

WYOMING STATE BOARD OF PHARMACY
Board Meeting June 24-25, 2009
Ramada Plaza Riverside Hotel and Convention Center
300 West F Street
Casper, Wyoming

A. Call to Order

1. The meeting was called to order at 1:03 pm on Wednesday, June 24, 2009 by President Kay McManus. A quorum was established by Board Attorney Ken Nelson.
2. Approval of the Minutes of the meeting April 29-30, 2009. Motion by Mr. Harrop, Second by Dr. Davis. Motion carried. The minutes were approved with no corrections or additions.
3. Mary Walker introduced Jamie Wilkey, PharmD candidate from the University of Wyoming, who is serving a month long rotation at the board office and is taking notes for the minutes.

B. Presentations to the Board.

1. Wyoming Professional Assistance Program, speaker George Vandell
There are currently 87 professionals being monitored, 7 pharmacists and 1 technician. All are in full compliance. An assessment of a prospective pharmacy student at the University of Wyoming was completed and a meeting held in Laramie with UW School of Pharmacy and Mary Walker in attendance. The annual report was included in the board packet with information from the inception of the program in 1997 to now. Questions were answered including the definitions of "closed file" (only an initial assessment was completed) and "discontinued file" (the person dropped out of the program). Marketing expenses are for vendor fairs such as held at the WPHA convention.
2. Opioid Compliance Consulting, speaker Luke Jessen, Regional Sales Manager
A power point presentation about OCC and the Wyoming Prescription Drug Monitoring Program was viewed and discussed. A handout is with the permanent board minutes. OCC provides urine drug testing via contract to pain control physicians in WY who may or may not be requesting patient profiles. This proposal establishes a consultative relationship between the treating physician and the OCC physician. OCC is asking for approval with one of the two following options:
 - a. The Board would allow for a signature on file for the treating physician. OCC would request a patient profile whenever a drug test comes through to OCC. The information would be sent to the treating physician.
 - b. The Board would allow OCC to have profiles sent directly for OCC clients. The faxed profile would not come to OCC but go directly to the treating physician.

Extensive discussion was held. The urine drug testing is qualitative not quantitative and provides results as "expected" or "unexpected". OCC currently checks for THC, amphetamines, alcohol glucuronide, and opioids.

Board members mentioned the many family practice and non-pain specialist physicians who prescribe large amounts of opioids. The online PDMP programs in Colorado and New Mexico have agreements with OCC. The PDMP reports assist by providing information for compliance and are used as a marketing tool as an additional service to physicians.

This issue was revisited later in the meeting. Discussion was held about whether there is a need for a third party to prompt prescribers to obtain a patient profile. The Board of Medicine is asking the Boards of Optometry, Dental examiners, and Nursing to approve the Pain Management protocol which was approved in January by the Board of Pharmacy. The purpose of the PDMP was patient safety and the prescriber's use of the information. The profiles are available and the need for a third party is not clear. Mr. Harrop moved and Mr. Carr seconded the motion to send a letter to OCC indicating the board will wait until more is known about the online PDMP before changing the rules or approving the OCC request. The motion carried 5-0.

