IN THE MATTER OF	*	**BEFORE THE**
CARROLL DRUGS OF MANCHESTER	*	**MARYLAND STATE**
Respondent-Pharmacy	*	**BOARD OF PHARMACY**
Permit Number: P05569	*	**Case Number: 23-166**

* * * * * * * * * * * * *

CONSENT ORDER

On February 19, 2025, the Maryland State Board of Pharmacy (the "Board") charged **CARROLL DRUGS OF MANCHESTER** (the "Respondent-Pharmacy"), Permit Number: **P05569**, under the Maryland Pharmacy Act, (the "Act") Md. Code Ann., Health Occ. §§ 12-101 *et seq.* (2021 Repl. Vol. & 2024 Supp.).

The Board charged the Respondent-Pharmacy with violating the following provisions of Md. Code Ann., Health Occupations ("Health Occ."):

Health Occ. § 12-403. Required standards.

. . . .

(c) Except as otherwise provided in this section, a pharmacy for which a pharmacy permit has been issued under this title:

(1) Shall be operated in compliance with the law and with the rules and regulations of the Board;

. . . .

(7) May not offer pharmaceutical services under any term or condition that tends to interfere with or impair the free and complete exercise of professional pharmaceutical judgment or skill;

(8) May not make any agreement that denies a patient a free choice of pharmacist or pharmacy services;

(9) May not participate in any activity that is a ground for Board action

against a licensed pharmacist under § 12-313 of this title, a registered pharmacy technician under § 12-6B-09 of this title, or a registered pharmacy intern under § 12-6D-11 of this title;

. . .

(11) . . .

(ii) Shall:

1. Be kept in a clean and orderly manner;

. . .

(12) Shall store all prescription or nonprescription drugs or devices properly and safely subject to the rules and regulations adopted by the Board; [and]

(13) Shall:

(i) Make and keep on file for at least 5 years a record of each prescription prepared or dispensed in the pharmacy;

(ii) Disclose the records and files maintained of prescriptions for drugs or devices that identify or may be readily associated with the identity of a patient only in accordance with the provisions of Title 4, Subtitle 3 of the Health--General Article; and

(iii) Keep additional records as required by the rules and regulations adopted by the Board;

Health Occ. § 12-313. Denials, reprimands, suspensions, and revocations–Grounds.

. . . .

(b) Subject to the hearing provisions of § 12-315 of this subtitle, the Board, on the affirmative vote of a majority of its members then serving, may . . . reprimand any licensee, place any licensee on probation, or suspend or revoke a license of a pharmacist if the licensee:

. . .

(2) Fraudulently or deceptively uses a license;

. . .

(21) Is professionally, physically, or mentally incompetent;

. . . .

(25) Violates any rule or regulation adopted by the Board[.]

The Board charged the Respondent-Pharmacy with violating the following provisions of Code of Maryland Regulations ("COMAR"):

COMAR 10.34.10.01. Patient Safety and Welfare.

A. A pharmacist shall:

(1) Abide by all federal and State laws relating to the practice of pharmacy and the dispensing, distribution, storage, and labeling of drugs and devices, including but not limited to:

(a) United States Code, Title 21,

(b) Health-General Article, Titles 21 and 22, Annotated Code of Maryland,

(c) Health Occupations Article, Title 12, Annotated Code of Maryland,

(d) Criminal Law Article, Title 5, Annotated Code of Maryland, and

(e) COMAR 10.19.03;

(2) Verify the accuracy of the prescription before dispensing the drug or device if the pharmacist has reason to believe that the prescription contains an error; and

(3) Maintain proper sanitation, hygiene, biohazard precautions, and infection control when performing tasks in the prescription process.

B. A pharmacist may not:

(1) Engage in conduct which departs from the standard of care ordinarily exercised by pharmacist;

(2) Practice pharmacy under circumstances or conditions which prevent the proper exercise of professional judgment; or

(3) Engage in unprofessional conduct.

COMAR 10.34.20.02. Requirements for Prescription Validity.

A. A valid prescription shall be:

(1) Valid in the professional judgment of the pharmacist responsible for filling the prescription; and

COMAR 10.34.20.03. Prescription Records.

The pharmacy permit holder shall maintain prescription records in a form that:

A. Is readily and accurately retrievable;

B. Is maintained for at least 5 years from the date of dispensing; and

C. Protects the confidentiality and security of the prescription information.

COMAR 10.34.20.04. Controlled Dangerous Substances.

