury. Auxiliary directions for titrated dose dispensed with prescription included misspelling of the word days; failed to conduct an appropriate prospective drug use review; and failed in the proper provision of pharmacy services. Alleged Violations of Law: KRS 315.121 (2)(d) – unprofessional or unethical conduct to engage in conduct likely to deceive public with or without established proof of actual injury; 201 KAR 2:210 Section 4 – pharmacist required to conduct a prospective drug use review prior to dispensing; and 201 KAR 2:205 Section 2 (3)(b) – PIC responsible for provision of pharmacy services. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0216 C.** Pharmacist allegedly engaged in unprofessional or unethical conduct by engaging in conduct which substantially departs from accepted standards of pharmacy practice ordinarily exercised by a

pharmacist, with or without established proof of actual injury; and failed to conduct an appropriate prospective drug use review. Alleged Violations of Law: KRS 315.121 (2)(d) – unprofessional or unethical conduct to engage in conduct that substantially departs from accepted standards of pharmacy practice ordinarily exercised by a pharmacist, with or without established proof of actual injury; and 201 KAR 2:210 Section 4 – pharmacist required to conduct a prospective drug use review prior to dispensing. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0216 D.** Pharmacist allegedly engaged in unprofessional or unethical conduct by engaging in conduct likely to deceive, defraud, or harm the public, with or without established proof of actual injury. Auxiliary directions for titrated dose dispensed with prescription included misspelling of the word days; and failed to conduct an appropriate prospective drug use review. Alleged Violations of Law: KRS 315.121 (2)(d) – unprofessional or unethical conduct to engage in conduct likely to deceive public with or without established proof of actual injury; and 201 KAR 2:210 Section 4 – pharmacist required to conduct a prospective drug use review prior to dispensing. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0219 A.** Pharmacy permit holder allegedly engaged in unprofessional or unethical conduct by selling a prescription to unauthorized person. Alleged Violation of Law: KRS 315.121 (1) (a) – general unprofessional or unethical conduct. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0219 B.** Pharmacist in charge (PIC) allegedly failed in the appropriate provision of pharmacy services by selling a prescription to unauthorized person. Alleged Violation of Law: 201 KAR 2:205 Section 2 (3)(b) – PIC responsible for provision of pharmacy services. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0226.** Permit holder allegedly failed to provide written notification to the Kentucky Board of Pharmacy (Board) 15 days prior to permanent closure. Alleged Violation of Law: 201 KAR 2:106 Section 2 (1)(c) – requirement to notify Board prior to closure. **CRP 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. CRP vote was unanimous.**

**Case 20-0232 A.** Pharmacy permit holder allegedly closed Pharmacy for more than 5 consecutive days without notifying the Board of Pharmacy. Pharmacy was closed from December 14, 2020 to December 31, 2020. Alleged Violation of Law: 201 KAR 2:106 Section 2 (2) (a) – Failure to immediately notify the Board of Pharmacy of a deviation of business hours of 5 consecutive business days or greater. **CRP 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. CRP vote was unanimous.**

**Case 20-0232 B.** Pharmacist in charge allegedly failed to immediately notify the Board of Pharmacy of a deviation of business hours of 5 consecutive business days or greater. Alleged Violation of Law: 201 KAR 2:205 Section 2 (3) (d) – Pharmacist in Charge is required to report to the Board of Pharmacy within 14 calendar days any change in the operating hours of the Pharmacy. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

Jonathan Van Lahr seconded, and the motion passed with one nay vote on cases 19-0326 C, 19-0366 A/E, 19-0366 B, 19-0366 C, 19-0366 D and 19-0366 F cast by Peter Cohron.

Peter Cohron moved to go into closed session pursuant to KRS 61.810(1)(c) and (j) to discuss proposed or pending litigation on Cases 19-0299 A, 19-0299 C and 19-0299 D to include the Board, Larry Hadley, Jessica Williams, Eden Davis and Darla Sayre. John Fuller seconded, and the motion passed unanimously. Peter Cohron moved to come out of closed session after a discussion of pending discipline for Cases 19-0299 A, 19-0299 C and 19-0299 D. Jody Forgy seconded, and the motion passed unanimously. John Fuller moved to accept the recommendation for Cases 19-0299 A, 19-0299 C and 19-0299 D. Peter Cohron seconded, and the motion passed unanimously.