3. PharmaLogic WY Inc. Presentation was not given. An open house will be held on July 7 in Casper before the pharmacy is actually open and the board is invited.
4. Permanent Solution for Drug Disposal by Patti Nelson, R.Ph.
Ms. Nelson discussed the donation and disposal programs she has led. She uses the Casper College pharmacy technology students to assist in sorting. Law enforcement in Casper has been very helpful. Ms. Nelson is investigating more drug disposal boxes. Water treatment plants cannot remove the chemical compounds particularly antibiotics. Consumers can be encouraged to purchase drugs in smaller amounts, purchase medications with a low environmental impact, and encourage "take back" programs. Ms. Nelson has spoken in Maine. A drug disposal box is currently installed at the Casper Police Department at 200 South David Street. It must be mounted to the floor or wall per DEA rules. Items are segregated by controlled (evidence destroyed by the police), or non-controlled products for the Cheyenne re-donation program or taken to Wyoming Medical Center for incineration. Advantages include the 24 hour year round availability to the public. Utah has many disposal boxes. Police stations in Lovell, Greybull, and Basin, WY have put in donation boxes but collection times and days are unsure. Controlled substances are roughly 7-10% of the collection (21 pounds of 371 pounds collected). The DEA requires a log but does not specify what must be on the log. Ms. Nelson also segregates tramadol, carisoprodol, and ephedrine. Casper police chief Tom Pagel purchased the donation box and has been very supportive. Pharmacists can contact Ms. Nelson for community take back program information.
5. 340B Drug Program, speaker Roxanne Homar, State Pharmacist
Ms. Homar came to address questions and concerns with the Cheyenne Health and Wellness 340B plan which was discussed at the January 2009 board meeting. If the program is a true pharmacy the board regulates it but if it is part of a clinic program (as it is in Cheyenne) the board of pharmacy does not

regulate it. The presentation to the board stated the physician was going to give the patient the medication and do the counseling. The 340B program in Casper is done through pharmacists. Ms. Walker discussed a meeting she attended with the Board of Nursing at the Cheyenne clinic to answer questions from the clinic nurses. The board has also received questions from Physician Assistants who can dispense medications only in rural areas. Mr. Harrop motioned to have further discussion later in the meeting. Motion carried.

The issue was revisited later in the meeting. Mr. Harrop moved and Ms. Nevins seconded to have the board staff attempt to determine how many 340B programs are in WY, if they are clinic based, and if the Board inspectors should be checking to see if they comply. Motion carried 5-0.

6. Casper College Pharmacy Technology Program, speaker Sherri Roumel, R.P.T. Ms. Roumel discussed the program prerequisites and class requirements and invited the board to tour the lab facility. There are 15 first year students and 14 new students. Some do online courses from as far away as Spearfish, SD. The labs are taught once a week and a new program is planned for four weekends to make it more accessible to technicians who are working full time. Evaluations from pharmacists around the state indicate differences between educated and on-the-job trained technicians. Elkhorn Rehabilitation Hospital in Casper requires technicians to have completed an accredited program. Wages have a wide range. Casper College is the only program in the state. All Casper College students have had a 100% pass rate and 100% placement rate. Some students go on to pharmacy school and complete prerequisites at the same time they earn the associates in pharmacy technology. Public safety is an issue with information from medication error reports that 78% of errors occur on input.
7. Medical Oxygen Suppliers, speaker Bill Malloy was not present. Ms. Walker reported that there are 109 oxygen suppliers licensed in WY with 60% of them having renewed their license for 2010 by the meeting.

C. Reports to the Board of Pharmacy

1. Alliance of States with Prescription Monitoring Programs, Western States, May 5-6, 2009 in Denver, Colorado. David Wills and Ms. Walker attended. Oregon is close to passing a bill. Florida signed their bill after many years of introducing legislation. Montana's bill died in committee. Colorado invited Wyoming to visit and review their online program through Gould Health Systems. NASPER is a federal law passed in 2005 to make PDMP information nationally shared. Mr. Wills is attending the NASCSA meeting in October with a national Alliance meeting first. Ms. Walker is attending an Alliance meeting in Washington, DC in September 2009.
2. NABP 105th Annual Meeting, May 16-18, 2009. Jennifer Nevins reported. The president's reception was very nice. The resolutions committee took a long time with 8 presented, one from each district. The continuing education included one from the DEA. The US consumes 99% of the world's hydrocodone

with only 5% of the population. Teenagers think prescription drugs are safe. Another CE was on ways to keep the boards of pharmacy strong and vital. The Community Pharmacy Accreditation programs will be at no cost to the states. Standardization of technician education was supported by NABP. Ratios of pharmacists to support personnel are issues. 83% of other countries license and register technicians and 50% have national standards for technician training.

