

WYOMING STATE BOARD OF PHARMACY

Board Meeting February 4 and 5, 2009 Cheyenne, Wyoming

MINUTES

Present/Absent	Board Member	Title
<i>present</i>	Randolph A. Harrop, R.Ph.	Board President
<i>present</i>	Alison Kay McManus, R.Ph.	Board Vice President
<i>present</i>	Terry L. Carr, R.Ph.	Board Secretary/Treasurer
<i>present</i>	Robert J. (Rick) Davis, M.D.	Board Member
<i>present</i>	John R. McPherson, D.D.S.	Board Member
<i>present</i>	Jennifer S. Nevins, R.Ph.	Board Member
<i>present</i>	Gary W. Norwood, D.V.M.	Board Member
<i>present</i>	Charles W. Smith	Board Member
<i>present</i>	Louann Weber, R.P.T.	Board Member, <i>ex-officio</i>

Guests/Observers:

Christina B. Andrade, A.S., R.P.T.	Technician Representative, Wyoming Pharmacy Association Board
Donna L. Artery, PharmD, R.Ph.	Pharmacist Consultant, Wyoming Department of Health
Kara Beech, B.S., CHC	Executive Director, Wyoming Pharmacy Association
Kevin D. Bohnenblust, J.D.	Executive Secretary, Wyoming Board of Medicine
H. Richard Burton, R.Ph.	Inspector/Compliance Officer, Wyoming State Board of Pharmacy
James F. Bush, M.D., FACP	Medicaid Medical Director, Wyoming Department of Health
Michael Christ	Clinic Operations Manager, Cheyenne Health and Wellness Center
Roxanne H. Homar, R.Ph.	State Pharmacist, Wyoming Department of Health
Darrel D. Jones, R.Ph.	Iverson Memorial Hospital, Laramie, Wyoming
Robert Mayor	Executive Director, St. Joseph's Children's Home, Torrington, Wyoming
Ken F. Nelson, J.D.	Senior Assistant Attorney General
Ronald K. Parton, R.Ph.	Emissary Pharmacy & Infusion Services, Casper, Wyoming
Sheri L. Roumell, R.P.T.	Program Director, Casper College Pharmacy Technology Program
Jacqueline L. Seebaum	Executive Assistant, Wyoming State Board of Pharmacy
Timothy S. Seeley, R.Ph.	Powell Valley Healthcare/Chair, USP 797 Work Group
George A. Vandel, NCAC II, CAP	Executive Director, Wyoming Professional Assistance Program
Mary K. Walker, R.Ph.	Executive Director, Wyoming State Board of Pharmacy
Lynne Weidel	Executive Director, Cheyenne Health and Wellness Center
David N. Wills	Records Analyst, Wyoming State Board of Pharmacy
Rodger Wilson	Walgreens, Longmont, Colorado
Henry A. "Hank" York, R.Ph.	Inspector/Compliance Officer, Wyoming State Board of Pharmacy
Lopa B. Zaveri, MD	Cheyenne Health and Wellness Center

WEDNESDAY, FEBRUARY 4, 2009

Call to Order. Mr. Harrop called the Board meeting to order at 1:03 p.m.

Review and approval of the December 18, 2008 Board meeting minutes. Dr. Davis moved to approve the minutes as drafted. Dr. Norwood seconded the motion. The motion was carried by a vote of 8/0.

Wyoming Professional Assistance Program quarterly report. George Vandel reviewed his January 9, 2009 written report to the Board.

Electronic Health Record. Dr. Bush presented on the Total Health Record under development by Wyoming Medicaid, which is taking the lead in development of a web-based electronic health record system that will be on a standardized data interface platform. It will meet national security standards and national standards for HIPAA compliance. There will be role-based levels of access. Dr. Bush said that he believes that the Total Health Record can provide a strong bridge between the physician and the pharmacist. A portal can be designed for pharmacist charting so that it could be available to the physician via secure messaging. Data will be real-time at time of entry or claim submission. There is the capability to track all patient prescriptions in real time, which could aid in prescription drug monitoring.