**Case 19-0299 A.** Pharmacy permit holder allegedly engaged in unethical or unprofessional conduct by failing to compound sterile preparations pursuant to United States Pharmacopeia (USP) Chapter 797. Pharmacy failed to put in place a program of sterility testing required for extending beyond use dates (BUDs) of ophthalmic preparations and inhalation solutions. Pharmacy failed to maintain complete and accurate compounding records of sterile preparations. Misbranded prescriptions from approximately 128 lots were dispensed with extended BUDs between 5/1/19 and 10/14/19. Alleged Violations of Law: KRS 315.121 (1)(a); 201 KAR 2:076 Section 2 (2); and KRS 217.065 (1). **No change from previous recommendation: CRP 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, administrative fine of \$50,000 and probation for 5 years under the following terms: quarterly inspections with inspection fee not to exceed \$1,000 per inspection to be paid within 30 days of invoicing[if no sterile compounding, semi-annual inspections]; compliance with USP 797 incorporated by reference in 201 KAR 2:076, to include testing when extending beyond use date; monthly reconciliation of compounding records conducted by PIC during probation period; use of compounding sheets that are validated as accurate by PIC; spicity items/vials in compounding record; documentation of ongoing quality control program and quality assurance procedures to be made available upon request. Terms do not apply if permit is closed. [Provision: if owners open or purchase another pharmacy all fines and terms in this Agreed Order must be followed.] CRP vote was unanimous.**

**Case 19-0299 C.** 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 failing to compound sterile preparations pursuant to United States Pharmacopeia (USP) Chapter 797. Pharmacist verified 37 lots of misbranded ophthalmic preparations and 5 lots of misbranded inhalation solutions with beyond use dates exceeding limits for compounded sterile preparations not subject to sterility testing. Alleged Violation of Law: KRS 315.121 2(d). **No change from previous recommendation: CRP 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 \$2,500 administrative fine, probation for 5 years; live CE training approved by the Board for sterile compounding completed within 6 months if working at sterile compounding facility; 5 hours of additional compounding CE per year of probation. CRP vote was unanimous.**

**Case 19-0299 D.** Pharmacist verified 57 lots of misbranded ophthalmic preparations and 9 lots of misbranded inhalation solutions with beyond use dates exceeding limits for compounded sterile preparations not subject to sterility testing. Alleged Violation of Law: KRS 315.121 2(d). **No change from previous recommendation: CRP 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 \$2,500 administrative fine, probation for 5 years; live CE training approved by the Board for sterile compounding completed within 6 months if working at sterile compounding facility; 5 hours of additional compounding CE per year of probation. CRP vote was unanimous.

Peter Cohron moved to go into closed session pursuant to KRS 61.810(1)(c) and (j) to discuss proposed or pending litigation on Cases 20-0198 A, 20-0198 B, 20-0198 C, 20-0202 A, 20-0202 B, 20-0202 C, 20-0202 D, 20-0211 A, 20-0211 B AND 20-0211 C to include the Board, Larry Hadley, Amanda Harding, Paul Daniels, Eden Davis and Darla Sayre. Jody Forgy seconded, and the motion passed unanimously. Chris Harlow moved to come out of closed session after a discussion of pending discipline for Cases 20-0198 A, 20-0198 B, 20-0198 C, 20-0202 A, 20-0202 B, 20-0202 C, 20-0202 D, 20-0211 A, 20-0211 B AND 20-0211 C. Peter Cohron seconded, and the motion passed unanimously. Chris Harlow moved to accept the recommendation for Cases 20-0198 B and 20-198 C. Peter Cohron seconded, and the motion passed unanimously.