Transmission and dispensing of controlled dangerous substances shall be in accordance with applicable State and federal statutes and regulations.

COMAR 10.34.24.03. Minimum Requirements for Maintenance of Drug Acquisition Records.

A. A pharmacy permit holder shall maintain records of all drug inventory acquisitions.

B. The records maintained shall include:

(1) The name and principal address of the source of the drugs;

(2) The identity and quantity of the drugs received; and

(3) The date the drugs were received.

C. The acquisition records shall be kept for a period of 2 years from the date the inventory was received.

COMAR 10.34.32.03. Requirements to Administer Vaccinations.

D. A pharmacist shall:

(1) Have proof of active certification in basic cardiopulmonary resuscitation readily available.

COMAR 10.19.03.07. Prescriptions.

. . . .

C. Purpose of Issue of Prescription (21 CFR §1306.04)

(1) A prescription for a controlled dangerous substance to be effective must be issued for a legitimate medical purpose by an individual practitioner acting in the usual course of the individual practitioner's professional practice. The responsibility for the proper prescribing and dispensing of controlled dangerous substances is upon the prescribing practitioner, but a corresponding responsibility rests with the pharmacist who fills the prescription. An order purporting to be a prescription issued not in the usual course of professional treatment or in legitimate and authorized research is not a prescription within the meaning and intent of the Maryland Controlled Dangerous Substances Act Criminal Law Article, §§5-501-5-505, Annotated Code of Maryland, and the person knowingly filling such a purported prescription, as well as the person issuing it, shall be subject to the penalties provided for violations of the provisions of law relating to controlled dangerous substances.

D. Manner of Issuance of Prescriptions (21 CFR §1306.05).

(1) All prescriptions for controlled dangerous substances shall be dated as of, and signed on, the day when issued and shall bear the full name and address of the patient, the drug name, strength, dosage form, quantity prescribed, directions for use, and the name, address, and registration number of the practitioner. A practitioner may sign a

prescription in the same manner as the practitioner would sign a check or legal document (for example, J.H. Smith or John H. Smith). When an oral order is not permitted, prescriptions shall be written with ink, indelible pencil, typewriter, or computer and shall be manually signed by the practitioner. The prescriptions may be prepared by a secretary or agent for the signature of a practitioner, but the prescribing practitioner is responsible in case the prescription does not conform in all essential respects to the law and regulations. A corresponding liability rests upon the pharmacist who fills a prescription not prepared in the form prescribed by these regulations.

COMAR 10.19.03.08. Controlled Substances Listed in Schedule II.

A. Requirement of Prescription-Schedule II (21 CFR §1306.11).

(1) A pharmacist may dispense directly a controlled dangerous substance listed in Schedule II, which is a prescription drug as determined under the Federal Food, Drug, and Cosmetic Act, only pursuant to a written prescription signed by the prescribing individual practitioner, except as provided in §A(4) of this regulation. Except as noted in §A(5)-(7) of this regulation, a prescription for a Schedule II controlled substance may be transmitted by the practitioner or the practitioner's agent to a pharmacy by facsimile equipment, if the original written, signed prescription is presented to the pharmacist for review before the actual dispensing of a controlled substance.

COMAR 10.19.03.12 Physical Security Controls for Registrants.

. . .

B. Security Controls for Registrants.

. . .

(4) The registrant shall notify the regional office of the Drug Enforcement Administration, and the Maryland Department of Health, Division of Drug Control, of the theft or significant loss of any controlled drug substances upon discovery of a loss or theft. The registrant shall also complete DEA form 106 regarding a loss or theft.

On April 9, 2025, a Case Resolution Conference ("CRC") was held before a panel of the Board. As a resolution of this matter, the Respondent-Pharmacy agreed to enter this public Consent Order consisting of Findings of Fact, Conclusions of Law, and Order.

FINDINGS OF FACT

The Board finds:

1. At all times relevant hereto, the Respondent-Pharmacy had a permit to operate as a pharmacy in the State of Maryland. The Respondent-Pharmacy was originally issued a permit on October 6, 2011. The Respondent-Pharmacy's permit expires on May 31, 2026.

2. At all times relevant hereto, the Respondent-Pharmacy was owned and managed by a pharmacist (the "Pharmacist").[1]

3. At all times relevant hereto, the Pharmacist was licensed to practice pharmacy in the State of Maryland. The Pharmacist was originally licensed to practice pharmacy in the State of Maryland on or about October 30, 1991. The Pharmacist's license expires on July 31, 2026.