3. MPJE Item-Writing Session, June 4-5Th, 2009 at NABP, attended by Ms. Walker and Ms. McManus. The review will be online in October. Of the 90 questions on the test, 60 count and 30 are being calibrated. Because so few candidates take the WY examination it takes time to get enough questions validated.
4. Prescription Drug Monitoring Program, handout provided in the packet. Unsolicited profiles are mailed to each prescriber and pharmacy involved when the numbers hit a monthly parameter. Mr. Wills has been working with the non-reporting pharmacies as the statute change goes into effect on July 1, 2009 requiring weekly reporting by pharmacies. Positive comments have been received from prescribers and law enforcement about the more up to date information and quick response. The pilot program in the new legislation is set up for a three year implementation and information will be sent to companies who may wish to bid for the WY contract. Atlantic Associates is contracted through June 30, 2010 and can be renewed.
5. Budget reported by Ms. Walker. No adjustments were required for 2010 by the Governor's office. A request has been made to the governor to replace the Executive Assistant who resigned effective July 2, 2009. Mr. Carr moved and Ms. Nevins seconded to have the position filled as soon as possible. The Motion carried 5-0.
6. Licensing Update, reported by Ms. Walker and included in the board packet. Pharmacists 1093, 70 immunizers. Interns 213, Pharmacies 547, Controlled Substance registrants 2,851 with 360 received via online renewals. Wholesale Distributors were required to provide much more information this year due to the statute and rules changes. More than half of the 703 have renewed. Mr. Harrop moved, Mr. Carr seconded to seek online renewals for pharmacy technicians. The Motion carried 5-0.
7. Communication with Physicians, reported by Dr. Davis. Dr. Doug Parks gave a presentation at the Wyoming State Medical Society recently. Dr. Parks played a large role in the telepharmacy statute. Dr. Parks would like the Pine Bluffs telepharmacy to be able to provide controlled substances. There are other areas that are underserved in WY and telepharmacies could be an improvement. Extensive discussion was held about the safety of controlled substances in clinics. WPA Chapter 14 Section 3 (H) states that controlled substances may not be dispensed from the telpharmacy site. Mr. Harrop moved: a. a telepharmacy should have a current formulary, b. a telepharmacy should have a limited quantity, and c. a telepharmacy should

have a daily inventory if controlled substances are kept. Mr. Carr seconded the motion and the Motion carried by a vote of 5-0.

8. Inspector's Report, given by Hank York.
Inspections are halfway completed for 2009 and are going smoothly. Display of licenses is an issue. Counseling can prevent medication errors. Pharmacists report that corporations are paring down the number of pharmacists and/or technicians and the workload is going up. Patients are asking for early refills on controlled substances and becoming angry if refused. Prescribers are having patients complain in the parking lot outside emergency rooms. The police can be called, it is not a violation of HIPAA.

D. Discussion/ Action Issues:

1. Collaborative Practice Committee, reported by Ms. Nevins
A request was received to add Dr. Patrick Yost to the collaborative practice agreement with Dr. Amy Stump in Cheyenne. The committee voted to accept the request after reviewing the entire agreement. Mr. Carr moved to accept the committee report, Dr. Davis seconded. The motion carried 5-0.
2. Resignation of Louann Weber, R.P.T. from the board was received. Ms. Nevins moved to accept the resignation, Mr. Harrop seconded. Motion passed 5-0. An announcement was made that there is now an opening on the board and interested technicians are encouraged to apply with the Governor's office.

Mr. Harrop moved and Ms. Nevins seconded the motion to send a letter to Louann Weber thanking her for her service. The motion passed 5-0.