**Case 20-0198 B.** Pharmacist in charge (PIC) allegedly failed to provide adequate security and control of drugs. Pharmacy reported a loss of controlled substances due to employee pilferage. The pharmacy reported a loss of 949 dosage units of alprazolam tablets and 7,443 dosage units of various schedule II of controlled substances due to employee pilferage. Alleged Violation of Law: 201 KAR 2:205. Section 2(3)(b) – the pharmacist-in-charge shall be responsible for the procurement, storage, security, and disposition of drugs. **CRP 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 six hours of continuing education on quality assurance or drug diversion. Must be involved with six month audit and monthly reconciliation reports. CRP vote was unanimous.**

**Case 20-0198 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) – Except as provided in KRS 315.500, selling, transferring, dispensing, ingesting, or administering a drug for which a prescription drug order is required, without having first received a prescription drug order for the drug. **CRP 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. CRP vote was unanimous.**

Chris Harlow moved to accept the recommendation for Cases 20-0202 A, 20-0202 B, 20-0202 C, 20-0202 D, 20-0211 A, 20-0211 B AND 20-0211 C. John Fuller seconded, and the motion passed unanimously.

**Case 20-0202 A.** Pharmacy permit holder allegedly engaged in unprofessional or unethical conduct by delaying the provision of pharmacy services. Consumer allegedly did not receive insulin when promised; and engaged in unprofessional or unethical conduct by employing a registered pharmacy technician that did not transfer a consumer phone call to a pharmacist upon request. Alleged Violation of Law: KRS 315.121 (1)(a) – general unprofessional or unethical conduct. **CRP 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 \$1,000 administrative fine, approved corrective action plan to address training issues in this area. CRP vote was unanimous.**

**Case 20-0202 B.** Pharmacist in charge (PIC) allegedly failed in the provision of pharmacy services. Consumer's phone call was allegedly not transferred to a pharmacist when requested. Alleged Violation of Law: 201 KAR 2:205 Section 2 (3)(b) – PIC duties and responsibilities include provision of pharmacy services. **CRP 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 additional 6 hours of continuing education on quality assurance. CRP vote was unanimous.**

**Case 20-0202 C.** Pharmacist allegedly engaged in unprofessional or unethical conduct by not speaking with a consumer when consumer requested to speak with a pharmacist. Alleged Violation of Law: KRS 315.121 (1)(a) – general unprofessional or unethical conduct. **CRP 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 additional 6 hours of continuing education on pharmacy law. CRP vote was unanimous.**

**Case 20-0202 D.** Registered pharmacy technician allegedly engaged in unprofessional or unethical conduct by failing to transfer a consumer phone call to a pharmacist upon request to speak with a pharmacist. Alleged Violation of Law: KRS 315.121 (1)(a) – general unprofessional or unethical conduct. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0211A.** Pharmacy permit holder allegedly engaged in unprofessional or unethical conduct. Alleged Violation of Law: KRS 315.121 (1)(a) – general unprofessional or unethical conduct. **CRP Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice. CRP vote was unanimous.**

**Case 20-0211B.** Pharmacist in charge allegedly engaged in unprofessional or unethical conduct by engaging in conduct likely to deceive, defraud, or harm the public or conduct which substantially departs from accepted standards of pharmacy practice ordinarily exercised by a pharmacist, with or without established proof of actual injury; failed to provide appropriate patient counseling; and failed in provision of pharmacy services. Alleged Violations of Law: KRS 315.121 (2)(d) – unprofessional or unethical conduct for conduct likely to deceive, defraud, or harm the public or departs from accepted standards of practice with or without proof of actual injury; 201 KAR 2:210 Section 2 (4) – elements of patient counseling including dosage form, dose, route of administration and special directions and precautions; and 201 KAR 2:205 Section 2 (3)(b) – PIC responsible for provision of pharmacy services. **CRP 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. CRP vote was unanimous.**

**Case 20-0211 C.** Pharmacist allegedly engaged in unprofessional or unethical conduct by engaging in conduct likely to deceive, defraud, or harm the public or conduct which substantially departs from accepted standards of pharmacy practice ordinarily exercised by a pharmacist, with or without established proof of actual injury; and failed to perform proper prospective drug use review. Alleged Violations of Law: KRS 315.121 (2)(d) – unprofessional or unethical conduct for conduct likely to deceive, defraud, or harm the public or departs from accepted standards of practice with or without proof of actual injury; and 201 KAR 2:210 Section 4 (2) – prospective drug use shall include assessment of a patient's drug therapy and the prescription order. **CRP 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. CRP vote was unanimous.**

Chris Harlow moved to dismiss Case 20-0198 A due to insufficient evidence of a violation. The motion died for lack of a second. Peter Cohron moved to table Case 20-0198 A until the next meeting. Jody Forgy seconded, and the motion passed unanimously.