4. On or about April 14, 2022, the Board conducted an inspection of the Respondent-Pharmacy. The inspection revealed that a prescription for "Taneytuss" was phoned-in and dispensed to a pharmacy technician working for the Respondent-Pharmacy as self-pay. The price for this prescription was $10.00. Additional details concerning the

[1] For confidentiality and privacy purposes, the names of individuals and facilities involved in this case are not disclosed in this document. Upon written request, the Administrative Prosecutor will provide the information to the Respondent-Pharmacy.

"Taneytuss" medication will be discussed *infra*. The inspection also revealed a discrepancy for Oxycodone 15mg tablets with seven (7) in on-hand inventory versus sixty-two (62) in perpetual inventory. The Pharmacist provided a handwritten explanation; however, portions were illegible, and the explanation overall was inconclusive.

5. At the April 14, 2022, inspection, the Board further learned that the Pharmacist owns a business that sells hemp and/or cannabidiol ("CBD") products. Inspectors found evidence of hemp and/or CBD products being compounded in the pharmacy compounding area. In the basement of the pharmacy, inspectors further found storage of hemp and/or CBD ingredients, evidence of product preparation, and hemp and/or CBD debris on the floor of the basement. Inspectors identified a very strong odor of these products throughout the entire pharmacy.

6. On or about August 31, 2022, the Maryland Office of Controlled Substances Administration ("OCSA") conducted an inspection of the Respondent-Pharmacy. The Pharmacist and a staff pharmacist were present during the inspection (collectively, the "Pharmacists"). OCSA found that the Respondent-Pharmacy was not consistently writing the date on invoices for Schedule III-V drugs it received. OCSA also reviewed Schedule II controlled dangerous substances ("CDS") prescriptions for the months of September 2021 (90 prescriptions), December 2021 (80 prescriptions), April 2022 (84 prescriptions), and August 2022 (96 prescriptions). The review identified that 63% of the prescriptions contained at least one red flag with: 69% of red flag prescriptions involving high strength/high quantity; 37% of red flag prescriptions involving a long distance in-state

prescriber; and 30% of the red flag prescriptions paid for using cash. OCSA noted six of the prescribers as routinely prescribing red flag prescriptions.

7. At the inspection on August 31, 2022, OCSA identified prescriptions for "Taneytuss," which the Respondent-Pharmacy dispensed as an oral liquid compound of hydrocodone[2]/phenylephrine/chlorpheniramine 2.5/5/2mg per 5ml dispensed in quantities of 480ml or 960ml. These prescriptions were all dispensed as self-pay prescriptions. There is no commercially available product with the name "Taneytuss" and the prescription forms did not provide the formula. According to the Pharmacists, they compounded this prescription from powders for the three drug components based on a formerly available commercial prescription for Histussin HC or Histinex HC. The Pharmacists stated that the prescriber ("Prescriber-1") for these prescriptions directed patients to the Respondent-Pharmacy because the Respondent-Pharmacy knows what "Taneytuss" means and how to compound it. OCSA explained to the Pharmacists that these prescriptions were not legal to fill in this manner.

8. After the inspection on August 31, 2022, OCSA obtained a dispensing report for the period from August 31, 2021, through August 31, 2022. The dispensing report revealed that of the 477 prescriptions written by Prescriber-1, 183 prescriptions (38%) were for the "Taneytuss" compound. The dispensing report also revealed that individuals with the same last name and who resided at the same address as Prescriber-1 received 480 ml of

[2] Hydrocodone, a Schedule II CDS, is used to relieve severe and persistent pain in people who are expected to need an opioid pain medication around the clock for a long time and who cannot be treated with other pain medications

the "Taneytuss" compound as self-pay prescriptions: four patients on October 21, 2021; three patients on December 27, 2021; and two patients on June 29, 2022. At the time, the Respondent-Pharmacy's usual price for the "Taneytuss" compound was $64.99, but each of these patients paid $50.00 for the compound.