There was discussion regarding pharmacies' readiness for e-prescribing. Mr. Harrop said that standardization is necessary before too many hardware and internet service vendors come into the state; everyone needs to be on the same page. Dr. Bush said that he wants to ensure that pharmacies are included in this dialogue. Dr. Davis asked what is the best methodology to facilitate communication. Roxanne Homar said that the Department of Health will be more than happy to facilitate communication among their agency, the Board of Pharmacy, and the Wyoming Pharmacy Association. Dr. Bush said that they are always looking for the best way to leverage information and dollars. They are not possessive of the Total Health Record; they want to build the system to be where the patient is.

Ms. Walker said that a work group is being formed to address revision of the Board Rules regarding e-prescribing; she said she would like to see a representative from the Department of Health serve on the work group.

Mr. Harrop told Dr. Bush that the Board would appreciate being updated on the Total Health Record initiative. Dr. Bush said that the relationship between physicians and pharmacists has been neglected; this initiative provides an excellent opportunity to encourage the relationship.

Emissary Pharmacy. Mr. Parton described Emissary Pharmacy, noting that it is a closed-door pharmacy. He described Emissary's relationship with St. Joseph's Children's Home and asked for clarification of the Board's definition of a long-term care facility. Robert Mayor said that St. Joseph's Children's Home has been designated federally as a free-standing psychiatric treatment facility since 1994. St. Joseph's has contracted with Emissary since 1999. Mr. Mayor outlined St. Joseph's client population and how they are served. Mr. Parton distributed samples of the medication packaging Emissary designs for St. Joseph's clients and described how it is delivered.

Mr. Harrop thanked Mr. Parton and Mr. Mayor for their presentation and informed them that the Board will discuss the issue and will inform them of its decision.

The Board discussed the issue on February 5, 2009. Dr. McPherson moved that Emissary Pharmacy and St. Joseph's Children's Home be informed that St. Joseph's Children's Home falls within the definition of a long-term care facility. Ms. McManus seconded the motion. The motion carried by a vote of 8/0.

Wyoming Health Care Licensing Boards' (Draft) Uniform Policy for the Use of Controlled Substances in the Treatment of Pain. Mr. Bohnenblust summarized the genesis of this draft, which is an outgrowth of the Rx Abuse Stakeholders' Task Force. Wyoming has done an excellent job fighting methamphetamine abuse; diversion of controlled substances is the new challenge. Mr. Bohnenblust was contacted by the Federation of State Medical Boards, which wants to work with a state that has not yet adopted a policy on the use of controlled substances in the treatment of pain. Mr. Bohnenblust adapted the Federation's model policy and is providing it to all Wyoming health care licensing boards for their review and comment with the goal that this can serve as a catalyst for health care licensing boards to review their rules and, perhaps, adopt some common rules. Mr. Bohnenblust stressed that there is no expectation of action or timeline; this document is merely a tool to begin a dialogue among the health care licensing boards.

Mr. Bohnenblust distributed a copy of *Responsible Opioid Prescribing* by Scott M. Fishman, MD. He said he would like to secure funds to distribute the book to all prescribers in Wyoming. He said he would also like to access monies to create a prescribing pocket guide.

There was discussion of the Prescription Drug Monitoring Program (PDMP). Mr. Bohnenblust said that he would like to make it a standard of care that physicians obtain a PDMP profile on every pain control patient. Mr. Bohnenblust said the Wyoming Board of Medicine would like to assist with funding for expansion of the PDMP. He said that the PDMP is an extremely helpful tool and the Board of Medicine will do whatever it can to be its champion.

The Board discussed the Draft on February 5, 2009. Mr. Carr moved that the Board support the *Wyoming Health Care Licensing Boards' (Draft) Uniform Policy for the Use of Controlled Substances in the Treatment of Pain*. Ms. Nevins seconded the motion. The motion was approved by a vote of 8/0.

Casper College Pharmacy Technology Program. Ms. Roumell provided an update on the Program. Six students graduated from the Program in May, 2008. Fifteen first-year students are currently registered. The age range of current enrollees is between 18 and 48. The Program serves students from out of state, which poses a challenge regarding practicum hours. Wyoming students obtain a technician-in-training permit prior to beginning their practicum. It is not so clearly defined in other states, such as South Dakota. Ms. Walker said that she would contact the South Dakota Board of Pharmacy regarding the issue. Ms. Roumell has disseminated information to Wyoming pharmacies to inform them that there are tuition assistance funds available for prospective students.