Peter Cohron moved to go into closed session pursuant to KRS 61.810(1)(c) and (j) to discuss proposed or pending litigation on Case 17-0496 A and the Health & Wellness Compounding Pharmacy application to include the Board, Larry Hadley, Amanda Harding, Eden Davis and Darla Sayre. Jody Forgy seconded, and the motion passed unanimously. Chris Harlow moved to come out of closed session after a discussion of Case 17-0496 A, the Health & Wellness Compounding Pharmacy application and a small break. Jody Forgy seconded, and the motion passed unanimously.

John Fuller moved for further review by the Case Review Panel of Case 17-0496 A. Peter Cohron seconded, and the motion passed unanimously. Chris Harlow moved to approve the Health & Wellness Compounding Pharmacy application and issue the non-resident pharmacy permit. Peter Cohron seconded, and the motion passed unanimously.

**CORRESPONDENCE** Chris Harlow moved to approve the following off-site storage requests:

- Total Care Pharmacy #7, P07476
- Ross Drugs, P02569
- Cynthia Hometown Pharmacy, P07853

The approval is for the offsite location only. Pharmacies must adhere to the current requirements regarding the age of records stored onsite. Peter Cohron seconded, and the motion passed unanimously.

**DMS PHYSICIAN VACCINE PROTOCOL** Chris Harlow moved to direct Board staff publish this protocol on the Kentucky Board of Pharmacy website. Peter Cohron seconded, and the motion passed unanimously.

**ELECTRONIC PRESCRIBING OF CONTROLLED SUBSTANCES** Paula York, Office of Inspector General provided an update on KRS 218.182 which mandates the electronic prescribing of controlled substances effective January 1, 2021. There is a waiver process in place with OIG. As of January 27, 2021, KASPER allows a pharmacist to conduct a search for prescribers with waivers using EPCS Prescriber Waiver Lookup. Trish Freeman stated that a search for waivers is voluntary only. Pharmacists are not required to verify that a waiver is in place. Larry Hadley suggested providing this information to pharmacists through the website and email notification.

**LEGISLATION/REGULATION** Eden Davis provided a report of Kentucky Board of Pharmacy regulations; those in the legislative process and those due to sunset this year.

**201 KAR 2:210** A request was received from Walgreens for a definition of 'new prescription'. Eden Davis stated that this would be best resolved through a Declaratory Ruling. Peter Cohron moved to direct Eden Davis to draft the ruling for presentation at the next Board meeting. Jody Forgy seconded, and the motion passed unanimously.

**HOUSE BILL 219** Larry Hadley presented HB 219 to the Board and requested a position statement from the Board. Chris Harlow moved to fully support this bill with the removal of the limitation of thirty hypodermic syringes or needles. Peter Cohron seconded, and the motion passed unanimously. Shannon Stiglitz addressed

the Board with concerns regarding the log requirement and suggested encouraging the use of education materials rather than requiring them.

**PROPOSED LEGISLATION** Larry Hadley informed the Board of several bills introduced during the present legislative session impacting the practice of pharmacy.

### **COMMITTEE APPOINTMENTS**

President Rhodes informed the Board the votes taken at the November 5, 2020 Board meeting for the Advisory Council and Professional Recovery Network Committee appointments were not conducted according to Open Meetings Law.

President Rhodes requested Board members submit their votes for the appointment of two vacancies on the Advisory Council by Chat or verbally. Votes received [majority indicated with an asterisk] with Jonathan Van Lahr and Jody Forgy abstaining:

- Nicole Barretiere – 1
- Jacob Dotson – 1
- Cindy Cummings – 2\*
- Laurel Smith – 2\*
- Lauren Adams – 1
- Mike Wyant – 1

Chris Harlow moved to appoint Cindy Cummings and Laurel Smith to the Advisory Council for a four-year term. Peter Cohron seconded, and the motion passed unanimously with two abstentions, Jonathan Van Lahr and Jody Forgy.