9. On or about October 24, 2023, the Board issued a subpoena duces tecum to the Respondent-Pharmacy, requesting (i) "a complete copy of any and all hard copy prescriptions for all CII prescription products (both sterile and non-sterile) dispensed/distributed/sold" for the period from September 1, 2021, through August 31, 2022; and (ii) "a complete copy of any and all hard copy prescriptions for all CIII through CV prescription products (both sterile and non-sterile) dispensed/distributed/sold" for the period from August 1, 2021, through August 31, 2022. The Respondent-Pharmacy provided responsive documents. The Board also obtained a copy of the dispensing records for the Respondent-Pharmacy for the period from August 2, 2021, through August 26, 2022, inclusive.

10. On or about November 20, 2023, OCSA performed an inspection of the Respondent-Pharmacy. The Pharmacist was present during the inspection. OCSA learned that the Respondent-Pharmacy had an employee theft, or attempted theft, of CDS medications in June 2023 but had not yet submitted the Drug Enforcement Administration ("DEA") Form 106 to report the theft to the DEA or OCSA. OCSA found that the Respondent-Pharmacy was not writing the date on invoices for Schedule III-V drugs it received consistently, similar to OCSA's previous inspection. OCSA found discrepancies between the on-hand inventory and the perpetual inventory for

hydrocodone/acetaminophen 7.5/325 mg; hydrocodone/acetaminophen 10/325 mg; and oxycodone 15 mg immediate release.

11. OCSA discussed with the Pharmacist red flags involving the Respondent-Pharmacy's dispensing, on multiple occasions, of "Taneytuss" to family members of Presriber-1. OCSA also educated the Pharmacist on the red flag of dispensing CDS medications to patients without using their insurance. OCSA advised the Pharmacist that it is not legal to dispense self-pay medications for patients and prescriptions covered by Maryland Medicaid. The Pharmacist acknowledged the corresponding responsibility of pharmacists to ensure all CDS are dispensed for a legitimate medical purpose. OCSA instructed the Respondent-Pharmacist to cease delivery of prescriptions to states where the Respondent-Pharmacy did not have a permit to operate.

12. Following the inspection, the Respondent-Pharmacy submitted a DEA Form 106 identifying the CDS the employee stole, or attempted to steal, in June 2023 as: 2 tablets of 15 mg morphine sulfate;[3] 5 tablets of 10 mg methylphenidate HCL;[4] 1 tablet of 2 mg alprazolam; and 7 tablets of 1 mg alprazolam.[5]

13. On or about November 30, 2023, the Board conducted an inspection of the Respondent-Pharmacy. The inspection revealed two (2) expired medications and ten (10) active pharmaceutical ingredients that were expired or had no expiration date. Some of

[3] Morphine sulfate, a Schedule II CDS, is used to relieve severe, acute pain (pain that begins suddenly, has a specific cause, and is expected to go away when the cause of the pain is healed) and chronic pain in people who are expected to need an opioid pain medication and who cannot be treated with other pain medications.

[4] Methylphenidate, a Schedule II CDS, is used as part of a treatment program to control symptoms of attention deficit hyperactivity disorder.

[5] Alprazolam, a Schedule IV CDS, is used to treat anxiety disorders and panic disorder

these active pharmaceutical ingredients had manufacture or package dates indicating that they were at least twenty (20) years old. The Board observed that the Pharmacist's dog was present in the pharmacy with a dog bed and water bowl. The Respondent-Pharmacy had an area to perform vaccinations; however, the Pharmacist's cardiopulmonary resuscitation certification expired in or around February 2023. The Board obtained records showing that the Respondent-Pharmacy performed vaccinations after the certification expired. The Board observed a trash bin next to the pharmacy registers with individually identifiable health information. The Board reviewed the Respondent-Pharmacy's on-hand inventory versus perpetual inventory and found that the Respondent-Pharmacy's perpetual inventory had not been updated. The Respondent-Pharmacy had the following mediations and their corresponding on-hand versus perpetual inventory: Morphine Sulfate ER 60mg tablets with 7 on-hand inventory versus (-73) perpetual inventory; Oxycodone[6] 10mg tablets with 12 on-hand inventory versus (-1,926) perpetual inventory; and Vyvanse[7] 70mg capsules with 62 on-hand inventory versus (-108) perpetual inventory.

CONCLUSIONS OF LAW

Based on the foregoing Findings of Fact, the Board concludes as a matter of law the following:

14. By dispensing prescriptions for "Taneytuss" to patients generally, the Respondent-Pharmacy violated Health Occ. § 12-403(c)(1) in that the Respondent-

[6] Oxycodone, a Schedule II CDS, is used to relieve severe, acute pain in people who are expected to need an opioid pain medication and who cannot be treated with other pain medications.
[7] Vyvanse, a brand name for Lisdexamfetamine and Schedule II CDS, is used as part of a treatment program to control symptoms of attention deficit hyperactivity disorder.