Prescription Drug Monitoring Program (PDMP). David Wills presented fourth quarter 2008 PDMP statistics. Dr. Davis requested that the practitioners' category be subdivided into type of practitioner.

Cheyenne Health and Wellness Center, 340B Pharmacy Options. Ms. Weidel summarized the mission of the Cheyenne Health and Wellness Center (CHWC), a not-for-profit community health center that opened in Cheyenne, Wyoming in 2005. The mission of the CHWC "is to provide quality health care for the residents of Laramie County regardless of an ability to pay."

Services are offered on a sliding scale fee to uninsured or underinsured residents with income at or below 200% of the federal poverty level. The CHWC has served 8,453 patients since 2005, with 18,225 patient visits to date. Nearly half of their clients are 35 years old or younger. The CHWC currently has two physicians, with plans to add another physician in August, and one physician assistant, with plans to add another physician assistant this month. The CHWC has close partnerships with Cheyenne Regional Medical Center and the Laramie County Community Partnership, which is a consortium of 40 non-profit organizations. The CHWC receives federal funding, but that funding only supports 40% of their budget.

Michael Christ presented an overview of the 340B Pharmacy Program and the planned CHWC Pharmacy Program. CHWC is a 340B facility. The options available to a 340B facility are to:

- 1) Contract with a local pharmacy to provide services;
- 2) Establish a closed, in-house, pre-packaged physician or provider dispensing system; or
- 3) Establish an in-house pharmacy.

CHWC is pursuing the in-house dispensing system model because:

- 1) Retailers' discount pharmacy programs have limited formularies and do not include non-generic medications;
- 2) Monitoring a contracted pharmacy is labor intensive; and
- 3) An in-house pharmacy is cost prohibitive.

The tangible benefits of the CHWC Pharmacy Program for their patients will include:

- 1) Studies show an average savings of 51% below average wholesale price;
- 2) Patients often do not access a pharmacy when medication is prescribed;
- 3) In-house dispensing provides easy access for patients, particularly for individuals for whom transportation is an issue;
- 4) Chronically ill patients cannot afford to fill all of their prescribed medications; they often do not take the prescribed doses in order to delay having to refill the prescription as often.

The tangible benefits of the CHWC Pharmacy Program for CHWC are:

- 1) Increased patient satisfaction;
- 2) Treatment begins immediately;
- 3) Reduced costs;
- 4) The Program differentiates their practice from other providers.

Ms. Weidel said that they are discussing coordinating services with the Laramie County Centralized Pharmacy and the Prescription Assistance Program.

Mr. Christ described how the CHWC Pharmacy Program will be implemented. The provider selects the desired medication from the software inventory. The software transfers the physician order into the patient file and sends the prescription to the dispensing station. The software automatically prints the medication bar code and patient information sheet. The bar code reads the name, strength, quantity, and expiration date, and will not print the patient label

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until the correct bottle has been scanned. The provider verifies and dispenses the medication and information sheet to the patient.

Dr. Norwood asked if there are pharmacists involved. Mr. Christ said no, the providers dispense directly. Dr. Norwood asked if the dispensing term is a maximum of thirty days. Mr. Christ said yes.

Mr. Burton asked why they are calling it a pharmacy. Mr. Christ said that it is an in-house dispensing program, but its working name at present is the CHWC Pharmacy Program.

Ms. McManus asked who provides the dispensing machine. Mr. Christ said that the CHWC is currently accepting bids.

Ms. McManus asked who loads the machine. Mr. Christ said that the nursing staff loads the machine.

Dr. Davis asked who hands the patient the medication. Mr. Christ said that the provider orders the medication, the medication is dispensed, the medication is hand-carried to the provider, the provider checks the medication, and the provider gives the medication to the patient. Dr. Davis said that patient counseling is an important component. Dr. Zaveri said that, in her experience, it encourages patient compliance when the physician teaches and counsels the patient regarding the prescribed medication.

Dr. Norwood asked about the formulary. Dr. Zaveri said that there will be no controlled substances. The formulary will be general use medications. Dr. Norwood asked if NSAIDs and Prednisone are included in the formulary. Dr. Zaveri said yes. Ms. Weidel said that the formulary is larger than they plan to stock initially. Dr. Zaveri said that the formulary was chosen based on what CHWC patients are already using.