3. NABP Pharmacy Jurisprudence Survey Ms. Walker stated that board members are requested to go online and take the survey of about 30 minutes. The survey will indicate if the competencies covered by the MPJE are outdated.
4. September 2009 Board Meeting, Public Hearing and Disciplinary Hearing
Dates and places were discussed. Mr. Harrop moved and Ms. Nevins seconded to have the September meeting in Cheyenne on September 16, 17, 18. The motion carried 5-0. Mr. Nelson requested the disciplinary and public hearings to be held the 16 and 17.
5. Upcoming Meetings:
 - a. Alliance of PDMP states, September 23-25, 2009. Ms. Walker will attend.
 - b. NABP District 7 meeting in New Orleans, September 2009. Ms. Nevins will attend as president and encouraged others to do. Alaska is planned for the 2010 district meeting.
 - c. NASCSA meeting in San Diego, October 2009. Mr. Wills will attend.
 - d. NABP 2009 symposium in Tucson, AZ, December 2009.
 - e. NABP 106th Annual Meeting in 2010
 - f. NASCSA meeting in 2010
 - g. NABP 107th Annual Meeting in 2011

Mr. Harrop moved to go into Executive Session. The motion was seconded by Mr. Norwood and passed 5-0. The Public Meeting will resume at 8am on June 25, 2009.

The public meeting was called to order on Thursday, June 25, 2009 by President Kay McManus at 8:03 am.

D. Discussion/Action Issues Continued

6. Disciplinary Actions

- a. Docket 09-17 Petra Abram: Mrs. Nevins moved and Mr. Carr seconded the motion to accept the settlement agreement. No discussion, motion carried 5-0.
- b. Docket 09-20 ____ Peterson: Mr. Carr moved and Mr. Harrop seconded the motion to accept the settlement agreement. No discussion, motion Carried 5-0.
- c. Docket 09-01 Kim Nimmo: Mrs. Nevins moved to accept and Dr. Norwood seconded the motion to accept the settlement agreement. No discussion, motion carried 5-0.
- d. Docket 09-11 James Wortham: Dr. Norwood moved, Mr. Carr seconded the motion to accept the conditional licensing agreement. No discussion, motion carried 5-0.

7. Continuing Education

Discussion was held about how to handle continuing education as a disciplinary matter. In 2008 there were 8 actions, in 2009 there were 5 actions. 110 pharmacists and 45 technicians were audited in a random fashion. This year a second letter was sent if the audit showed noncompliance. Four pharmacists and one technician did not pass the audit. Mr. Nelson will provide information at the next meeting about the requirement coming from statutes or rules. The next newsletter will have a reminder about how much CE is required and the importance of keeping track of it.

8. Licensing Committee

President McManus appointed Mr. Harrop to the subcommittee to assist in licensing decisions along with Dr. Norwood.

9. Proposed Wyoming Pharmacy Act Rules and Regulations Revisions for 2009

The changes proposed since the April 2009 meeting were listed by chapter, section, subsection in the pre-meeting packet. Ms. Wilkey prepared a "rules review" packet by contacting other states and listing their appropriate rules. Each chapter change was discussed and voted upon. Then the entire chapter change was voted upon to proceed with rule-making. Mr. Nelson reviewed the process for filing rule-making notices: The governor has 10 days to review and give approval to proceed. A public comment period of 45 days is followed by a public hearing (September 16 in Cheyenne). The board then discusses and if no substantive changes are needed the rules can be adopted as submitted. The governor then has 75 days to review and the rules become law when the governor signs them. A new process is being used as of July 1, 2009.

