

Wes Moore, Governor · Aruna Miller, Lt. Governor · Ryan Moran, DrPH, MHSA, Acting Secretary

## **Office of Controlled Substances Administration (OCSA)**

1223 West Pratt Street Baltimore, Maryland 21223 Kimberly Hiner, MPH, Director

## OCSA MARYLAND ESTABLISHMENT QUESTIONNAIRE

| Establishment Name (dba)  |                |                   |              |                          |
|---|----------------|-------------------|--------------|--------------------------|
| Address   |                |                   |              |                          |
| Telephone   |                | Fax               |              |                          |
| Maryland CDS Registration N   | Number         |                   | Exp.         | Date                     |
| Maryland License or Permit N  | Number         |                   | Exp.         | Date                     |
| DEA Registration Number   |                |                   | Exp.         | Date                     |
| DEA Registration Number<br>Hours of Operation M-F                                     | Sat            | Sun               |              |                          |
| 1. Brief description of the type of w   | vork conducted | using CDS.        |              |                          |
| 2. List all CDS dispensed/distribut per year. Include strength or concentre per year. |                |                   |              |                          |
|   |                |                   |              |                          |
| 3. Person responsible for accountal and/or professional title and/or educa            |                | led substances at | the establis | hment. Include job title |

4. Name of person(s) who will handle and have access to CDS storage area. Include job title and/or professional

title and/or educational degree.

| 5. Exact location in establishment where CDS will be stored. List the location/name of the building, room number of storage area.  |
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| 6. Provide the name, address, phone number, DEA registration number, Maryland CDS registration number and (if applicable) the Maryland Board of Pharmacy distributor permit or pharmacy permit, for ALL suppliers of CDS. Suppliers of prescription CDS products must have a Maryland Board of Pharmacy distribution permit or pharmacy permit. Suppliers of CDS bulk powders and chemicals do not require a Board permit. You MAY NOT purchase/obtain CDS from a supplier that does not have an active Maryland CDS registration. |
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| 7. Provide the name, address, phone number and DEA number of the reverse distributor used for disposal of outdated/unwanted CDS. (COMAR 10.19.03.10D) Any alternate disposal procedure must be approved in writing from your local DEA office and kept on file at the establishment.   |
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| 8. Procedures employed to ensure secure delivery and receipt of CDS to the establishment.  |
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| 9. How will CDS be stored? CDS must be kept either in a lockable safe or under a double lock system (a locked drawer or cabinet within a room with a lockable door). Storage area should be kept locked when not in use and  |
| accessible to approved users ONLY.   |
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| 10. Describe the method used to document receipt, usage and on-hand counts of CDS.   |
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## PLEASE READ AND INITIAL THE FOLLOWING REQUIREMENTS AND RECOMMENDATIONS

| •  | An initial inventory must be taken of all CDS items present prior to th CDS products are present, state "No CDS products at opening of bus (initial)   |   |  |
|--|--|---|--|
| •  | You are required to take a biennial CDS inventory, which is a physical substances on hand that is taken at least every two years. The biennial date, which is within two years of the previous biennial or initial inventory.  | l inventory may be taken on any   |  |
| •  | (initial)  When taking a CDS biennial inventory, schedule II items should be lit. III-V items. An exact count must be made of all schedule II items. Sc estimate, but if fractions or decimals are used, then the container size count must be made if CIII-V products are in opened containers of gradlices. All CDS, including expired and unwanted items, must be included in inventory should be taken on the same day with the same reference pobusiness or after close of business). The date taken and reference point inventory. [21 CFR 1304.11] (initial)  Invoices for schedule III-V must be physically dated upon receipt. It is by filed separately. [21 CFR 1304.21] (initial)  DEA 222 forms, used to order schedule I-II products, must be signed I recent application for the establishment's DEA registration. A power the person authorized to sign the DEA 222 form, to allow others to sign of-attorney must be kept on file at the registered site. [21 CFR 1305.0]  When schedule I-II orders are received, the quantity and date received item on DEA Form 222. [21 CFR 1305.13(e)] (initial)  Executed DEA 222 Forms must be maintained separately from other refor 2 years. [21 CFR 1305.17] (initial)  The theft or significant loss of CDS must be reported immediately upoday, in writing, to the local DEA office and the Office of Controlled Su A DEA Form 106 must be completed for any theft or significant unrecoriginal sent to DEA and a copy sent to OCSA. The DEA 106 Form in DEA, but a copy must be printed and sent to OCSA. [COMAR 10.19.] | must also be included. An exact eater than 1,000 tablet or capsules. the inventory. The entire point (either before opening of ant should be present on the serecommended that these invoices by the person who signed the most e-of-attorney may be executed by an the DEA 222 form. The power-to-to-to-to-to-to-to-to-to-to-to-to-to- |  |
| NOTE: Please ensure that all questions have been answered completely. Incomplete answers and missing information will result in a delay in the processing of your CDS application. |  |   |  |
| Signati  | ure of Applicant   | Date  |  |
| Print N  | Name of Applicant  |   |  |

Office of Controlled Substances Administration • 1223 W. Pratt Street • Baltimore, Maryland 21223 410-764-2890 • Fax 410-358-1793 • TTY for Disabled - Maryland Relay Service 1-800-735-2258 Toll Free 1-877-4MD-DHMH • Web Site: <a href="www.health.maryland.gov/OCSA">www.health.maryland.gov/OCSA</a>