

**STATE OF CONNECTICUT
DEPARTMENT OF CONSUMER PROTECTION
COMMISSION OF PHARMACY
September 27, 2006**

10:00 a.m. The regular meeting of the Commission of Pharmacy was called to order by Chairman Summa. The meeting was held in Room #126 of the State Office Building located at 165 Capitol Avenue, Hartford, CT 06106.

Commissioners Present:

Steve Beaudin	Edith G. Goodmaster
Robert S. Guynn, R.Ph	Jean C. Mulvihill, R.Ph
Frederick Vegliante, R.Ph	William Summa, Jr. R.Ph

Staff Present:

Michelle Sylvestre, Drug Control Agent
Anne-Christine Vrakas, Board Administrator

Others Present:

Troy Ruff	Annaupma Chandra
Brian Beringer	George D'Agostino
Kevin Fearow	Jacqueline Murphy
Alicia Gudaitis	Curtis Jensen
Ed Karvosky	Sue Karvosky
Christopher W. Ryan	

Interview of Reciprocity Candidates

Bridwell, Simone (Wilson)	From Arizona
Ginger Lemay	From Massachusetts
Smeha Baxi	From Illinois
Megan Ehret	From Ohio
Brent Duncan	From NH
Radhika Uppalapati	From New Jersey
Catherine Rich	From Massachusetts
Rebecca Bader	From Georgia
(pending law exam)	

Commissioner Summa briefly addressed the reciprocity candidates explaining why the reciprocity candidates meet before the Board, because some do come from great distances. One of the first reasons was because the Board has an obligation to protect the public. In the past there might have been problems in communication. The Board wants to be assured that everyone communicates properly.

Secondly, " we want to get know the candidates and want them to get to know us".

Each candidate was sworn under oath, interviewed and asked some of the following questions:

Why do you want to be licensed as a pharmacist in the State of Connecticut?

Have you ever been before a Board before for any disciplinary problems?

Have you ever had any problems with drugs or alcohol in the past?

What are the continuing education requirements for pharmacists in the State of Connecticut?

Do you have any questions for us?

Do you already have employment?

What are the tech ratios in pharmacies in the State of Connecticut?

Commission Action: Commissioner Guynn moved, seconded by Commissioner Beaudin and passed by a vote of (6-0) to accept the above applications for licensure by reciprocity.

Commission Action: Commissioner Guynn moved, seconded by Commissioner Beaudin and passed by a vote of (6-0) to accept the above application for licensure by reciprocity pending successful completion of the MPJE Examination.

The following individuals appeared before the Commission of Pharmacy as 'first time' pharmacy manager

Maggie Comardo
Shira Duncan
Charlene Newman

Target New Britain #1289
CV S- Unionville
Walgreen's Pharmacy

FIRST TIME MANAGER ADDRESS BY COMMISSIONER SUMMA:

" The main reason we have you come here as first time managers is that now you are not only going to be responsible for yourself but also for those you are going to be managing. We want people who present themselves as first time managers to be seasoned pharmacists with at least six months experience. Have you all been practicing for at least six months? We have you all here for some other basic reasons as well.

Did you each receive one of the documents that Michelle Sylvestre put together. This document has all the basic bullet points that you should know. Take a look at that document when you get a chance. It has all the basic points required of a pharmacy manager.

I will now chat for a few minutes and I'll hit on some of the highlights of some of the problems that the drug control agents, surveyors that go into the field say that pop up a lot. Those are some of the things that come up that you should be looking out for because we only want to see you here on a social basis. We don't want any of you coming back with any problems in the future as you encounter much more serious responsibilities.

There are a lot of different types of premise settings in the State of Connecticut for pharmacies especially within the retail base. The first is the community pharmacy where you would be responsible for the whole premise. The second is the a setting such as one would see in a Big Y or say, a Stop & Shop, where there is at least 60 to 70,000 square feet of retail space but you would only be responsible for 1500 square feet. The premise that you would be responsible for is what you would be reporting to us about.

The problem pharmacy that we hear mostly about is where there is a front store manager and a pharmacy manager. The difficult situation is when a front store manager tries to override the pharmacy manager. What you have to remember is that you are the licensed professional in the pharmacy.

Now we will discuss licensing. There are a lot of different types of licenses that you need to be aware of. Anything that is licensed comes out of a central licensing bureau. We as the Pharmacy Commission and Board are linked to this licensing bureau but we are not them. What you need to be aware of is the three basic types of licenses.