President Rhodes requested Board members submit their votes for the appointment of three vacancies on the Professional Recovery Network Committee by using Chat or verbally. Vote received [majority indicated with an asterisk] with Jody Forgy abstaining:

- Karen Blumenschein – 3\*
- Nancy Randall – 2
- Nicole Barretiere – 1
- Jacob Dotson – 2
- Jessica Johnson – 3\*
- Dan Wermeling – 2
- Joel Thornbury – 1
- Courtney Eatman – 1

Tiebreaking votes received [majority indicated with an asterisk] between Nancy Randall, Dan Wermeling and Jacob Dotson with Jody Forgy abstaining:

- Nancy Randall – 1
- Dan Wermeling – 2\*
- Jacob Dotson – 2\*

Tiebreaking votes received [majority indicated with an asterisk] between Dan Wermeling and Jacob Dotson with Jody Forgy abstaining:

- Dan Wermeling – 2
- Jacob Dotson – 3\*

Peter Cohron moved to appoint Karen Blumenschein, Jessica Johnson and Jacob Dotson to the Professional Recovery Network Committee for a four-year term. Jonathan Van Lahr seconded, and the motion passed unanimously with Jody Forgy abstaining.

President Rhodes requested Board members submit their votes for the appointment of seven members to the Medication Safety Committee by using Chat or verbally. Vote received [majority indicated with an asterisk] with Jody Forgy abstaining:

- Elizabeth Hess – 3\*
- Melissa Roberson – 3\*
- Theresa Porter – 3\*
- Jessica Schmurr – 4\*
- Jeremy Beasley – 1
- Amanda Thompson – 2\*
- Amy Billimoria – 3\*
- Amanda Hall – 1
- Katie Singletary – 1
- Jennifer Reid – 1
- Katie Johnson – 2\*
- Paul Mahan – 1
- Traci Beasley – 1
- Jeremy Campbell – 1
- Shaina Doyen – 1
- David Brown – 1

The Board received one application for a consumer member from Donna Crain Drury. Chris Harlow moved to amend the remaining consumer member vacancy with a pharmacy technician. Peter Cohron seconded, and the motion passed unanimously. Joel Thornbury stated that the KPhA could provide a recommendation for the pharmacy technician vacancy after its next meeting. Chris Harlow moved to consider a recommendation from the KPhA for the pharmacy technician member vacancy at the next meeting. Peter Cohron seconded, and the motion passed unanimously. Jonathan Van Lahr moved to appoint Elizabeth Hess, Melissa Robertson, Theresa Porter, Jessica Schmurr, Amanda Thompson, Amy Billimoria, Katie Johnson and Donna Crain Drury to the Medication Safety Committee. Jody Forgy seconded, and the motion passed unanimously.

**ISMP FOR MEDICATION ERROR PREVENTION** Chris Harlow moved to direct the Medication Safety Committee consider the utilization of the ISMP Medication Safety Self-Assessment for resolution in medication error disciplinary cases. Peter Cohron seconded, and the motion passed unanimously.

**NALOXONE REGULATION** At a previous meeting, concerns were raised regarding the dispensing of naloxone to an agency without a prescription. The Board requested Larry Hadley to consult with Jody Jagers, KPhA to determine if this is still a concern. This item was tabled until the next meeting.

**USP 795 AND USP 825** At a previous meeting, these items were tabled. This item was tabled until the next meeting to allow current members additional time to review material. Katie Busroe requested that the presentation given by Paul Mahan be provided to the Board.

**EMERGENCY REGULATION DRAFT** This item was tabled until the next meeting.

**APRN COUNCIL MEMBER** President Rhodes advised the Board that one application was received from Angela Bruneman for this appointment. Peter Cohron moved to appoint Angela Bruneman as the Board representative to the APRN Council. Jody Forgy seconded, and the motion passed unanimously. During the meeting, a representative from the APRN Council informed the Board that the representative must be a Board member. President Rhodes asked for a volunteer. Jonathan Van Lahr stated he could not serve in that capacity due to a conflict of interest. Chris Harlow stated he would serve. John Fuller moved to appoint Chris Harlow as

the Board representative to the APRN Council. Jonathan Van Lahr seconded, and the motion passed unanimously with Chris Harlow abstaining.