a. Chapter 2: General Practice and Pharmacy Regulations

1. Ch2S4(aa)2-5 chosen which definition of pharmacy to take. Dr. Davis moved to accept cross out of (aa) as noted. Dr. Norwood seconded. No discussion, motion passed 5: 0.
Deleted section (aa) is “(aa) (formerly definitions paragraph u) Pharmacy means any place within this State where drugs are dispensed and pharmaceutical care is provided”
2. Ch2S4(l) Dr. Davis discussed using another state’s good definition of dispensing such as Montana’s, or Utah’s law or NABP’s. Moved by Davis, Seconded by Nevins. No discussion Passed 5: 0. Change to Utah’s law except the word “device”.
3. Ch2S5(b)(vii) add the green section page 2-7 and Ch2S5(c)(vi) page 2-7. A criminal background history is required for each applicant. Moved by Harrop to approve both, seconded by Carr. No discussion Passed 5: 0 “Board receipt of a criminal background history report from the Wyoming Division of Criminal Investigation (DCI).”
4. Page2-8, 2-9. Ch2S6 (a)(ii) add “application”.
Ch2S6(a)(iii) “Complete the two (2) fingerprint cards provided by the Board in order to conduct a criminal background check:
(iv) “Pay the required criminal background check fee.”
Ch2S6(c) “The Board must receive the applicant’s criminal background history report from the Wyoming Division of Criminal Investigation (DCI) before a pharmacist license by license transfer will be issued.” Norwood moved to accept all. Carr Seconded. This does not affect the temporary license, so emergency shortages of pharmacist staffing will not be effected. No discussion, carried 5: 0
5. Page 2-10 Ch2S7(v) the USP temperature ranges were provided and discussed. Harrop moved to accept. Carr seconded. No discussion Passed 5: 0. These will be used throughout the rules from now on.
Refrigerator storage 36 to 46 degrees F (2 to 8 degrees C)
Freezer storage -14 to + 14 degrees F (-25 to -10 degrees C)
6. Page 2-11 Ch2 S7(b)(ii)(A) Ms. McManus voiced concern about the lack of Wyoming law on providing counseling area. Mr. York stated that the average retail pharmacy was over 500 square feet. No motion to change from 500 square feet.
7. Page 2-13. Chapter 2 Section 9 Pharmacist-in-charge. Discussion was held about disability and the 30 days rule. Tennessee rule 2b. was reviewed. Ms. Walker stated there are many PIC changes. Nevins moved to add the disability clause. Seconded by Davis. Carried 4:1. Page 2-13, Ch2 Sect 9 new second paragraph:
“It shall be the responsibility of the person, partnership, firm, or corporation holding a pharmacy license to notify the Board

immediately of the disability for a period exceeding thirty (30) days of the pharmacist-in-charge and a new pharmacist-in-charge shall be designated.”

8. Page 2-23, chapter 2 Section 20. The task force will be looking at eprescribing. If the drug name characters won't fit in the space in the computer system such as PDX used at Medicap and Safeway. Examples are Macrochantin and metronidazole, possible errors.
9. Page 2-26 Chapter 2 Section 25. Spells out what the new fees are. Carr moved and Norwood seconded. No further discussion, carried 5: 0.
10. Page 2-31 Chapter 2 Section 31 adds “of decisions” to collaborative practice documentation. Harrop moved and Nevins seconded. No discussion, carried 5: 0
11. Page 2-34 Chapter 2 Section 30. Pharmacist sudden death, incapacity, or unavailability. Extensive discussion was held about the importance of somebody being responsible and always there as PIC whether or not it is permanent. Chapter 2 Section 9(e) states “No pharmacy shall be permitted to operate without a pharmacist in charge”. Recommendation by WPhA to switch (D) and (E). The interim could require not having a license. Ms. Walker proposed that no rules be made today until more is researched. Tabled.
12. Page 2-35. Chapter 2 Section 30 (b)(vi) Added symbols to be removed when a pharmacy is closed (as well as signs). Moved by Norwood. Seconded by Harrop. No discussion Passed 5: 0.
13. Page2-36. Chapter 2 Section Adding an additional statement showing that a change in ownership requires a change in DEA registration and the steps to be taken. Nevins moved. Carr seconded. Carried 5: 0.