The pharmacy receives a license at the proper time, the pharmacists receives a license at the proper time and the pharmacy technicians receives their licenses at the proper time as well. DEA license needs to be properly up to date as well; those licenses are taken care of mostly at the corporate setting.

Another issue is diversion problems. Whoever is required to fill out the forms, the DEA records, whoever does the ordering, should not be the same people that are checking out the orders.

The DEA 222's need to be talked about as well. We can now do them electronically, but you need to have the power of attorneys for the people that need to electronically submit these 222's. Even with the 222's that are submitted manually, you will need the power of attorney on file for the people submitting the DEA 222's. Those individuals need not be pharmacists. They can be technicians, just make sure that the documentation is on file as to who is allowed to fill out the DEA 222's. Those would be some of the basic items that you should be controlling, these are some of the basic items that the surveyors would be looking for.

Computer records and the end of the day records are also some items that the agent surveyors would like to look for. There are four basic records that they like to look for. They like to see the refill records, records for controlled substances. Some establishments like to separate Title XIX records separately. These are the basic computer records that they like to have kept and that the surveyors like to see when they come and inspect.

Do any of you have any questions of us? Now that we have a full time person on board, do not hesitate to call the Board Administrator to ask about anything that we can help you with. If the Board administrator can not answer your questions, she will ask us and try and solve your problems, conversely, if we can not solve your problem, we will research your issue and get back to you as soon as we can.

As our last piece of address we usually like to have Commissioner Robert Guynn, Rph., give you a short presentation on MED WATCH.

COMMISSIONER ROBERT GUINN'S ADDRESS TO FIRST TIME MANAGERS:

" I am usually the mouth piece for encouraging people to participate in the FDA's MEDWATCH Program. Does everybody know what the FDA MEDWATCH Program is?

For the benefit of the record and the audience, this is the system that acts like a clearinghouse for tracking post marketing surveillance activity, tracking adverse drug reactions for scope and frequency. Since the early 90's, the process of getting new drugs to market has been streamlined somewhat, consequently, we don't have quite as much experience in terms of years behind a drug before a drug comes to market.

You may have heard criticism in the last couple of weeks from Congress that the FDA is not doing a good enough job with regard to post marketing surveillance and they calculated what it would cost to make the changes and they are quite considerable.

The bottom line is that the pharmacists have become the front line. We serve the function of helping to feed the system of tracking the ADR's, the adverse drug reactions. Then the information is often acted upon. You don't have to think too far back about some drugs that have "black-box" warnings introduced or even have been taken off the market as a result of post marketing experience.

So now we ask you, because you are now not only responsible for your practice but now are responsible for the practice of others, we ask that you be the cheerleaders for this system. We ask that you promote its use

not only amongst pharmacists, but also among primary care providers. When they call you to report something have never seen before, you might suggest that they participate in the program. They can use the internet now, as well as the conventional "snail-mail". You should all have copies of the old Us-PDI in your pharmacies, right? The old fashioned US-PDI is in the appendices. They also have a computerized phone system that exists. You can call a phone number. They will ask you a series of questions. You can still do it this way. We just ask that you use the system and be an advocate of the MEDWATCH system.

Do any of you intend on becoming a preceptor for student interns? In the future, when any of you do, we ask that you make that a requirement of their time with you and that they process a least of couple of these entries. You can try to get them into the habit of reporting and watching out for these issues. One of the big problems today with anyone is that if you introduce any new process, activity or paper work generating process, there is inertia that you have to overcome. During a student intern's time with you, you can knock down these paths of inertia so that using this process does not seem so overwhelming to do.

Does anyone have any questions?"

Application for Pharmacy Internship

Sanna Lehtinen-Obama appeared before the Commission of Pharmacy to request permission to apply for a pharmacy internship graduating from a foreign pharmacy school.

Commissioner Summa:

"One of the reasons that we have candidates present themselves before the Board of Pharmacy is so that we can communicate and that we can become aware of different pharmacy programs from various countries and become aware of the differences. We also want to verify the communication skills in English, but you do not seem to have any problems with that.

Sanna Lehtinen-Obama:

" I am from Finland. I went to Pharmacy school at the University of Helsinki. I graduated with both an under-graduate and a Masters degree. Finland requires both if you want to become a pharmacy manager. The programs are pretty close to the same in length of time as in the United States, approximately six or seven years but it took me about two years to be able to test in the United States".

Commissioner Summa:

"How about pharmacies themselves, how do they practice, in retail, like apothecary stores, or are there large stores, chains?"

