

West Virginia Board of Pharmacy

Phone (304) 558-0558

Fax (304) 558-0572

1207 Quarrier St, 4th Floor
Charleston, West Virginia 25301

CONTROLLED SUBSTANCE PERMIT AND CONSULTANT PHARMACIST - INSPECTION REPORT

	Date:
	WVBOP#:
	DEA License#:
	Consultant RPh:
Email:	Phone:
Fax:	Hours:

Inspection Type: Standard: ☐ Unscheduled: ☐

Item	Question	Observation	Reference	Inspector Comments
1	Number of Licensed Beds available at this facility (List under "Inspector Comments")			Number of Licensed Beds:
2	Is the Consultant Pharmacist properly licensed and registered with the WVBOP?		15-1-19.3.1	
3	Is there a Policy & Procedure Manual for pharmaceutical services?		15-1-19.5.3	
4	Does the P & P Manual include provisions for transcribing drug orders?		15-1-19.5.3.a	
5	Does the P & P Manual include provisions for prescription delivery?		15-1-19.5.3.b	
6	Does the P & P Manual include provisions for drug recalls?		15-1-19.5.3.c	
7	Does the P & P Manual include provisions for automatic stop orders?		15-1-19.5.3.d	
8	Does the P & P Manual include provisions for formulary?		15-1-19.5.3.e	
9	Does the P & P Manual include systematic review of drug orders?		15-1-19.5.3.f	
10	Does the P & P Manual include reconciliation of controlled drugs?		15-1-19.5.3.g	
11	Does the P & P Manual include disposition of unused drugs.?		15-1-19.5.3.h	
12	Is an appropriate reference library maintained?		15-1-19.5.4	
13	The pharmacist's remuneration is not associated with the drug supplier?		15-1-19.5.6.a	
14	If the pharmacist consultant has any financial interest in the supplier of drugs or devices to the facility, pharmacist consultant does not provide consulting service in order to obtain an agreement to be the supplier		15-1-19.5.6.b	
15	Has consultant pharmacist notified the permit holder of any and all violations of pharmacy rules or regulations that exist in the facility? (If the consultant is not aware of any violations of laws or rules since the last inspection, this should be marked "N/A")		15-1-16.2.2	
16	Is there documentation of such notification to the permit holder and all applicable bodies or agencies? (If the consultant is not aware of any violations of laws or rules since the last inspection, this should be marked "N/A")		15-1-16.2.2	
17	Is complete documentation of the consultant's activities readily available?		15-1-19.5.1	
18	Does the consultant's work record include a list of activities performed?		15-1-19.5.1	
19	Is the consultant pharmacist wearing a proper name tag or ID when on duty?		15-1-14.1.4	
20	Has any loss or theft of controlled drugs been reported to the proper authorities using the appropriate forms? (If there has been no loss or theft since the last inspection, this should be marked "N/A")		15-2-5.4 15-2-9.3.1	

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21	Are records of the return and/or destruction of controlled drugs being kept and are they complete and correct?		15-2-9.2.1 15-2-9.4.1	
22	Are controls and procedures to guard against theft adequate and effective, including a 20-gauge metal or better cabinet if controls are kept locked?		15-2-5.1.1 15-2-5.5.1	
23	Are controls and procedures to guard against diversion adequate and effective, including controls to prevent and detect diversion from the emergency kit?		15-2-5.1.1	
24	Have controlled substances and the contents of the emergency kit been approved by an appropriate committee, which includes at a minimum the medical director, nursing director, and consultant pharmacist?		15-1-20.4.3.c	
25	Is there any sign that outdated drugs are being used?		15-1-19.5.2.f	
26	Is there proper disposal of all unused medications (controls & other)? (NOTE: This should include any medications being stored at the facility in addition to those located in active stock locations such as med carts, safes, emergency kits and automated pharmacy systems)		15-2-9.2.1 15-1-16.2.5	
27	Is the area of drug storage temperature controlled between 20 to 25°C (68 to 77°F)? (List the current drug storage area temperature in Inspector Comments)		15-1-11.2.4	Drug storage room temperature:
28	Are refrigerator temperatures all between 2 to 8°C (36 to 46°F)? (List the current refrigerator temperatures in Inspector Comments; If a refrigerator is not currently used for drug storage, this should be marked "N/A")		15-1-11.2.4	Refrigerator temperature(s):

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29	Are freezer temperatures between -10 to -25°C (-13 to 14°F)? (List the current freezer temperatures in Inspector Comments; If a freezer is not currently used for drug storage, this should be marked "N/A")		15-1-11.2.4	Freezer temperature(s):
30	Does the facility have an automated pharmacy system that is used to store and dispense non-patient-owned medications and is being used for conditions other than, or in addition to, those allowed by an emergency kit? (If the facility does not have an automated pharmacy system, or is using an automated system <u>for the purposes of an emergency kit only</u> , this question should be answered "N/A")		15-1-2.1.4 15-1-16.2.11	
31	Has any addition, removal, or change of an Automated pharmacy system been communicated in writing to the Board? (If no automated pharmacy system is present, or one is present but has not been added, removed, or changed, this question should be answered "N/A")		15-1-16.2.11	
32	Is there an emergency kit available?		15-1-20.4.3	
33	Are the contents of the Emergency Kit appropriate?		15-1-20.4.3.b 15-1-20.4.3.c	
34	Check all specialized dispensing systems being used at this facility	Unit dose <input type="checkbox"/> Unit of use <input type="checkbox"/> Punch card <input type="checkbox"/> Multiple dose <input type="checkbox"/>	15-1-20.2.1 15-1-20.2.2 15-1-20.2.3 15-1-18.1.1	
35	Are all specialized dispensing systems properly labeled? (If a specialized dispensing system is not being used, this question should be answered N/A)		15-1-20.2.1 15-1-20.2.2 15-1-20.2.3 15-1-18.1.1	
36	If the pharmacy is repackaging medication from the manufacturer container in to a specialized dispensing system, the assigned beyond-use date does not exceed 6 months from the date of repackaging; or the manufacturer's expiration date; whichever is earlier; Except as modified in W. Va. Code R. § 15-5 et seq.; (If the pharmacy is not performing any repackaging this should be answered "N/A")		15-1-20.1.1 15-1-20.3.2	

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37	Are CE certificates available for inspection?		15-3-9.1 15-3-12.3	
38	Have all pharmacists completed a minimum of 2 hours of drug diversion training and best practice prescribing of controlled substances training within 1 year of receiving initial license from the Board?		15-3-4.4	
39	Is there a record of 3 hours of CE in Consulting Practice per year (6 hours per renewal period)?		15-1-19.4	
40	Is there a record of at least 6 hours of live CE?		15-3-4.3	
41	Is there a total of 30 hours of CE for the reporting period?		15-3-4.1	

Controlled Substance Audit				
Drug Name, Strength, Dosage Form & NDC or Rx/ID Number	Location of CS audited (Med Cart, Safe, ADS, etc.)	Expected Count	Actual Count	Comments

ALL QUESTIONS HAVE NOT BEEN ANSWERED, PLEASE REVIEW!

Consultant Pharmacist: _____ Date: _____

Inspector: _____ Date: _____