Pharmacy violated COMAR 10.34.10.01A(1)-(2) and B(1)-(3), COMAR 10.34.20.02, COMAR 10.34.20.04, and COMAR 10.19.03.07C(1) and D(1). The Respondent-Pharmacy further violated Health Occ. § 12-403(c)(9) in that the Respondent-Pharmacy violated Health Occ. § 12-313(b)(21) and (25).

15. By dispensing a prescription for "Taneytuss" to a pharmacy technician working at the Respondent-Pharmacy for below the usual price, the Respondent-Pharmacy violated Health Occ. § 12-403(c)(7) and (1) in that the Respondent-Pharmacy violated COMAR 10.34.10.01A(1)-(2) and B(1)-(3), COMAR 10.34.20.02, COMAR 10.34.20.04, COMAR 10.19.03.07C(1) and D(1), and COMAR 10.19.03.08A(1). The Respondent-Pharmacy further violated Health Occ. § 12-403(c)(9) in that the Respondent-Pharmacy violated Health Occ. § 12-313(b)(2), (21), and (25).

16. By dispensing prescriptions for "Taneytuss" to patients with the same last name and who resided at the same address as Prescriber-1 for below the usual price, the Respondent-Pharmacy violated Health Occ. § 12-403(c)(7) and (1) in that the Respondent-Pharmacy violated COMAR 10.34.10.01A(1)-(2) and B(1)-(3), COMAR 10.34.20.02, COMAR 10.34.20.04, and COMAR 10.19.03.07C(1) and D(1). The Respondent-Pharmacy further violated Health Occ. § 12-403(c)(9) in that the Respondent-Pharmacy violated Health Occ. § 12-313(b)(2), (21), and (25).

17. By dispensing prescriptions for "Taneytuss" to patients with knowledge that Prescriber-1 directed patients to the Respondent-Pharmacy as the only pharmacy with knowledge of the composition of "Taneytuss," the Respondent-Pharmacy violated Health Occ. § 12-403(c)(7), (c)(8) and (1) in that the Respondent-Pharmacy violated COMAR

10.34.10.01A(1) and B(1)-(3), COMAR 10.34.20.02, COMAR 10.34.20.04, and COMAR 10.19.03.07C(1) and D(1). The Respondent-Pharmacy further violated Health Occ. § 12-403(c)(9) in that the Respondent-Pharmacy violated Health Occ. § 12-313(b)(2), (21), and (25).

18. By failing to complete the DEA Form 106 or otherwise properly notify the DEA or OCSA of the employee theft, or attempted theft, of CDS medications in June 2023, the Respondent-Pharmacy violated Health Occ. § 12-403(c)(1) in that the Respondent-Pharmacy violated COMAR 10.34.10.01A(1) and B(1)-(3), and COMAR 10.19.03.12B(4). The Respondent-Pharmacy further violated Health Occ. § 12-403(c)(9) in that the Respondent-Pharmacy violated Health Occ. § 12-313(b)(21) and (25).

19. By failing to maintain readily and accurately retrievable records; including but not limited to, failing to consistently and properly date drug invoices, failing to maintain an accurate perpetual inventory, and failing to properly reconcile inventory discrepancies; the Respondent-Pharmacy violated Health Occ. § 12-403(c)(13)(i)-(iii) and (1) in that the Respondent-Pharmacy violated COMAR 10.34.10.01A(1) and B(1) and (3), COMAR 10.34.20.03, COMAR 10.34.20.04, and COMAR 10.34.24.03. The Respondent-Pharmacy further violated Health Occ. § 12-403(c)(9) in that the Respondent-Pharmacy violated Health Occ. § 12-313(b)(21) and (25).

20. By failing to keep the pharmacy in a clean and orderly manner, the Respondent-Pharmacy violated Health Occ. § 12-403(c)(11)(ii)(1) and (1) in that the Respondent-Pharmacy violated COMAR 10.34.10.01A(1) and (3) and B(1) and (3), and

COMAR 10.34.20.04. The Respondent-Pharmacy further violated Health Occ. § 12-403(c)(9) in that the Respondent-Pharmacy violated Health Occ. § 12-313(b)(21) and (25).