Sanna Lehtinen-Obama:

"I think the biggest difference is that most of the pharmacies are privately owned. The only chain is owned by the University of Helsinki that owns about eight pharmacies. That seemed to be the biggest difference for me when I arrived from Finland to the United States. Most of the pharmacies are apothecary type pharmacies. They do not sell newspapers, some sell some cosmetics.

Commissioner Vegliante:

"Can you get drugs without a prescription?"

Sanna Lehtinen-Obama:

"No you must have a prescription. Only over the counter drugs can be bought without a prescription. Some pharmacies sell exclusive brands to that pharmacy alone."

Commissioner Summa:

"Do you have any questions of us?"

Commission Action: The Commission of Pharmacy granted :
permission to apply for a pharmacy intern registration. .

Sanna Lehtinen-Obama presented TSE scores of 55 thereby meeting the requirement of a score of 50 for internship and 55 to apply for licensure of a pharmacist.

Miscellaneous

Larry Sobel Omnicare –Bar Code Technology

Larry Sobel introduced George D'Agostino and Kevin Fearow from Omnicare Corporation. Kevin Fearow did a presentation of a bar coding technology for replacing final pharmacist medication verification. They presented a six page hand out to each member of the Board.

Omnicare seeks state board approval for replacing final pharmacist medication verification with an equally safe process involving a technician bar code scan. They are seeking approval nationally. This step in the dispensing process verifies the correct amount of the correct drug goes out to the correct patient at the correct facility. This process will require additional technicians and therefore, they are requesting a waiver from the tech ratio.

Commissioner Summa deferred this question to Commissioner Robert Guynn, who is the hospital pharmacist component of the Pharmacy Board.

Commissioner Guynn detailed that as a hospital pharmacist at the University of Connecticut Health Center, that during his last 12 hour shift 20% of his shift constituted doing exactly what Omnicare was trying to get reassigned to a pharmacist technician to do with the bar code technology.

The main problem was that there was a statute 20-598, which prevents technicians from doing what must be supervised and done by a pharmacist, that would make a "tech-check-tech" impossible to maneuver around since there was no latitude with statutes.

Mention was made of an attempted pilot program by the very highly regarded former Director of Drug Control, Mr. Bill Ward. Statements were made that during his administration, two to three years were spent trying to get a pilot program together to test out this issue and the pilot program never materialized because they could not get around the statute.

Commissioner Guynn suggested that Omnicare get in touch with the current director of Drug Control, Mr. John Gadea, who is extremely "pro technology" and was mentored under the tutelage of Mr. Bill Ward. Commissioner Guynn stated that John Gadea would probably have some distinct insight as to why the original pilot program never materialized.

Omnicare respectively suggested that since we are constantly moving in this age of technology, that the statutes need to be moving in the same direction.

Commissioner Guynn agreed that this is probably a very heartfelt desire by the Commission of Pharmacy and Commissioner Steve Beaudin agreed that we need to look ahead as technology moves. He also

stated, that we are trying to get regulations passed that would allow the commission, at its discretion, the ability to approve pilot programs without going through regulatory and statutory changes in order to determine viability. Nine states have approved this process according to Omnicare.

Commissioner Guynn agreed and apologized that the statutes have not changed as rapidly as technology has.

DRUG AGENT MICHELLE SYLVESTRE'S EXPLANATION OF A NEW PROCESS OF LICENSING THAT HAS BEEN ADAPTED BY SOME PHARMACIES IN THE STATE:

"Brooks/Eckerd and CVS have chosen to license in the following manner. The Commission approved to have the **entire premise**, as the licensed pharmacy. The licensed prescription department is the licensed pharmacy premise. Michelle stated that she has been the only agent to license pharmacies in this manner so far. She stated that a couple of things popped up in the process.

" The licensed pharmacy premise is now not the four walls of the building. So if you are going to do a remodel, now I am finding out, what used to be just a matter of moving a wall and a gate, agents just went in and did a security check. Now it has to come before approval of the Commission as a remodel, because you are now changing the four walls of the pharmacy. The commission has to now look into this because the square footage of the premise is changing"

Another issue that has come up is the location of the computers. There were a couple of instances that the computers were located outside the gate that closes. That can't happen. The computer actually needs to be behind a closed gate.

Another issue was when the orders come in. At CVS sometimes the orders came in at 2 or 3 in the morning depending on when the truck was making its runs. The front store manager had the keys. They would allow the orders in. They would leave the orders in front of the prescription department. There is now a security issue for these drugs when you are leaving them in the health and beauty part of the store.

