



STATE OF MARYLAND

DHMH

Department of Health and Mental Hygiene

Martin O'Malley, Governor Anthony G. Brown, Lt. Governor Joshua M. Sharfstein, M.D., Secretary

MARYLAND BOARD OF PHARMACY

4201 Patterson Avenue • Baltimore, Maryland 21215-2299

Michael N. Souranis, Board President - Le Verne G. Nusser, Executive Director

VIA REGULAR & CERTIFIED MAIL, RETURN RECEIPT REQUESTED
ARTICLE #7011 3500 0000 7160 2470

February 27, 2013

CVS Pharmacy #4418
8501 Fort Smallwood Road
Pasadena, Maryland 21122
Attn: Lawrence Kotey, P.D.

Re: Permit No. P05464
Notice of Deficiencies, Recommended Civil Monetary Penalty, and
Opportunity for Hearing

Dear Mr. Kotey:

On June 13, 2012, an inspection was conducted by the Board of Pharmacy (the "Board") to determine if CVS Pharmacy #4418 (the "Pharmacy") was in compliance with federal and state laws regarding the operation of a pharmacy. The Inspection Report indicated that the Pharmacy was not in substantial compliance with regulatory requirements regarding registration of pharmacy technicians. Specifically, the Pharmacy employed a pharmacy technician who was not registered with the Board despite having already completed a technician training program. The Board's records indicate that, to date, the pharmacy technician is still not registered.

I. FINDINGS AND CONCLUSION

The Board adopts the findings of deficiencies as set forth in the Pharmacy Inspection Report dated June 13, 2012, and attached as Exhibit A.

Based upon deficiencies cited at your Pharmacy, the Board finds that the Pharmacy is in violation of the Maryland Pharmacy Act and the regulations adopted thereunder. Specifically, the Board finds the Pharmacy in violation of Health Occ. Art. § 12-403(b)(1) and § 12-6B-01.

410-764-4755 • Fax 410-358-9512 • Toll Free 800-542-4964
DHMH 1-877-463-3464 • Maryland Relay Service 1-800-735-2258
Web Site: www.dhmh.maryland.gov/pharmacy

II. RECOMMENDED CIVIL MONETARY PENALTY

Under Maryland Health Occupations Article § 12-410 and COMAR 10.34.11, the Board of Pharmacy has the authority to impose a civil monetary penalty based upon violations of the Maryland Pharmacy Act.

Based upon the deficiencies cited at the Pharmacy, the Board hereby recommends the imposition of a **civil monetary penalty of \$1,000.00**. The deficiencies upon which the civil monetary penalty is based are enclosed with this letter on Pharmacy Inspection Report dated June 13, 2012.

In determining the recommended civil monetary penalty, the Board took into consideration the following factors:

1. History of previous violations;
2. Whether the violation was self-reported;
3. Admission of misconduct and cooperation during Board inspection;
4. Remedial measures implemented;
5. Timely good faith effort to rectify consequences of misconduct;
6. Potential harm to the public or adverse impact;
7. Whether incident was isolated and unlikely to recur;
8. Whether misconduct was motivated by financial gain.

III. FOLLOW-UP INSPECTION

Please be advised that the Board of Pharmacy may perform a follow-up inspection of the Pharmacy to insure that the deficiencies noted the Report have been addressed and corrected. Should a follow-up inspection indicate that the Pharmacy is not in substantial compliance, the Board may pursue further disciplinary action against the Pharmacy that may result in the imposition of sanctions such as suspension, revocation or additional monetary penalties.

IV. OPPORTUNITY FOR HEARING

If the Pharmacy disputes the findings, conclusions or the recommended civil monetary penalty, the Pharmacy may request an evidentiary hearing on the Board's decision in this matter. In the event that the Pharmacy requests an evidentiary hearing, the Board shall initiate formal proceedings which will include the opportunity for a full evidentiary hearing. The hearing will be held in accordance with the Administrative Procedure Act, Md. Code Ann. State Gov't § 10-201 *et seq.*, and COMAR 10.34.01. Any request for a hearing must be submitted in writing to Vanessa Thomas Gray, Investigator, Maryland Board of Pharmacy, 4201 Patterson Ave., 1st Floor, Baltimore, Maryland 21215,

no later than thirty (30) days of the date of this Notice.

