## West Virginia Board of Pharmacy

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## Charleston, West Virginia 25301

## UNSCHEDULED INSPECTION REPORT

| E-Mail Address         | Date<br>Time |  |
|------------------------|--------------|--|
| Phone                  | Fax          |  |
| DEA License            | WVBOP#       |  |
| P.I.C. or R.Ph on duty | License #    |  |
| Hours                  |              |  |

| Item | Question   | Reference                    | Yes | No | NA |
|------|--|------------------------------|-----|----|----|
| 1    | Only pharmacists have key or code access to prescription area?                                       | 15-1-14.7.3.1                |     |    |    |
| 2    | Only authorized non-registered person(s) in prescription area?                                       | 15-1-18.7                    |     |    |    |
| 3    | Is generic sign visible to the public?   | 30-5-12b.(o)                 |     |    |    |
| 4    | Are Rules of Professional Conduct posted in a conspicuous place?                                     | 15-1-19.15                   |     |    |    |
| 5    | Are the Pharmacy's Permit and DEA License posted in a conspicuous place?                             | 15-1-14.3.3                  |     |    |    |
| 6    | Are all pharmacist and pharmacy technician licenses posted?  | 30-5-11                      |     |    |    |
| 7    | Is a copy of the Combined Technician List and Confidentiality Statement posted?                      | 15-1-20.3.1&<br>15-1-20.2.10 |     |    |    |
| 8    | Are refrigerator temperatures between 2 to 8°C (36 to 46°F)?   | 15-1-15.1.2                  |     |    |    |
| 9    | List refrigerator temperatures:  |                              |     |    |    |
| 10   | Are freezer temperatures between -10 to -25°C (-13 to14°F)?  | 15-1-15.1.2                  |     |    |    |
| 11   | List the freezer temperatures:   |                              |     |    |    |
| 12   | Is the pharmacy area's temperature controlled & between 20 to $25^{\circ}$ C (68 to $77^{\circ}$ F)? | 15-1-15.1.2                  |     |    |    |
| 13   | What is the pharmacy area current temperature?   |                              |     |    |    |
| 14   | Is the prescription counter clean and dust free?   | 15-1-18.2                    |     |    |    |
| 15   | Is the prescription counter only used for prescription preparation?                                  | 15-1-18.2                    |     |    |    |
| 16   | Is the prescription preparation room clean, orderly and dust free?                                   | 15-1-18.5                    |     |    |    |
| 17   | Is the sink used only for cleaning hands and equipment?  | 15-1-18.3                    |     |    |    |
| 18   | Are pharmacists wearing white coats, lab jackets or smocks?  | 15-1-18.4                    |     |    |    |
| 19   | Do pharmacists have a proper name tag on their garment?  | 15-1-18.4                    |     |    |    |
| 20   | Does this pharmacy employ technician trainees?   |                              |     |    |    |
| 21   | Is an approved Technician Training Manual available?   | 15-1-20.3.2.4                |     |    |    |
| 22   | Is documentation of training by the P.I.C. available?  | 15-7-4.5                     |     |    |    |
| 23   | Are there written records that document the required elements?                                       | 15-7-4.5a.f                  |     |    |    |
| 24   | Do trainees wear proper attire?  | 15-1-18.4                    |     |    |    |
| 25   | Do trainees have a proper name tag?  | 15-7-6.2                     |     |    |    |
| 26   | No trainee has exceeded 15 months training plus 3 months for testing?                                | 15-7-4.4(f)                  |     |    |    |
| 27   | All licensed technicians are wearing proper attire and name tags?                                    | 15-1-18.4                    |     |    |    |
| 28   | Is there a proper sign available to post when a pharmacist is not on duty?                           | 15-1-14.7.4                  |     |    |    |

|    |  |                     | Yes | No | NA |
|----|--|---------------------|-----|----|----|
| 29 | Is there a reasonable effort to obtain patient I.D. for the patient record?            | 60A-3-<br>308.d.2.B |     |    |    |
| 30 | Is the I.D. of the person receiving a controlled Rx being recorded?                    | 60A-9-4.a           |     |    |    |
| 31 | Demonstrate the perpetual inventory of CII drugs and the past two months verification. | 15-2-6.2.4          |     |    |    |
| 32 |  |                     |     |    |    |
| 33 |  |                     |     |    |    |
| 34 |  |                     |     |    |    |
| 35 |  |                     |     |    |    |
| 36 |  |                     |     |    |    |
| 37 |  |                     |     |    |    |
| 38 |  |                     |     |    |    |
|    |  |                     |     |    |    |

| Inspector | Comments: |
|-----------|-----------|
|-----------|-----------|

|                      | Date      | Date |
|----------------------|-----------|------|
| Pharmacist-in-Charge | Inspector |      |