The storage of records is also an issue for a pharmacy that has been in business for several years. They used to store the old records in the back of the prescription department, which is now no longer the pharmacy.

These are the little “quirks” that now have to be addressed with the difference in this type of licensed premise.

Commissioner Summa wanted this address by Michelle to come before the review of new pharmacy prints so those commissioners reviewing the prints would be aware of these new type of licensing premise “issues”.

New Pharmacy Applications

Walgreen's
Shaker Road
Enfield, CT Manager: Curtis Jensen

Commission Action: Commissioner Summa moved, seconded by Commissioner Vegliante and passed by a vote of (6-0) to accept the above new pharmacy application provided all the requirements set forth in the Connecticut Pharmacy and Drug Laws as enforced by the Commission of Pharmacy are met.

Pharmacy Relocations

Bissell Pharmacy PCY 23
23 Governor Street
Ridgefield, CT 06877 moving to 21 Governor Street

Manager: Mr. Ed Karvosky pending zoning approval

Rx Care Pharmacies PCY 1847
91 Willenbrock Rd Unit B1
Oxford, CT 06478

Manager: Jacqueline Murphy

CVS Pharmacy
41 Main Street
New Milford, CT PCY.1271

From 41 Main Street to 40 EAST Street

Manager: Mr. Brian Berninger-Pharmacy Supervisor
Ms. Annupma Chandra-Pharmacy Manager

Commission Action: Commissioner Edith G. Goodmaster motioned. Commissioner Steve Beaudin seconded with a vote of 5-0 to approve the new pharmacy applications:

Commissioner Jean Mulvihill abstained from voting for CVS's new pharmacy application.

Pharmacy Remodel:

Drug Shoppe Health Solutions of CT
7 Angina Drive
Enfield, CT PCY. 2068

Pharmacy Manager: Christopher W. Ryan

They are shortening square footage from 6000 to 4000 square feet. They deal primarily in long term care. Drug Agent Michelle Sylvestre actually did the inspection of this pharmacy and offered the Commission the actual details of the remodel.

CVS Pharmacy # 811
1168 Whalley Avenue
New Haven, CT 06511 PCY.1270

Requesting to license the prescription department as the licensed pharmacy premise.

COMMISSION ACTION:

Commissioner Steve Beaudin motioned to accept. Edie Goodmaster seconded. The pharmacy remodels were accepted and passed by a vote of 6-0 –providing all the requirements set forth in the Connecticut Pharmacy and Drug laws are met.

Commissioner Jean Mulvihill abstained from the vote for CVS.

Legal Matters

Docket Number 06-2564 Docket Number 06-2563

Attorney Steven Schwane presented the two above docket cases as two pharmacy technicians who paid their license renewals with bad checks.

Attorney Schwane asked the Commission to continue case #06-2564, stating that he received a money order from the pharmacy technician for the appropriate amount. He thinks this is okay, just to be sure he will continue the case.

Commission Action: The Commission motioned to accept Attorney Schwane's request to continue case 06-2564. . The motion was seconded.

Docket # 06-2563 - There will be a hearing. Attorney Schwane presented a series of documents as evidence.

Commissioner Summa opened a hearing:
There was a check done to assure that the pharmacy technician that is the respondent in this case, was not in attendance at the hearing. Mention was made that his name was not on the attendance sheet.

This is a case of a pharmacy technician, registration number 8124, who on March 14, 2006, submitted a check for \$50.00 with an application for a technician registration. The check was applied. The registration was

issued and it was later ascertained that the check was bad. So what we have to do is go through a formal process. In this case, we are asking that the registration be revoked. I would like to start by introducing a series of documents the first would be the administrative complaint in docket #06-2563 in the matter of Richard B. Barber. This is marked as exhibit 1.

As exhibit #2, I would ask that a copy of a letter sent to Richard B. Barber, to the last known address in our computer system was sent both regular and certified mail. There is a copy of the letter and the return receipt and ask that they be marked as Exhibit #2.

As exhibit #3, I have a print-out from the credential view screen showing the pharmacy technician screen for Richard B. Barber showing the credential number, 8124. This is marked as exhibit #3.

