

The following checklist is a tool for pharmacists-in-charge (PICs) to review for general responsibilities

Once the Board of Pharmacy is notified of PIC status that individual assumes all responsibility for the operation of the pharmacy in conformance with all laws and administrative regulations pertinent to the practice of pharmacy and the distribution of prescription drugs 201 KAR 2:205

Yes	No	N/A	
General Operations			
			All pharmacists, interns, and technicians working in the pharmacy are currently licensed or registered. ^{1,2}
			All personnel are adequately trained and maintain credentials to perform duties (E.g. immunization, CPR, HIPAA, compounding, CE, naloxone). ^{3,4,5,6}
			Licenses, registrations and permits posted/available and active (E.g. Board, DEA, CMEA, CLIA). ^{7,8}
			The pharmacy's hours are: PIC works _____ hours per week. ¹
			Access to pharmacy restricted. Pharmacist the first person present. The pharmacy is closed in the absence of a pharmacist. ⁹
			PIC aware of how alarm system works (i.e. who is able to disable alarm, who is included in the call tree). ⁹
			Process for notifying Board of Pharmacy in writing within 14 calendar days of: <ul style="list-style-type: none"> - Pharmacy staff changes; and - Change in the employment of the PIC. ¹
			Process for timely notifying Board of Pharmacy in writing of: <ul style="list-style-type: none"> - Normal hours of operation; - Changes to hours; and - Temporary closures. ^{1,10}
			All pharmacists are signing a daily dispensing report or logbook. Able to run daily report upon request. ¹¹
			Board of Pharmacy Inspector for the area: _____
Patient Care			
			A procedure for obtaining, recording and maintain a patient record. <ul style="list-style-type: none"> - Asking for allergies, medical history, medications filled elsewhere, etc. ¹²
			Pharmacist performs a DUR prior to dispensing or preparing for administration any prescription or refill. ¹²
			Counseling offered. <ul style="list-style-type: none"> - Refusal of offer is documented. ¹²
			Pharmacy has a system to monitor and record errors and then investigate those errors. ¹
			Appropriate references are available to all staff. ¹³
			Provide information on safe disposal: counsel, written information or posted signage. ¹⁴
			Generic drug information available: required signage and pamphlet available. ^{15,16}
			Pharmacy has appropriate equipment: <ul style="list-style-type: none"> - Sink with hot and cold water; - Working refrigerator; - Designated compounding area; and - Confidential patient encounter space. ^{4,13,17,18}
			Prescriptions appropriately labeled (i.e. each unit of use container dispensed, generic phrasing, and active ingredients in compounds). ¹⁹

Yes	No	N/A	
Patient Care (continued)			
			Appropriate beyond use dates (e.g. compounded preparations, prescriptions vials, adherence packaging). ^{4,20}
			Implementation of any of the following: - Immunization protocol: prescriber _____ - Naloxone protocol: prescriber _____ - Board authorized protocols: prescriber _____ - Collaborative care agreements: prescriber _____ <i>** Board authorized protocols must be on file with the Board.</i> ^{3,5,21,22,23}
			OTC syringe sale information available: naloxone resources, proper disposal, and substance use disorder treatment resources ²⁴
Controlled Substances			
			Able to do the following for KASPER records: - Access; - Submit; and - Correct. ^{25,26}
			Filing of any report of a theft or loss to: - DEA - The Board - Drug Enforcement and Professional Practices (KASPER office) - Local law enforcement. ^{27,28}
			CII invoices and DEA 222 forms filed separately and easily accessible. - Accountable receiving process in place. ^{28, 29}
			CIII-V invoices accessible, filed separately or easily identifiable. - Accountable receiving process in place. ^{28,29}
			Most recent Controlled Substance Biennial Inventory available: - Time of inventory noted (open or close of business); - CIIIs separated; and - State level controlled substances included. <i>Recommended to complete when change of PIC takes place.</i> ^{28, 30}
			CII prescriptions filed separately, and CIII-CV prescriptions filed separately or easily identifiable. ^{28, 30}
			Controlled substances stored appropriately (e.g. CIIIs in a safe or locked cabinet or dispersed throughout other stock). ³¹
			Power of Attorney (POA) and revocations on file. - CSOS access restricted and monitored. ³²
			Logbook for exempt codeine cough syrup sales appropriately completed with pharmacist initialing sale. ^{33, 34}
			Maintain records of destruction and waste of controlled substances. ^{28, 35}
			Process to review controlled substance handling (e.g. reconciliation of invoices, inventory counts and adjustments). Able to account for all drugs. ¹

Links to all referenced statutes and regulations are available at www.pharmacy.ky.gov.

¹ 201 KAR 2:205

² KRS 315.135

³ 201 KAR 2:420

⁴ 201 KAR 2:076

⁵ 201 KAR 2:360

⁶ 201 KAR 2:015

⁷ CMEA (Combat Methamphetamine Epidemic Act of 2005)

⁸ CLIA (Clinical Laboratory Improvement Amendments)

⁹ 201 KAR 2:100

¹⁰ 201 KAR 2:106

¹¹ 201 KAR 2:171

¹² 201 KAR 2:210

¹³ 201 KAR 2:090

¹⁴ KRS 218A.170

¹⁵ KRS 217.830

¹⁶ KRS 217.896

¹⁷ 201 KAR 2:180

¹⁸ KRS 315.121

¹⁹ KRS 217.065

²⁰ USP Chapter 7

²¹ 201 KAR 2:380

²² 201 KAR 2:220

²³ KRS 315.010 (22)

²⁴ KRS 217.177

²⁵ KRS 218A.202

²⁶ 902 KAR 55:110

²⁷ KRS 315.335

²⁸ KRS 218A.200

²⁹ 21 CFR 1304.04

³⁰ 21 CFR 1304.11

³¹ 21 CFR 1301.75

³² 21 CFR 1305.05

³³ KRS 218A.190

³⁴ 902 KAR 55:015

³⁵ 21 CFR 1317.05