Mr. Smith asked about stability of the funding streams. Ms. Weidel said that the CHWC has a grant for which they reapply annually. The remainder is a "patchwork quilt". Much of the money that funds the CHWC is soft money. The CHWC Pharmacy Program will provide another revenue stream.

Ms. Weidel said that the CHWC Pharmacy Program is not intended to be in competition with pharmacies. The Program is available only to CHWC patients. Mr. Christ said that medications will only be issued to patients who qualify to be seen at the CHWC.

Mr. York asked the presenters if they are familiar with Casper Community Health. Ms. Weidel said that there is no connection to them other than designation. Mr. York suggested that they speak with the director of pharmacy and visit the facility. Mr. York said they have a dynamic patient counseling process. Mr. Christ said that they plan to visit a center in Greeley that has implemented the proposed model. The CHWC will be the first in the state to implement this type of system.

National Association of Boards of Pharmacy (NABP®) Item Writing Session (for the Multi-State Pharmacy Jurisprudence Examination (MPJE®)). Ms. McManus clarified that this session was an item review session and summarized the session. She said that every pharmacist should participate in an item review session. She also said that participation in an item review session is critical before participation in an item writing session. Ms. Walker said that there will be an item writing session in June, 2009 and asked that anyone interested in participating contact her.

National Association of State Controlled Substances Authorities (NASCSA) Conference. Ms. Walker summarized the Conference. There were 17 presentors, including the second in command at the Drug Enforcement Administration and the Food and Drug Administration, who spoke on the huge increase in controlled substance abuse. Ms. Walker said that the NASCSA website has the Conference presentations posted for public access.

There was an alliance meeting of states with monitoring programs. Wyoming contributed at this meeting, informing them that the Indian Health Service will be reporting.

Ms. Walker noted that James Carder was recognized at the Conference for his years of service to the Wyoming Board of Pharmacy, and his ongoing support, leadership, and assistance to NASCSA, including service as an officer with NASCSA.

NABP® Fall Education Conference. Ms. Weber thanked the Board for sending her to this Conference. She was the only pharmacy technician in attendance; Arizona, Utah, and Wyoming are the only states who have a pharmacy technician who serves on their Board.

Ms. Weber summarized the Conference. She attended a session on counterfeit drugs, which included a roundtable discussion. The conclusion was that education is the key to solving the problem. Ms. Weber said that she was shocked to learn that 98% of internet pharmacies are not legitimate. Ms. Weber said that she also learned about behind-the-counter classes of drugs as available in Canada, Australia, and England. The speaker said that the behind-the-counter model has made her a better pharmacist because she has higher quality contact with the patient and improved communication with the physician.

Pharmacist and Pharmacy Technician Renewals. Ms. Seebaum reported that 81% of the 1,075 pharmacists who renewed on or before December 31st renewed online, and there were very few problems with the online renewal system. The technician renewal has gone very smoothly; to date, 455 renewals have been processed. Sixty-four immunization registrations have been processed. Ms. Walker said that 77 pharmacist applications have been received since April 1, 2008; 52 are in process.

Rx Abuse Stakeholders. Ms. Walker briefly reviewed the history of this group, which was formed by Kelly H. Rankin, U. S. Attorney for Wyoming, in August, 2008. It meets monthly and now includes five subcommittees. Ms. Walker said that Mr. Rankin has been a strong leader. The group is very interested in the Prescription Drug Monitoring Program (PDMP).

Ms. Walker said that Richard Burton has been attending the Prescription Abuse Advisory Committee meetings, previously known as the Lovell Task Force. Two Prescription Abuse Advisory Committee members have joined the Rx Abuse Stakeholders.

Ms. Walker summarized the core issues discussed at the last meeting, which included discussion of the definition of "real-time" PDMP reporting, enforcement of photo identification of patients who present to the pharmacy for a controlled substance prescription, and cross-state availability of PDMP data.