Finally, what I have is an affidavit from Dorna Hebert. She is an employee in our licensing services division at the Department of Consumer Protection. She is responsible for revenue accounting and reporting. In here, she indicates that on March 14, 2006, the application for Mr. Barber was filed. We received a check for \$50.00. That check was returned to the Department of Consumer Protection for insufficient funds. Mr. Barber presently owes \$70.00 for registration and late fees. Donna Hebert was sworn under oath to those facts. Attached to this affidavit is the information we sent to the respondent. Just so you know, in this case, we contacted the individual at least three times, by certified letter and received no response. So I would ask that the affidavit and its attachments be marked as exhibit #4.

I had no other documents. So again, this was a straight forward case. I ask the Commission of Pharmacy to revoke the pharmacy technician registration.

COMMISSIONER SUMMA: Does anybody have any questions of Attorney Schwane who presented all the evidence? I think we will close the hearing and then take a vote. Is there anything else before we close the hearing?

Commissioner motioned to close the hearing. The motion was seconded. Case closed.

COMMISSION ACTION: Commissioner Summa motioned to revoke the license of Richard B. Barber, Technician registration # 8124. Edie Goodmaster motioned to revoke the license. The motion was seconded. There was a vote of 5-0 to revoke the registration.

Commissioner Robert Guynn abstained from the vote as he was not present during Attorney Schwane's presenting comments and evidence, since there already was enough voting for a quorum.

PHARMACY AGREEMENTS:

Docket #06-2174: This involves a pharmacist who committed three prescription errors within a three year period. As is commonly done in these cases, the agreement calls for a one year probation and a letter of reprimand. This pharmacist has already completed a c.e case.

COMMISSIONER SUMMA: Any questions of Attorney Schwane in case # 06-2174?

If there are no questions, I want to make a motion to accept the proposal. The motion was accepted by Commissioner Guynn and seconded. Commissioner Beaudin seconded. The vote was 6-0 to accept the proposal.

Docket # 06-2575, Docket # 06-2576. The next two cases are connected to each other. The first one involves the pharmacy. The issue here is the pharmacy that allowed the pharmacy technician to work with a lapsed registration.

The recommendation for the two agreements is that the pharmacy be fined \$500.00, which is the common amount that we have been recommending in these cases. The pharmacist manager received a letter of reprimand. Commissioner Beaudin had stepped down in these two cases.

COMMISSIONER SUMMA: Are there are questions in these two cases. Are there any questions of Commissioner Beaudin or Attorney Schwane in these two cases?

COMMISSIONER GOODMASTER: This situation with the technicians that we run into time and time again, especially with the chains, where they tell the technicians, we will take care of your registration renewal, should not leave the responsibility solely on the pharmacist manager. I don't believe a letter of reprimand is indicated on the pharmacy manager. I believe it should be a letter of caution. "Someone who has a spotless record should not have his record sullied for something that is really not all in his control".

Commissioner Beaudin referred back to Commissioner Summa's address to the new first time pharmacy managers stating that they are to assume the responsibility to verify that their pharmacy technicians registration are up to date and valid.

COMMISSIONER SUMMA: With all that being said, the matter of docket #2006-2575.

COMMISSION ACTION: Motion to accept was made by Commissioner Beaudin. Motion was seconded. A vote was taken, 5-0 to accept the motion.

Docket # 06-2576 – This case is identical to the previous one.

COMMISSION ACTION: Motion was made to accept by Edie Goodmaster. Jean Mulvihill seconded the motion. Vote was unanimous.

Attorney Schwane wanted to add two matters that were not on the agenda because they came to him very recently so they could not be added to the agenda.

Docket # 06-2588: This is an agreement. It actually involves a pharmacy for the very same thing, a lapsed technician registration, \$500.00 civil penalty. At this point, it is just the pharmacy. In this case, we did also propose a letter of reprimand to the manager. The manager is thinking about it.

Commissioner Robert Guynn commented that the responsibility of the technician's registration should ultimately be on the technician.

Attorney Schwane stated that this case dealt only with the pharmacy so the pharmacy agreed to pay a civil penalty.

COMMISSION ACTION: Motion was made to accept. Motion was seconded. There was a vote of 6-0 to accept the pharmacy agreement on this case.

Michelle Sylvestre asked the Board whether they wanted to establish a precedent and start fining the pharmacy technicians. Commissioner Guynn asked that Attorney Schwane state what the law stipulates should be done.

Attorney Schwane stated that this is a violation. That you can look at the statute and look for whatever the penalty would be for a violation of a statute, letter of reprimand, fine, revocation, suspension, probation. The only reason I am a little reluctant is that you have one situation and three cases. I am not saying that you should not do it, but maybe this is an area that Tanya, the paralegal could get involved. To fine a technician, you would have to set an amount \$100.00, \$500.00. You would have some technicians that would state, I am not going to pay that. Then you would have to have a hearing.