Mr. Carr moved to accept changes to chapter 2 and to move forward with the rule making process. Mr. Harrop seconded, motion carried 5: 0.

b. Chapter 3: Pharmacy Internship Regulations

Mr. Carr moved to accept changes to chapter 3 and to move forward with the rule making process. Mr. Harrop seconded, motion carried 5: 0.

c. Chapter 8: Wholesale Distributors

Mr. Carr moved to accept changes to chapter 8 and to move forward with the rule making process. Ms. Nevins seconded, motion carried 5: 0.

d. Chapter 12: Institutional Pharmacy Practice Regulations

1. Page 12-2 Chapter 12 Section 4 Definitions: Remote Order Processing. Florida and Virginia law were very similar. Harrop moved to accept

- Section 4 Chapter 12 (j). Nevins Seconded. No discussion. Passed 5: 0.
2. Page 12-6 Chapter 12 Section 8. It was discussed that the board inspectors may add to a checklist that inspectors use. Big range of sizes and needs. If go with this idea and layout then nothing would need to be changed in Chapter 12.
 3. Page 12-6 Chapter 12 Section 8 (f) Nevins moved and Norwood seconded to accept the temperature changes to the USP standard. Passed 5: 0.
 4. Page 12-8 Chapter 12 Section 9(e)adding the Drug Information Handbook to accepted references. Moved to accept by Harrop and seconded by Carr. No discussion. Passed 5: 0.
 5. Page 12-8 Chapter 12 Section 10: under equipment the scale is added to have 10mg sensitivity. Nevins moved to accept. Carr seconded. No discussion. Passed 5: 0.
 6. Page 12-11 Chapter 12 Section 12 (d)(iii) discussed at the last meeting to delete the requirement for office space for off-site pharmaceutical care be licensed as a pharmacy. Norwood motioned to delete. Carr seconded. No discussion. Passed 5: 0.
 7. Page12-12 Chapter 12 Section 12 (d)(vi)(B) the requirement for real time audio video link during off-site pharmaceutical care is preventing institutions from obtaining this service. With chapter 17 the issues for sterile compounding are addressed and this is not needed. Harrop moved to delete and Norwood seconded. No discussion. Passed 5: 0.
 8. Nevins talked about the word "hospital" needing to be taken out throughout the whole section. Motion by Carr to strike hospital in section thirteen. Nevins seconded. No discussion. Passed 5: 0.
 9. Page 12-17, Chapter 12 Section 21, the definition of immediate family. Harrop moved to accept. Nevins seconded. No discussion. Passes 5: 0.

10. Harrop moved to send Chapter 12 further on down the line for rulemaking. Carr seconded. Passed 5: 0.
- e. Chapter 13: Compounding
Harrop moved to move Chapter 13 on to rulemaking. Norwood seconded. No discussion. Passed 5: 0.
 - f. Chapter 16: Immunization Regulations. Harrop moved to move Chapter 16 to rulemaking. Nevins seconded. No discussion. Passed 5: 0.
 - g. Chapter 17: Sterile Compounding. Appreciation to the Task Force was expressed by the Board.
 1. Page 17-1 chapter 17 Section 2 (f). A statement about ISO Class 8 environment for compounding radiopharmaceuticals was added. Moved by Carr. Seconded by Norwood. No Discussion. Passed 5: 0
 2. Page 17-4 chapter 17 Section 2 (aa)(i)(B) added" not applicable to compounding Low-Risk Level CSP radiopharmaceuticals. Nevins moved and Davis seconded. No Discussion. Passed 5: 0.
 3. Page 17-5, chapter 17 Section 5(aa)(ii)(E) added a statement about visual check in radiopharmaceutical compounding. Harrop moved to approve (D), (E), and (F) temperature USP standards. Norwood seconded. No discussion. Passed 5: 0.
 4. Page 17-6 Chapter 17 Section 2 (aa)(III)(G) Discussion was held explaining what stressful conditions are. Carr moved and Nevins seconded. No discussion. Passed 5: 0.
 5. Page 17-7 Chapter 17 Section 2(cc) No changes are required for the one bullet point. Carr moved to accept changes on 17-7. Davis seconded. No discussion. Passed 5: 0.
 6. Page 17-8 chapter 17 Section 2 (dd). Add back (i) and the word frozen. Nevins moved to accept the USP temperatures. Davis seconded. No discussion. Passed 5: 0.
 7. Page 17-9 Chapter 17 Section 3 (b)(ii)(A)a statement for radiopharmaceutical buffer areas added. Moved by Harrop and seconded by Carr. No discussion. Passed 5: 0
 8. Page 17-13 Chapter 17 Section 6(a)(v)(B) Harrop moved the deletion. He also moved the inclusion