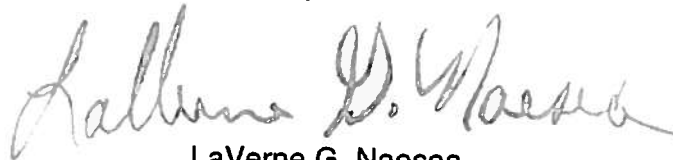
Please be advised that at the hearing you would have the following rights: to be represented by counsel, to subpoena witnesses, to call witnesses on your own behalf, to present evidence, to cross-examine witnesses, to testify, and to present summation and argument. Should the Board find the Pharmacy guilty of the violations cited in the Reports, the Board may suspend or revoke the pharmacy permit, or impose civil penalties, or both. If you request a hearing but fail to appear, the Board may nevertheless hear and determine the matter in your absence.

V. OPTION TO PAY RECOMMENDED CIVIL MONETARY PENALTY

Alternatively, the Pharmacy may pay the recommended civil monetary penalty **within thirty (30) days** of the date of this Notice, in the form of a certified check or money order made payable to the Maryland Board of Pharmacy. Upon the Pharmacy's payment of the civil monetary penalty, this Notice will constitute the Board's final action with respect to the Inspection Report dated June 13, 2012, and shall be a public document in accordance with the Maryland Public Information Act.

If you have any questions concerning the instructions contained in this letter, please contact Vanessa Thomas Gray, Investigator, at 410-764-2493.

Sincerely,



LaVerne G. Naesea
Executive Director

Attachment

cc: CVS, Director of Regulatory Compliance
Linda M. Bethman, Assistant Attorney General, Board Counsel
Vanessa Thomas-Gray, Compliance Investigator

Exhibit

A

CA, Tech Training # 7

STATE OF MARYLAND

DHMH

Department of Health and Mental Hygiene
Martin O'Malley, Governor Anthony G. Brown, Lt. Governor John W. Calvery, Secretary

MARYLAND BOARD OF PHARMACY
 201 Patterson Avenue, Baltimore, Maryland 21215-2299
Michael Simmons, Board President - LaVonne G. Kaesed, Executive Director

COMMUNITY PHARMACY INSPECTION REPORT

Permit: P05464
 Inspection Result:
 Type of Inspection: Annual

Inspect on Date: 6/13/2012
 Previous Insp. Date: 5/31/2011
 Inspector: Ychan

Pharmacy Name: CVS PHARMACY #4418
 Corporate Name: MARYLAND CVS PHARMACY LLC
 Telephone: 4104371149
 Permit Exp. Date: 2013
 Arrival time: 2:00PM

Address: 8501 FORT SMALLWOOD RD
 City: PASADENA State: MD Zip: 21122
 Fax: 4104393043
 Departure Time: 4:30PM

1. GENERAL INFORMATION

Yes The pharmacy hours of operation are prominently displayed if the prescription area is not open the same hours as the establishment
 Pharmacy Hours M-F 8AM-10PM Saturday 9AM-6PM Sunday 10AM-6PM
 Yes All permits, licenses, and registrations are posted conspicuously. HO §12-311, HO §12-408(b) and HO §12-6B-08

CDS Registration #: 474813 CDS Exp. Date: 02/28/2013 DEA #: BR3926358 DEA Exp. Date: 12/31/2013
 No The pharmacy perform sterile compounding. (If yes, complete Sterile Compounding Inspection Form) COMAR 10.34.19
 No The pharmacy provides services to Long Term Care facilities or assisted living facilities. (If yes, complete Long Term Care Inspection Form) COMAR 10.34.23
 No The pharmacy fills original prescription received via the internet
 Yes The pharmacy fills original prescriptions via e-prescribing.
 No The pharmacist fills mail order prescriptions.

If yes to any of the above, how do pharmacists verify that a relationship exists between the patient and the prescriber? HO §21-220, COMAR 10.19.03.02
CHECK PATIENT PROFILES, CALL AND VERIFY IF NEEDED
 Comments: FORMER EMPLOYEE'S LICENSES AND REGISTRATIONS ARE STILL POSTED

2. PERSONNEL (COMAR 10.34.03.05)

Name of Pharmacist/Manager who is charged with ensuring compliance with all applicable laws: LAWRENSE KOTEY
 Pharmacist Employees:

License Number	Last Name	First Name	Expiration	Status
14129	SASTRY	JONNALAGA	06/2013	A
16918	KOTEY	LAWRENCE	09/2012	A

