

West Virginia Board of Pharmacy

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Charleston, West Virginia 25301

CONTROLLED SUBSTANCE PERMIT AND CONSULTANT PHARMACIST INSPECTION

	E-Mail Address	Date
	Phone	Fax
	DEA License #	WVBOP #
	Consultant Pharmacist	License #
	Consultant Hours	

Authority for this inspection is contained in WV Code 60A-3-302(f) & Rule 15-1-19.1

Item	Question	Reference	Yes	No	NA
1.	Number of beds available at this facility? _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Is the Consultant Pharmacist properly licensed and registered with WVBOP?	15-1-19.2.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Is there a Policy & Procedure Manual for pharmaceutical services?	15-1-19.4.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Does the P & P Manual include provisions for transcribing drug orders?	15-1-19.4.3.a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Does the P & P Manual include provisions for Prescription delivery?	15-1-19.4.3.b	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Does the P & P Manual include provisions for drug recalls?	15-1-19.4.3.c	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Does the P & P Manual include provisions for Automatic Stop Orders?	15-1-19.4.3.d	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Does the P & P Manual include provisions for Formulary?	15-1-19.4.3.e	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Does the P & P Manual include systematic review of drug orders?	15-1-19.4.3.f	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Does the P & P Manual include reconciliation of controlled drugs?	15-1-19.4.3.g	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Does the P & P Manual include disposition of unused drugs.?	15-1-19.4.3.h	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	Is an appropriate reference library maintained?	15-1-19.4.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.	Pharmacist's remuneration is not associated with supplier of drugs?	15-1-19.4.6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.	Does the pharmacist have any financial interest in the supplier of drugs?	15-1-19.4.6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	Has consultant pharmacist notified permit holder of any and all violations of pharmacy rules or regulations that exist in the facility?	15-1-16.2.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16.	Is there documentation of above?	15-1-16.2.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.	Is complete documentation of consultant's activities readily available?	15-1-19.4.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18.	Does the work record include listing of activities performed?	15-1-19.4.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19.	Is pharmacist wearing proper name tag or ID when on duty?	15-1-14.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20.	Has there been any loss or theft of controlled drugs since the last inspection?	15-2-5.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.	Has loss or theft been reported to proper authorities?	15-2-9.3.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.	Is there a record of destruction of controlled Drugs?	15-2-9.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23.	Is it correct?	15-2-9.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24.	Is the security system adequate and effective?	15-2-5.1.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25.	Is there a 20-gauge metal cabinet or better if controls are locked?	15-2-5.5.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26.	Have controlled substances been approved by appropriate committee?	15-1-20.4.3.c	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27.	Is there any sign that outdated drugs are being used?	15-1-19.4.2.f	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28.	Is there proper disposal of unused medications (controls & other)?	15-1-23.4.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29.	Is the refrigerator temperature between 36 and 46 degrees F?	USP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30.	List the refrigerator temperature here.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Item	Question	Reference	Yes	No	NA
31.	Is the freezer being used? List temp here: _____	USP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32.	Is the room temperature between 59 and 77 degrees F? List temp here: _____	USP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33.	Is there an Emergency Kit available?	15-1-20.4.3.b	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34.	Are the contents of the Emergency Kit appropriate?	15-1-20.4.3.c	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35.	Does this facility have a Specialized Dispensing System?	15-1-20.1.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36.	Has the Board been notified in writing of its installation?	15-1-16.2.11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37.	Does the label of unit-dose system include the name and the strength of the drug?	15-1-20.2.1.a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38.	Does the label of unit-dose system include the name of the manufacturer or the packager?	15-1-20.2.1.b	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39.	Does the label of unit-dose system include the lot number?	15-1-20.2.1.c	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40.	Does the label of unit-dose system include the Exp date?	15-1-20.2.1.d	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41.	Unit-of-use packaging with multiple drugs are properly labeled?	15-1-20.2.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42.	Punch card packaged drugs are properly labeled?	15-1-20.2.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43.	Multiple-dose containers are properly labeled?	15-1-18.1.1.c	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44.	Are CE certificates available for inspection?	15-3-9.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45.	Is there a record of 6 hours of CE in Consulting Practice?	15-1-19.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46.	Is there documentation of 2 hours CE in Diversion and WV statistics?	15-1-4.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47.	Is there a record of at least 6 hours of live CE?	15-3-4.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
48.	Is there a total of 30 hours of CE for the reporting period?	15-3-4.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49.					
50.					
51.					

Inspector Comments:

Pharmacist	Date	Inspector	Date
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