Correspondence to Charlene R. Messick, Drug Enforcement Administration, from Marshal Kohr, DVM, dated December 5, 2008. Ms. Walker summarized this correspondence regarding a veterinarian's use of his DEA registration to cover eight prescribers in his practice. Ms. Seebaum asked the DEA for an opinion. The DEA and the Board of Pharmacy encouraged the veterinarian to have each prescriber hold an individual registration.

Request that volunteers be allowed to sort donated medications in Sheridan and Cheyenne. Ms. Walker was asked by Natasha S. Gallizzi, PharmD, R.Ph., of the Laramie County Centralized Pharmacy, if Ms. Walker would present a request to the Board regarding volunteers sorting donated medications. After discussion of the issue, Ms. McManus moved that the Board communicate to Ms. Gallizzi that the sorting of donated medications is a pharmacy function. Mr. Carr seconded the motion. The motion was approved by a vote of 8/0.

Mr. Harrop recessed the meeting at 4:40 p.m. and announced that the meeting will reconvene at 8:30 a.m. on Thursday, February 5, 2009.

THURSDAY, FEBRUARY 5, 2009

Present/Absent	Board Member	Title
<i>present</i>	Randolph A. Harrop, R.Ph.	Board President
<i>present</i>	Alison Kay McManus, R.Ph.	Board Vice President
<i>present</i>	Terry L. Carr, R.Ph.	Board Secretary/Treasurer
<i>present</i>	Robert J. (Rick) Davis, M.D.	Board Member
<i>present</i>	John R. McPherson, D.D.S.	Board Member
<i>present</i>	Jennifer S. Nevins, R.Ph.	Board Member
<i>present</i>	Gary W. Norwood, D.V.M.	Board Member
<i>present</i>	Charles W. Smith	Board Member
<i>present</i>	Louann Weber, R.P.T.	Board Member, <i>ex-officio</i>

Guests/Observers:

Donna L. Artery, PharmD, R.Ph.	Pharmacist Consultant, Wyoming Department of Health
Kara Beech, B.S., CHC	Executive Director, Wyoming Pharmacy Association
H. Richard Burton, R.Ph.	Inspector/Compliance Officer, Wyoming State Board of Pharmacy
Darrel D. Jones, R.Ph.	Ivinson Memorial Hospital, Laramie, Wyoming
Ken F. Nelson, J.D.	Senior Assistant Attorney General
Perri P. Schneider, R.Ph.	Walgreens, Denver, Colorado
Jacqueline L. Seebaum	Executive Assistant, Wyoming State Board of Pharmacy
Timothy S. Seeley, R.Ph.	Powell Valley Healthcare/Chair, USP 797 Work Group
Matthew A. Stanton, PharmD, R.Ph.	Wyoming Medical Center/Member, 797 Work Group
John H. Vandel, R.Ph.	Dean, University of Wyoming School of Pharmacy
Mary K. Walker, R.Ph.	Executive Director, Wyoming State Board of Pharmacy
Dan Webb	Regional Vice President, Healthcare Sales, Sharps Compliance, Inc.
Dean A. Winsch, PharmD, R.Ph.	Cheyenne Regional Medical Center/Member, 797 Work Group
Henry A. "Hank" York, R.Ph.	Inspector/Compliance Officer, Wyoming State Board of Pharmacy

Mr. Harrop reconvened the meeting at 8:40 a.m.

Sharps Compliance, Inc. RxTakeAway™ medication disposal service. Mr. Webb presented an overview of the Houston-based company and the RxTakeAway™ service. This mail-back program offers return containers in both envelope and box form. Mr. Webb presented samples of their container choices. Bar codes may be added to the envelopes or the box labels to track destruction. Envelope and box containers are burned intact at the destruction facility. The destruction facility is owned and operated by Sharps Compliance, Inc. Richard Burton asked if the contents are inventoried at any time. Mr. Webb said no; the envelope and box containers are weighed, but never opened. Mr. Webb reviewed the cost and said that the company will tailor a program to an entity's needs.