Registration #	Last Name	First Name	Initials	Exp. Date
T07892	DITTMAR	LISA	L	9/30/2013
TJ3790	WITHROW	ANNA	M	12/31/2012
T07448	MCVEY	GINA	VI	2/28/2014
T00439	Nye	Kim	D	11/30/2013
T08793	SOWARDS	GLORIA	J	1/31/2013
T08964	GARVEY	JULIA	R	8/31/2012

Unlicensed Personnel:	Name	Title	Duties:
	CHARLES CARNES	TRAINING TECH	FILLS, ENTER RX
	HEATHER SPENCER	TRAINING TECH	ACCEPT RX FROM <i>Patients</i> (y)
Comments:	BRITTNEY WILLIAMS - CASHIER. BOTH TRAINING TECHNICIANS ARE ON DUTY DURING INSPECTION AND WERE OBSERVED IN PERFORMING DUTIES LISTED ABOVE		

3. PERSONNEL TRAINING

- Yes There are policies and procedures to specify duties that may be performed by unlicensed personnel under the supervision of a licensed pharmacist COMAR 10.34.21.03A and 10.34.21.05
- Yes All unlicensed personnel who perform tasks in the pharmacy receive documented training for the tasks they perform COMAR 10.34.21.03B(i)
- All personnel have received training in (check all that apply): 10.34.21.03B (3)-(4)
 - Yes Maintaining records
 - Yes Biohazard precautions
 - Yes Patient confidentiality
 - Yes Patient safety and medication errors COMAR 10.34.26.03
 - Yes Sanitation, hygiene, infection control

Comments SEE TRAINING TECHNICIAN DOCUMENTS ATTACHED

4. SECURITY COMAR 10.34.05

- Yes The pharmacy is designed to prevent unauthorized entry when the prescription area is closed during any period that the rest of the establishment is open. If yes, briefly describe how access is restricted COMAR 10.34.05 02A(5)
- METAL GATES AND LOCKED DOOR
- Yes The pharmacy and/or pharmacy department has a security system COMAR 10.34.05 02A(2)
- Yes The permit holder shall prevent an individual from being in the prescription area unless a pharmacist is immediately available on the premises to provide pharmacy services COMAR 10.34.05 02A (3)

Comments OK

5. PHYSICAL REQUIREMENTS AND EQUIPMENT

- Yes Pharmacy area is clean, neat, and organized HO §12-403(b)(11)(ii)2
- Yes The pharmacy provides a compounding service (non-sterile procedures)
 - Yes If yes, the pharmacy maintains equipment that enables it to prepare and dispense prescriptions properly within its scope of practice COMAR 10.34.07.02
- Yes The pharmacy has a Class A prescription balance and weights, or a prescription balance with equivalent or superior sensitivity COMAR 10.34.07.01A
- Yes The pharmacy has hot and cold running water.
- Yes The medication refrigerator(s) contain only prescription and OTC items COMAR 10.34.07.01B
- Yes The medication refrigerator(s) have a thermometer and the current temperature is between (36 - 46 F) USP COMAR 10.34.07.01B
- Yes The current temperature of the pharmacy department is between 59 to 86 F. COMAR 10.34.05 02A(1)(a) Temperature: 32F, 40F, 40F, 18F
- Yes If the pharmacy stocks medications requiring freezing, the freezer is maintained at temperatures required by the medications stored within it Temperature: 70F
- Yes The pharmacy maintains at all times a current reference library that is appropriate to meet the needs of the practice specialty of that pharmacy and the consumers the pharmacy serves HO § 12-403(b)(10)
- Yes The pharmacy has online resources. HO §12-403(b)(15)

Comments: TWO OF THE FOUR MEDICATION REFRIGERATORS WERE BELOW THE REQUIRED RANGE NO MEDICATION ARE STORED IN FREEZER COMPARTMENT

6. PRESCRIPTION LABELING FILES AND STORAGE

- Yes Prescription files for each prescription prepared or dispensed are made and kept on file for at least 5 years. HO § 12-403(b)(13)(i) HO §12-403(b)(13) The following label requirements are met if a drug is dispensed pursuant to a prescription. HO §12-505
 - Yes The name and address of the pharmacy; HG §21-221(a) (1) Yes The serial number of the prescription, HG §21-221(a) (2)
 - Yes The date the prescription was filed; HO §12-505(b) (1) and HG §21-221(a)(3) Yes The name of the prescriber; HG §21-221(a) (4)
 - Yes The name of the patient; HG §21-221(a) (5) (i) Yes The name and strength of the drug or device; HO §12-505(c)
 - Yes The directions for use. HO §12-505(b)(2)(ii) and HG §21-221(a)(5)(ii) Yes The required cautionary statements or auxiliary labels; HG §21-221(a)(5)(j)
 - Yes The name of generic manufacturer; and HO §12-504(d) (2) and §12-505(c) (2) Yes The expiration date is indicated. HO §12-505(b) (2)
- Yes The pharmacist and data entry technician initials are on prescriptions COMAR 10.34.08.01
- Yes Original prescriptions are dispensed within 120 days after the issue date. HO §12-503