**PHARMACIST DIABETES TESTING AND INJECTION SUPPLIES PROTOCOL** Emily Followell presented the Pharmacist Diabetes Testing and Injection Supplies Protocol to the Board. After much discussion, Trish Freeman volunteered to work with Emily Followell to incorporate her suggestions into existing protocols. Chris Harlow moved to table this item until a later date. Jonathan Van Lahr seconded, and the motion passed unanimously.

**ASSIGNMENT OF BOARD MEMBER LIAISONS TO BOARD COMMITTEES** President Rhodes suggested that Board members be assigned as liaisons to the Board committees. The Pharmacy Technician Committee, Professional Recovery Network Committee and Case Review Panel currently have Board representation. The Medication Safety Committee, Regulation Committee, Advisory Council and Diversity and Inclusion Task Force do not have a Board representative. This item was tabled until the next meeting.

**BOARD OF PHARMACY EMERGENCY PREPAREDNESS RESPONSE** President Rhodes requested the Board look at this to be better prepared for future disasters and to address concerns arising from the pandemic. Peter Cohron moved to direct the Advisory Council consider this item and to work with KPhA on their response. The motion died for lack of a second. Jonathan Van Lahr moved to table this item until the Board Retreat to draft the charge to the Advisory Council. Jody Forgy seconded, and the motion passed unanimously.

President Rhodes advised the next meeting will be February 23, 2021 beginning at 9:00 a.m. with a limited agenda to be followed by the Board Retreat.

**ADJOURNMENT** Jody Forgy moved to adjourn. Jonathan Van Lahr seconded and the motion passed unanimously. President Rhodes adjourned the meeting at 5:57 p.m.



**ANDY BESHEAR**  
**GOVERNOR**

**KENTUCKY BOARD OF PHARMACY**

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JOHN FULLER, R.PH.  
CHRISTOPHER HARLOW, PHARM D.  
JILL RHODES, PHARM.D.  
JONATHAN VAN LAHR, R.PH

**EXECUTIVE DIRECTOR**

LARRY A. HADLEY, R.PH.

**OPINION AND DECLARATORY RULING:  
ROLE OF OTHER HEALTHCARE PROVIDERS WITHIN A PHARMACY SETTING**

Issued on: January 28, 2021

*The Kentucky Board of Pharmacy issues this declaratory ruling to clarify what constitutes the safe practice of pharmacy within the Commonwealth of Kentucky. The Board of Pharmacy is authorized to issue Opinion and Declaratory Judgments pursuant to KRS 13A.130(3) and 13A.010(2)(b). A declaratory ruling does not create a new law or modify an existing one. Board of Pharmacy declaratory rulings are not binding, and are only offered as a guideline to licensees, permit-holders and registrants who wish to engage in a safe practice of pharmacy that promotes, preserves and protects public health, safety and welfare of the citizens of the Commonwealth.*

The Kentucky Board of Pharmacy is authorized by Kentucky Revised Statutes (KRS) 315 to regulate pharmacies, pharmacists, pharmacist interns, pharmacy technicians, manufacturers, wholesalers, outsourcing facilities and third-party logistics providers within the Commonwealth of Kentucky or transacting business within the Commonwealth of Kentucky in order to promote, preserve, and protect public health, safety and welfare of the citizens of the Commonwealth.

The Kentucky Board of Pharmacy has been asked by a pharmacy if they could utilize licensed nurses and other licensed healthcare professionals to administer the COVID-19 vaccination within a pharmacy.

KRS 315.020 permits licensed healthcare professionals practicing within the statutory scope of their professional license to be utilized by a pharmacy in providing non-pharmacy, healthcare-related services so long as the licensed healthcare professional is operating under their own independent authority given to them pursuant to their professional license. KRS 315.020 prohibits a healthcare professional from being utilized by a pharmacy if the healthcare professional is participating in the practice of pharmacy as defined by KRS 315.010(22) without being registered with the Board of Pharmacy as a technician, intern or pharmacist.

