

Office 1207 Quarrier Street, 4th Floor Charleston, WV 25301 Phone (304)558-0558 Fax (304)558-0572

Out of State Mail Order Pharmacy Notification of Change of Pharmacist-In-Charge (PIC)

Pharmacy Name				
Pharmacy License #MO				
Address of Pharmacy				
City	State	Zip	Phone#	
Incoming PIC			Outgoing PIC	
Name			Name	
WV License#			WV License#	_
Home Phone#			Home Phone#	_
Previous Employer:			New Employer:	
pharmacy is located to act as	s an interim PIC	C. Therefore th	wed for a pharmacist licensed in the state where the se incomming PIC has 60 days to get a West Virginia BP that reciprocation process has been started. If a	<u>l</u>
license is not obtained in the	60 day period t	he company n	ust cease operation into West Virginia until there is	<u>a</u>
WV licensed pharmacist as I	PIC.			
An inventory of all controlled	substances was t	aken on: Date		
As the incoming PIC, I state that West Virginia Rules §15-1-20.			Duties of the PIC and that I have reviewed and fully underste Pharmacist-in-Charge.	anc
Signature of Incoming PIC			Date	
Signature of Outgoing PIC			Date	
*Note: If the departing and	incoming D I C	' ara unabla ta	and yet the inventory together a classing inventor	. ,

*Note: If the departing and incoming P-I-C are unable to conduct the inventory together, a closing inventory shall be conducted by the departing P-I-C and a separate beginning inventory shall be conducted by the incoming P-I-C.

*Note: This P-I-C form must be mailed to the Board office along with the fee of **\$10.00** (Check or moneyorder only), and the original permit. Make a copy of the original permit with a line drawn through the name of the outgoing PIC, write the name of the incoming PIC in indelible ink upon the copied permit, and put it on your pharmacy wall until you receive the new permit from the Board office.