Comments: OK

QUALITY ASSURANCE - PATIENT SAFETY, MEDICATION ERRORS

No Policies are written policies that inform patients of the procedures to follow when reporting a suspected medication error to the permit holder, pharmacist, health care facility or other health care provider. COMAR 10.34.26.02
 Yes The pharmacy maintains a minimum of 2 continuous years of records clearly demonstrating the content of annual educational training provided to each member of the pharmacy staff involved in the medication delivery system regarding the role and responsibility of pharmacy staff in preventing medication errors. COMAR 10.34.26.03B
 Yes There is an ongoing quality assurance program that documents the competency and accuracy of all assigned tasks. COMAR 10.34.21.03E
 Comments: CANT LOCATE ABOVE POLICIES

8. CONFIDENTIALITY

Yes Confidentiality is maintained in the creation, storage, access disposal and disclosure of patient records. HO§12-403(b)(13), COMAR 10.34.10.03A and HIPAA Regulations
 Yes Any identifiable information contained in a patient's record is not disclosed unless authorized by the patient, or an order of the court or as authorized pursuant to HG §4-301 through §4-307. COMAR 10.34.10.03B
 Comments: OK

9. INVENTORY CONTROL PROCEDURES

Yes The pharmacy maintains invoices as required by law for accurate control and accountability of all pharmaceuticals. COMAR 10.34.24.03
 Yes The pharmacy has a procedure in place for removal of all expired drugs (both prescription and OTC). COMAR 10.34.12.01
 Comments: OK

10. CONTROLLED SUBSTANCES

Power of Attorney 16918 A KOTEY LAWRENCE
 Yes The pharmacy has a record of the most recent required biennial inventory of Schedule II-V controlled substances. COMAR 10.19.03.05B
 Inventory date: 04/30/2011
 Biennial inventory completed at: Close
 Yes The inventories and records of Schedule II-V drugs are maintained and readily available. COMAR 10.19.03.05 and 21 CFR 1306.03
 Yes Records are kept of all receipts of controlled substances entered into the pharmacy inventory (including DEA Form 222 or CSOS orders). COMAR 10.19.03.05
 Yes There are written policies and records for return of CII, CIII-V.
 Yes Hard copy or electronic prescription files are maintained chronologically for 5 years (CDS-Fed Law)
 Yes Schedule II controlled substances are dispersed throughout the stock of non-controlled substances or stored in such a manner as to obstruct theft or diversion. COMAR 10.19.03.12B (2)
 Yes All controlled substances prescriptions bear the name and address of the prescriber and patient. COMAR 10.19.03.07D (1)
 Yes The permit holder or pharmacist designee(s) has written policies and procedures for investigating discrepancies and reporting of theft or loss. COMAR 10.19.03.12B (4)
 Comments: OK

11. AUTOMATED MEDICATION SYSTEMS (If No, go to 12)

No The facility uses any automated device(s) as defined in COMAR 10.34.28.02
 Yes Policies and procedures exist for (check all that apply) COMAR 10.34.28.05
 Yes There are documented contingency plans for continuing operations in an emergency and for disaster recovery of required records

N/A	Operation of the system	N/A	Training of personnel using the system	N/A	Operations during system downtime
N/A	Control of access to the device	N/A	Accounting or medication added and removed from the system		

Yes Sufficient safeguards are in place to ensure accurate replenishment of the automated medication system
 If yes, describe safe guards. COMAR 10.34.28.06 N/A
 Adequate records are maintained for at least two years addressing the following (check all that apply) COMAR 10.34.28.11

N/A	Maintenance records	N/A	System failure reports.	N/A	Accuracy audits.
N/A	Quality Assurance Reports.	N/A	Reports on system access and changes in access	N/A	Training records

 Yes Devices installed after Sept. 1, 2003 operate in a manner to limit simultaneous access to multiple strength, forms and drug entities and minimize the potential for misidentification of medications, dosages and dosage forms accessed from the automated medication system. COMAR 10.34.28.04
 Yes The pharmacy has records documents or other evidence of a quality assurance program regarding the automated medication system in accordance with the requirements of COMAR 10.34.28