Should the pharmacy wish to utilize nurses and other healthcare professional to administer vaccinations, the non-pharmacy healthcare professional must comply with the laws and regulations of their specific scope of practice in which they are licensed. The pharmacist in charge must ensure that no licensed healthcare professional is being permitted to practice pharmacy without being licensed or registered with the Board of Pharmacy. Other healthcare professionals may not have access to a drug or vaccine until the drug is dispensed from the pharmacy. A licensed healthcare professional may have access to a drug for administration after pharmacy dispensing with the consent of the patient. Consent between the patient and licensed healthcare professional may be obtained orally from the patient or in writing with the patient or patient's guardian's signature.

In conclusion, KRS 315.020 permits licensed healthcare professionals practicing within the statutory scope of their professional license to be utilized by a pharmacy to provide healthcare related services under the licensed healthcare provider's own independent authority. The healthcare professional being utilized must not participate in the practice of pharmacy. If the licensed healthcare professional is to receive a prescription drug for a patient, there must be consent between the patient and the licensed healthcare professional for the licensed healthcare professional to receive the drug for the patient. The drug must be dispensed from the pharmacy to the licensed healthcare professional in a suitable container that is appropriately labeled for subsequent administration.

Sincerely,



Larry A. Hadley, R.Ph.  
Executive Director  
Kentucky Board of Pharmacy

## APPLICABLE STATUTES FROM KENTUCKY PHARMACY LAW

315.020 Only pharmacists to supervise manufacturing of pharmaceuticals or practice pharmacy -- Exceptions -- Persons employed to assist practice of pharmacy after April 1, 2009, to be registered pharmacy technicians or exempt under KRS 315.135. (1) No owner of a pharmacy who is not a pharmacist shall fail to place a pharmacist in charge of his pharmacy or shall permit any person to compound or dispense prescription drugs, medicines, or pharmaceuticals in his place of business except in the presence and under the immediate supervision of a pharmacist. (2) No manufacturer of pharmaceuticals who is not a pharmacist shall fail to place a pharmacist in charge of his place of business or shall permit any person to compound prescription drugs, medicines, or pharmaceuticals in his place of business, except as provided by the board through the promulgation of administrative regulations pursuant to KRS Chapter 13A. (3) Except as provided in subsection (4) of this section, no person shall engage in the practice of pharmacy unless licensed to practice under the provisions of KRS Chapter 315. (4) The provisions of subsection (3) of this section shall not apply to: (a) Pharmacist interns performing professional practice activities under the immediate supervision of a licensed pharmacist. The nature and scope of the activities referred to in this paragraph shall be determined by the board through administrative regulation promulgated pursuant to KRS Chapter 13A; (b) Pharmacist interns and pharmacy technicians performing specifically identified pharmacy practice activities while under the supervision of a pharmacist. The nature and scope of the activities referred to in this paragraph shall be determined by the board through administrative regulation promulgated pursuant to KRS Chapter 13A; (c) Other licensed health care professionals practicing within the statutory scope of their professional practices; or (d) Volunteer health practitioners providing services under KRS 39A.350 to 39A.366. (5) Effective April 1, 2009, an owner of a pharmacy shall not employ a person to assist in the practice of pharmacy unless the person is registered as a pharmacy technician by the board or exempt under KRS 315.135.

315.010 Definitions for chapter. As used in this chapter, unless the context requires otherwise:

(9) "Dispense" or "dispensing" means to deliver one (1) or more doses of a prescription drug in a suitable container, appropriately labeled for subsequent administration to or use by a patient or other individual entitled to receive the prescription drug.

315.002 Declarations of public policy -- Construction of chapter. The practice of pharmacy within the Commonwealth is declared to be a professional practice affecting the public health, safety, and welfare, and is subject to regulation and control in the public interest. It is further declared to be a matter of public interest and concern that the practice of pharmacy, as defined in this chapter, should merit and receive the confidence of the public, and only qualified persons shall be permitted to engage in the practice of pharmacy and ensure the quality of drugs and related devices distributed within the Commonwealth. This chapter shall be liberally construed to carry out these objectives and purposes. The persons entrusted through this chapter to engage in the practice of pharmacy shall be pharmacists. They shall be recognized by the Commonwealth as health care professionals, and, within their statutory scope of practice, providers of pharmacy-related primary care.