Prescriber-Pharmacist communication. Dr. Davis said that he met with Dennis Ellis, Executive Director of the Wyoming Medical Society, and reviewed Wyoming Pharmacy Act Rules and Regulations Chapter 9, *Patient Counseling and Prospective Drug Use Review Regulations*, with Mr. Ellis. There was discussion of the concept of collaborative practice. Dr. Davis shared that a recent study showed a 30% reduction in readmission rate among patients who, upon hospital discharge, received a specific protocol which included a careful review of discharge medicines and who then received a follow-up telephone call three days post-discharge

from a pharmacist to ask if the patient had any questions and to ensure that the patient was taking the medications correctly. Dr. Davis said that young physicians are being taught collaborative practice during their medical training and are comfortable with the concept. With the advent of the electronic health record, e-prescribing, and the evolution of the Prescription Drug Monitoring Program, there are increasing opportunities for collaborative practice.

Dr. Davis said that Mr. Ellis invited the Board of Pharmacy to submit a newsletter article to the Wyoming Medical Society about Rules Chapter 9 and the concept of collaborative practice. Mr. Ellis also invited representatives from the Board of Pharmacy to attend a Wyoming Medical Society Executive Committee meeting and make a presentation, approximately 20 minutes in duration. Dr. Davis said that, if the Board accepts this invitation, he believes there must be a specific agenda and dissemination of pertinent information in as efficient a manner as possible.

Dr. Davis said that there is an opportunity at present for the Board of Pharmacy to establish communication with other entities, and he perceives that the Board is being asked to play a role in facilitating that communication. The presentations by Mr. Bohnenblust of the Board of Medicine and Dr. Bush of the Department of Health at this meeting, as well as the discussion with Mr. Ellis and his invitation, are encouraging. Ms. Walker said that she is speaking with or meeting with Mr. Bohnenblust of the Board of Medicine regularly and there will be Board of Pharmacy representation at the Board of Medicine meeting on February 13, 2009. Dean Vandel said that the University of Wyoming College of Pharmacy will offer a symposium on June 4th on transition from levels of care to which hospital administrators will be invited. Attendance at the symposium would offer a networking opportunity.

Mr. Harrop asked if the Board is interested in accepting Mr. Ellis' invitation to present at an Executive Committee meeting of the Wyoming Medical Society. The Board responded affirmatively. Mr. Harrop asked the Board to decide how many items should be presented to the Executive Committee. After discussion, four focus topics were suggested: 1) collaborative practice and facilitation of prescriber-pharmacist communication; 2) immunization administration by pharmacists; 3) e-prescribing; and 4) the Prescription Drug Monitoring Program.

Dr. Davis said that, on behalf of the Board of Pharmacy, he will accept Mr. Ellis' invitation to present to an Executive Committee meeting of the Wyoming Medical Society and will inquire when the Board could be placed on a meeting agenda. Dr. Davis said that he believes that a pharmacist from the Board should be involved in the presentation.

Mr. Harrop asked Dr. Davis to inform the Board, through Ms. Walker, of the date and time proposed by Mr. Ellis for presentation to the Executive Committee of the Wyoming Medical Society and asked Ms. Walker to draft a presentation plan for the Board's review.

Budget and B-11 request. Ms. Walker disseminated and reviewed the Revenue Budget Summary dated June 30, 2008. Ms. Walker said that the B-11 request is from earmarked funds. Ms. McManus moved that Ms. Walker submit the B-11 request. Ms. Nevins seconded the motion. The motion carried by a vote of 8-0.

Legislative report. Ms. Walker said that she and a PharmD candidate interning at the Agency attended a full-day training on the Wyoming legislative process sponsored by the Equality State Policy Center. Ms. Walker disseminated a summary of pertinent bills currently being considered by the Legislature. Ms. Walker explained House Bill 0294, introduced by Representative Colin Simpson, which proposes requiring the Wyoming State Board of Pharmacy to "create a pilot project for the real-time reporting of data to, and access to data from, the controlled substance prescription tracking program; establishing a method for assisting persons who must participate in the pilot program; providing an appropriation; and providing for effective dates." Rep. Simpson visited the Agency for an orientation to the PDMP. Ms. Walker disseminated the fact sheet she drafted and provided to Rep. Simpson.