Comments: N/A

2. OUTSOURCING (If No, go to 13)

- No The facility outsources the preparation of medication or performs outsourcing functions for other pharmacies. COMAR 10.34.04.02
- N/A The facility serves as a primary pharmacy outsourcer to other pharmacies. COMAR 10.34.04.02
- N/A The facility serves as a secondary pharmacy. COMAR 10.34.04.02
- N/A The permit holder employs an outside agency/business entity for the provision of any Pharmacy services, inclusive of staffing remote order entry and management. If yes, COMAR 10.34.04.06E

Name of Agency: N/A
State of Incorporation: N/A
Service contracted: N/A
MD License#: N/A

Comments: N/A

- N/A The permit holder has written policies and procedures to specify the duties that may be performed by outside personnel. COMAR 10.34.21.03B (3)
If the pharmacy outsources a prescription order.
- N/A The original prescription order is filed as a prescription order at the primary pharmacy. COMAR 10.34.04.06D
- N/A Written policies exist for maintenance of documentation regarding transfer of prescription records. COMAR 10.34.04.06
- N/A Documentation is maintained, including the names and locations of the pharmacies, names of pharmacists and a record of the preparations made. COMAR 10.34.04.03 and .05

The pharmacist from the primary pharmacy documents the following in a readily retrievable and identifiable manner (Check all that apply) COMAR 10.34.04.06

- N/A The prescription order was prepared by a secondary pharmacy
- N/A The name of second pharmacy
- N/A The name of the pharmacist who transmitted the prescription order to the secondary pharmacy
- N/A The name of the pharmacist at the secondary pharmacy to whom the prescription order was transmitted if the transmission occurred in an oral manner
- N/A The date on which the prescription order was transmitted to the secondary pharmacy
- N/A The date on which the preparation was sent to the primary pharmacy
- N/A The primary and secondary pharmacies are both licensed in the State of Maryland or operated by the federal government. COMAR 10.34.04.06F
- N/A The primary pharmacy maintains, in a readily retrievable and identifiable manner, a record of preparations received from secondary pharmacy. COMAR 10.34.04.06G
- N/A The permit holder at the secondary pharmacy maintains documentation in a readily retrievable and identifiable manner which includes (check all that apply) COMAR 10.34.04.07
- N/A That the prescription order was transmitted from another pharmacy.
- N/A The name and information identifying the specific location of the primary pharmacy
- N/A The name of pharmacist who transmitted the prescription to the secondary pharmacy if the transmission occurred in an oral manner
- N/A The name of the pharmacist at the secondary pharmacy who accepted the transmitted prescription order
- N/A The name of the pharmacist at the secondary pharmacy who prepared the prescription order
- N/A The date on which the prescription order was received at the secondary pharmacy
- N/A The date on which the prepared product was sent to the primary pharmacy and was sent back to the primary pharmacy

3. Recommended Best Practices:

- Yes A perpetual inventory is maintained for Schedule II controlled substances. (Recommended)
- Yes There are documented contingency plans for continuing operations in an emergency and for disaster recovery of required records
- Yes The pharmacy has written policies and procedures for the safe handling of drug recalls. See www.recalls.gov
- Yes The pharmacy maintains records of all recalls. See www.recalls.gov

Inspector Comments: REVIEWED ENTIRE INSPECTION REPORT WITH LAWRENCE KOTEY, RPH AND ANNA WITHROW, CPHT. CONDUCTED CII AUDIT. ONE MINOR DIFFERENCE FOUND, ADDERALL XR 20MG (319/318), +1 EXCESS. SPOT CHECKED MEDICATION SHELVES, NO OUTDATES FOUND. TRAINING TECHNICIAN CHARLES CARNES (FULL TIME) AND HEATHER SPENCER (PART TIME) WERE BOTH OBSERVED IN PERFORMING TECHNICIAN DUTIES DURING INSPECTION. CHARLES CARNES STARTED HIS TRAINING IN THE PHARMACY ON 08/24/2011 AND HEATHER SPENCER STARTED HER TRAINING ON 06/04/2012. SEE ATTACHED. VIEWED AND PRINTED POLICIES AND PROCEDURES IN PHARMACY RETURN BINDER AND FROM PHARMACY INTRANET, SUGGESTED TO RPH-1 TO KEEP THESE DOCUMENTS WITH THIS INSPECTION REPORT FOR FUTURE INSPECTION. PER THIS INSPECTION 1) MAKE SURE ALL FORMER EMPLOYEE'S LICENSES AND REGISTRATIONS ARE REMOVED. 2) MAKE SURE ALL MEDICATION REFRIGERATORS ARE WITHIN THE REQUIRED RANGE OF 36F-46F 3) SIGN AND DATE ALL CIII-V INVOICES ON THE DAY OF RECEIVING 4) ADJUST THE PERPETUAL INVENTORY OF ADERALL XR 20MG TO REFLECT THE CURRENT COUNT 4) FORWARD THE MISSING POLICIES IN #7 TO MD BOARD OF PHARMACY. ATTENTION VIN CHAN BY 06/20/2012