- of the Section 7 (a)(III) statement “or as established by stability testing.”. Carr seconded. No discussion. Passed 5: 0.
9. Page 17-17 chapter 17 Section 10 (c)(IV) added a statement about radiopharmaceuticals and (d)(iv) added USP temperatures. Norwood moved to accept both changes on the page. Seconded by Carr. No Discussion. Passes 5: 0.
 10. Nevins moved to add the definition of CSP to the definition section under (j) saying “CSP means compounded sterile product”. Carr seconded. No discussion. Passed 5: 0
 11. Board staff will add the correct pages to the cover page. Harrop moved to send Chapter 17 to Rulemaking. Davis seconded. No discussion. Passed 5: 0.
 12. Add the start date of January 1, 2012 for Chapter 17. Moved by Harrop. Seconded by Carr. No discussion. Passed 4: 0. (Dr.Davis left the meeting).

E. Informational Items

1. Correspondence from oxygen suppliers was discussed. 109 medical oxygen suppliers renewed for 2009. 60% have completed renewals for 2010. Comments were received about the surety bond and other documents required. Many suppliers are going for DMEPOS accreditation for Medicare which also requires a surety bond.
2. Drug Market Analysis report in the packet for the Rocky Mountain area was helpful.
3. DCI sent an email expressing appreciation to the board. DCI will appear on a panel at the WPHA convention continuing education.
4. Medication Disposal funding was reduced by the legislature as was the PharmAssist program in Department of Health budget reductions.
5. Work load and burnout are problems for pharmacists. President McManus requested information from other states and NABP.
6. CEI is an immunization education company. The course is taught online and the Board requested information about how the pharmacists will demonstrated technique for administering immunizations.
7. Stakeholders Meeting is planned in the future but the September meeting will not have time. Cheyenne or Casper should be the site and discussion should be held about breaks, interruptions, staffing. A wide variety of working conditions

was observed by Ms. Wilkey when she went with the compliance officer on inspections.

8. Ms. Walker was asked to gather statistics on how many independent pharmacies are in Wyoming.
9. Preparing for Chapter 17 sterile compounding rules by pharmacies in the state was discussed. Inspectors are asking questions during inspections. Ms. Nevins noted the value of the task force which was well represented by hospital pharmacists around the state. Mr. Seeley has been helpful and mentioned that the next challenge of the task force is to assist hospitals in compliance. The CEO's of the hospitals and the Wyoming Hospital Association need to be kept informed. Discussion was held about the delay in implementing sterile compounding rules which were begun in 2005. Mr. Nelson mentioned that the standard of care has been set by USP 797. The new rules now give the ability to discipline.
10. The NABP State News Roundup was included in the board packet.
11. An article "Can Counseling Reduce Medication Errors" was included in the board packet.
12. An article "Addiction: and equal opportunity destroyer" was included in the board packet.
13. Kara Beech, Executive Director of WPHA mentioned that ce may be offered around the state at the same time as the board meetings for tripartite credit

The meeting was adjourned by President McManus at 11:32 am.

Respectfully submitted:

Notes by Jamie Wilkey, PharmD candidate

Reviewed by Mary Walker

Approved by the Board of Pharmacy