University of Wyoming School of Pharmacy experiential program. Dean Vandell said he wished to address any questions by the Board regarding the experiential program designed for the School's PharmD candidates. Ms. McManus said that the Board wants to ensure that the School is working toward a uniform experience, especially between the first and second professional years. During the discussion, Dean Vandell said that a concurrent goal to improving the experiential program syllabus is to develop a better educational program for preceptors, and to encourage preceptors to attend continuing education offerings. The Accreditation Council for Pharmacy Education (ACPE®) requires assurance that there is sameness of experience; preceptors are key to meeting that requirement. Dr. Davis asked if Dean Vandell would provide a syllabus of both the student and the preceptor training programs.

Chapter 17, Sterile Compounding. Ms. Walker summarized the history of U. S. Pharmacopeia (USP) and its Chapter 797, and briefly reviewed the PowerPoint presentation made by Claudia Okeke of USP at last year's NABP® national meeting. Ms. Walker emphasized the statements, "Applies to all compounding personnel without distinction as to site or profession" and "provides minimum practice and quality standards."

Ms. Walker introduced Mr. Seeley, the Chair of the Wyoming 797 Work Group, formed to draft rules addressing USP Chapter 797. Ms. Walker said that Mr. Seeley has been a fantastic leader who should be commended for his leadership and commitment to this complex task.

Mr. Seeley summarized the history of the 797 Work Group. The goal was to draft rules that pharmacies could understand and implement, and that the Board could use to educate, inspect, and regulate. Mr. Seeley said that his vision of the Work Group is that the members will help others get up to speed. Mr. Seeley stressed that the Work Group kept in mind that they were drafting Board of Pharmacy rules that regulate pharmacists, not other hospital personnel.

Mr. Seeley then reviewed the draft Chapter with the Board and answered questions posed by the Board. Drs. Stanton and Winsch, both Work Group members, also answered questions.

Dean Vandell said that the University of Wyoming School of Pharmacy is one of the few schools that offers a sterile compounding course, but it is very expensive, \$10,000-\$12,000 annually.

Ms. Walker said that, this year, the Inspectors will ask pharmacies if they are aware of the 797 standards, and if they know that new rules will be forthcoming. Richard Burton said that the Inspectors will ask if the facility has policies and procedures in place; facility policies and procedures will become very important regarding this topic. Ms. Walker said that each facility will need to define its function, e.g., only low-risk compounding, etc.

There was discussion of template policy and procedure development for facilities and the role of the Board and the Wyoming Pharmacy Association in education.

Ms. Nevins said that Mr. Seeley, the Work Group membership, Ms. Beech and the Wyoming Pharmacy Association, and Ms. Walker should be commended for creating and sustaining a great work group and for producing an excellent rules' draft.

The draft Chapter will be reviewed again by the Board at its April meeting.

NABP® Annual Meeting delegate selection. Ms. Walker said that she has delegate application forms for anyone who is interested in attending the Annual Meeting. There is opportunity for a travel grant. Ms. Nevins is a member of the Resolutions Committee; consequently she will have some financial support for her attendance.

NABP® District Meeting delegate selection. Ms. Nevins will attend as District President. Ms. Walker asked Board members to consider attending and to inform her if they are interested in attending.

Board of Medicine Meeting attendee discernment. Ms. Walker said that Mr. Burton, Mr. Carr, Dr. Davis, Ms. McManus, and Mr. York plan to attend the February Board of Medicine meeting with her. Ms. Walker said that, if others are interested in attending, they are welcome and encouraged to do so.

Institute for the Certification of Pharmacy Technicians (iCPT) examination. Ms. Walker said that this company has contacted her and has requested inclusion in the Board Rules as an accepted certification for pharmacy technicians applying for registration in Wyoming. Mr. Harrop tabled a decision regarding the request.

Board meeting schedule for 2009. Ms. Walker reviewed the schedule. The next meeting will be held April 29-30, 2009 in Lander at The Inn at Lander.

Ms. Walker noted that the meeting location in Casper has changed from the Parkway Plaza to the Ramada Plaza Riverside, and thanked Ms. Beech for making room arrangements for the meeting.

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Adjournment. There being no further business brought before the Board, Mr. Harrop adjourned the meeting at 11:40 a.m.

Respectfully submitted,

signature on file
Jacqueline L. Seebaum
Executive Assistant

Minutes reviewed:

signature on file
Mary K. Walker, R.Ph.
Executive Director

Minutes approved and entered into the record:

signature on file
Randolph A. Harrop, R.Ph.
Board President