PER THIS INSPECTION 1) MAKE SURE ALL FORMER EMPLOYEE'S LICENSES
AND REGISTRATIONS ARE REMOVED. 2) MAKE SURE ALL MEDICATION
REFRIGERATORS ARE WITHIN THE REQUIRED RANGE OF 36F-46F 3) SIGN
AND DATE ALL CIII-V INVOICES ON THE DAY OF RECEIVING 4) ADJUST THE
PERPETUAL INVENTORY OF ADERALL XR 20MG TO REFLECT THE CURRENT
COUNT 4) FORWARD THE MISSING POLICIES IN #7 TO MD BOARD OF
PHARMACY, ATTENTION YIN CHAN BY 06/20/2012.

CONTROLLED DANGEROUS SUBSTANCES WORKSHEET

Date of Inspection: 06/13/2012
 Pharmacy: CVS PHARMACY #4418
 Permit #: P05-164

Re: # 0.2.14

DRUGS	ON HAND INVENTORY	PERPETUAL INVENTORY
1. OXYCODONE 30MG	35	35
2. ADDERALL XR 20MG	319	319
3. HYDROMORPHONE 2MG	307	327
4. VYVANSE 60MG	180	180

COMMENTS:

Handwritten notes in comments section

SCHEDULE I AUDIT

Drug
 Date of last inspection/Biennial

Amount at last inspection/biennial
 Purchased since last inspection/biennial
 Total inventory
 Quantity dispensed
 Expected inventory
 Quantity on file
 Discrepancy

(A)
 (B)
 (C) A + B
 (D)
 (E) C - D
 (F)
 (G) (I - E) or (I - F)
 Excess Shortage

INVOICE REVIEW

CV
Handwritten notes

CV - CV
Handwritten notes

PRESCRIPTION REVIEW

CH # 30600 - # 70677
 DATE 5/11/2012 - 5/11/2012

COMMENTS:

CH - CV # 40500 - # 40591
 DATE 5/11/2012 - 5/11/2012

COMMENTS:

Handwritten mark

Pharm. cist Signature
Inspector Signature

Lawrence J Kotey
Lawrence J Kotey

Pharmacist Printed Name LAWRENSE KOTEY
Date 06/13/2012

Anna M Withrow

Anna M Withrow

IF PREGNANT OR OF CHILD BEARING AGE, DISCUSS RISKS/BENEFITS WITH MD OR NURSE.
MAY CAUSE DROWSINESS, ALCOHOL INTENSIFIES EFFECT. USE CARE USING MACHINES.
MAY CAUSE DIZZINESS

RPI: Jonnal A Sastiy Tech A With
Orig: 06/13/2012
Date filled: 06/13/2012
Discard After: 06/13/2012

This is a WHITE, ROUND-shaped TABLET imprinted with M on the front and 05 52 on the back.

DO NOT TAKE MORE THAN 1 TABLET IN 24 HOURS.
CAUTION: FEDERAL LAW PROHIBITS DISPENSING THIS DRUG TO ANY PERSON UNDER THE AGE OF 18.

OXYCODONE HCL 5 MG TABLET
Common Brand(s): Oxycod, Percalone, Roxicodone
TAKE 1 TO 2 TABLETS BY MOUTH EVERY 4 HOURS
Oxycodone Refills require authorization
Store Phone: (410) 437-1149
Rx # N913348
Pharmacist: LAWRENSE KOTEY

TAKING MORE THAN RECOMMENDED MAY CAUSE BREATHING PROBLEMS.
DO NOT DRINK ALCOHOLIC BEVERAGES WHEN TAKING THIS MEDICATION.

294 received a copy of this inspection report on 6/13/2012.

Lawrence J Kotey
6.13.2012