I think what has been happening at least since the 90's, it seemed that all our cases were against the pharmacists and they were relatively limited in number. Now it seems we have included the pharmacy technicians.

Commissioner Guynn interjected that this is because the technicians have been required to be registered, but we should be looking at possibly fines or suspensions. They are required to carry the card on their person. They should look at their card and see when their registration is going to expire.

Salaries of the technicians were brought up stating that it was about \$18.00 to \$20.00 per hour. That would be at the University of Connecticut. Most of the technicians make about \$10.00.

Docket # 06-2167: The case involves a pharmacy technician who has been arrested for basically stealing drugs from the pharmacy. The technician has an attorney. The attorney felt that if the employees surrenders that he or she is going to look bad on the criminal case. I think we have convinced him that this is not necessarily true. What I would like to do for this docket number is for the Commission agrees to accept what

we think will be the settlement agreement, where she agrees to surrender her pharmacy technician registration. If this is not done, that she be summarily suspended. At that point, the next time, I will present it as a hearing.

COMMISSION ACTION: Motion was made to accept. Motion was seconded. Vote was unanimous 6-0.

Pharmacists Who Have Completed the Continuing Education Course on Prescription Errors

Docket number 1035
Docket number 4426
Docket number 1926

COMMISSION ACTION: Motion was made to accept. Motion was made to second by Commissioner Guynn. Vote was unanimous.

Attorney Schwane wanted to update on some proposed regulations. The proposed regulation yesterday, September 26, 2006, at the Regulation Review Committee, the proposed regulation to have pharmacists dispense flu shots was rejected without prejudice. What this means is that it was rejected but we can bring it back with minor adjustments and changes. They will reconsider it. The main reason they rejected the proposed regulation is that there was one state representative wanted to know if you went to a pharmacist, how do you know that this pharmacist has been certified? Senator Gunthur, he was basically opposed to the concept.

Attorney Schwane stated that people were arguing about a law that was already passed. Attorney Schwane is going to be working with Margherita Giuliano from CPA to see what other states have in place right now. This is a mandatory regulation. When it is rejected without prejudice, we are required to bring it back. The first Tuesday of November 7, 2006, we will be required to bring it back to them.

Two other regulations are before the legislature. Test of spoken English and Nuclear Pharmacy. Both of those have been delivered to the Regulation Review Committee and should be coming up on their November agenda.

There were a total of 12 new cases, 5 were errors, 3 were pharmacy technician issues, 2 were bad checks. The third was an application that was denied because there was a criminal case pending. Two were connected. One was a controlled substance safe that was left open, one was a technician ratio issue, one was release of confidential information by a pharmacy.

COMMISSIONER SUMMA: Thanked Attorney Schwane.

Request for CE Waivers, etc.

Zain Morin PCT. 7569 Medical Ethnobotany Integrated Biology, UC
Berkeley

Approved: pending transcript and proof of attendance

Jennifer Haverstock
PCT 8248

42 Annual Fall Refresher Course, Pharmacist
Crowne Plaza Hotel, Moncton, New Brunswick,
Canada

Approved:

Debra Nolin PCT. 8498 due to medical limitation

Approved:

William Roux Jr. PCT. 9012- currently taking a course at Trinity College

Approved : Need to have formal transcript

Approval as an electronic Data Intermediary:

All-Wyn Network, LLC
301 Commerce street, Suite 3150
Forth Worth, TX 76102-4102

Approved with name change

**Application to Close the Prescription Department of a Licensed Pharmacy
Pending An Affirmative Inspection Report**

Home Care Professionals
1587 Hamilton Avenue
Waterbury, CT 06706 PCY 1664

Walgreen's Pharmacy
2 Shaker Road
Enfield, CT

COMMISSION ACTION: Motion to accept by Robert Guynn. Motion seconded by Edith G. Goodmaster. Voted 6-0 and accepted.

Approval of Minutes

August 30, 2007

Commissioner Goodmaster moved, seconded by Commissioner Guynn and passed by a vote of (6-0) to accept the minutes from the August 30 2006 Commission of Pharmacy meeting.

Non-Resident Pharmacy Applications
None.

There being no further business, Chairman Summa adjourned the meeting.

Respectfully Submitted,

William J. Summa, Chairman

Prepared By:

Anne-Christine Vrakas, RHIT
Board Administrator