21. By dispensing red flag prescriptions to patients, the Respondent-Pharmacy violated Health Occ. § 12-403(c)(1) in that the Respondent-Pharmacy violated COMAR 10.34.10.01A(1)-(2) and B(1)-(3), COMAR 10.34.20.02, COMAR 10.34.20.04, and COMAR 10.19.03.07C(1) and D(1). The Respondent-Pharmacy further violated Health Occ. § 12-403(c)(9) in that the Respondent-Pharmacy violated Health Occ. § 12-313(b)(21) and (25).

22. By failing to properly dispose of medications and/or active pharmaceutical ingredients, Respondent-Pharmacy violated Health Occ. § 12-403(c)(12) and (1) in that the Respondent-Pharmacy violated COMAR 10.34.10.01A(1) and (3) and B(1)-(3), and COMAR 10.34.20.04. The Respondent-Pharmacy further violated Health Occ. § 12-403(c)(9) in that the Respondent-Pharmacy violated Health Occ. § 12-313(b)(21) and (25).

23. By administering vaccinations without an active certification in basic cardiopulmonary resuscitation, the Respondent-Pharmacy violated Health Occ. § 12-403(c)(1) in that the Respondent-Pharmacy violated COMAR 10.34.10.01A(1) and B(1) and (3), and COMAR 10.34.32.03D(1). The Respondent-Pharmacy further violated Health Occ. § 12-403(c)(9) in that the Respondent-Pharmacy violated Health Occ. § 12-313(b)(21) and (25).

24. By participating in activities, as outlined in the Allegations of Fact above, Respondent-Pharmacy violated Health Occ. § 12-403(c)(7), (8), (9), (11)(ii)(1), (12), (13)(i)-(iii), and (1) in that the Respondent-Pharmacy violated COMAR 10.34.10.01A(1)-

(3) and B(1)-(3), COMAR 10.34.20.02, COMAR 10.34.20.03, COMAR 10.34.20.04, COMAR 10.34.24.03, COMAR 10.34.32.03, COMAR 10.34.32.03D(1), COMAR 10.19.03.07C(1) and D(1), COMAR 10.19.03.08A(1), and COMAR 10.19.03.12B(4). The Respondent-Pharmacy further violated Health Occ. § 12-403(c)(9) in that the Respondent-Pharmacy violated Health Occ. § 12-313(b)(2), (21), and (25).

ORDER

Based on the foregoing Findings of Fact and Conclusions of Law, on the affirmative vote of a majority of the Board, it is hereby:

ORDERED that the Respondent-Pharmacy's permit to operate as a pharmacy in the State of Maryland is hereby **REPRIMANDED**; and it is further

ORDERED that the Respondent-Pharmacy's permit shall be placed on **PROBATION** for a period of at least **TWO (2) YEARS**, subject to the following terms and conditions:

1. During the probationary period, the Board, at its discretion, may conduct random inspections of the Respondent-Pharmacy;

2. During the probationary period, the Board, shall obtain quarterly reports from the Prescription Drug Monitoring Program (PDMP) for the Respondent-Pharmacy;

3. The Respondent-Pharmacy shall provide training to all pharmacy staff members on red flags and drugs of abuse. Such training shall occur within ninety (90) days of the effective date of the Consent Order and yearly thereafter for the duration of the probationary period. The Respondent-Pharmacy shall provide written documentation indicating the successful completion of these trainings;

4. The Respondent-Pharmacy shall maintain policies regarding Controlled Dangerous Substances ("CDS") which should include, among other things, inquires of the prescription drug monitoring program (PDMP);

5. Within ninety (90) days of the effective date of this Consent Order, the Respondent-Pharmacy shall: (i) permanently and securely separate any area where hemp and/or CBD products are manufactured and/or prepared from the pharmacy; or (ii) cease the manufacture and/or preparation of hemp and/or CBD on the pharmacy's premises. The Respondent-Pharmacy shall provide the Board with an updated schematic of the Respondent-Pharmacy showing compliance.

6. After **TWO (2) YEARS** from the date of this Consent Order, the Respondent-Pharmacy may submit a written petition to the Board requesting termination of probation, provided that it has been fully compliant with this Consent Order and has no outstanding complaints filed against it; and it is further

ORDERED that the Respondent-Pharmacy shall pay a monetary fine in the amount of **$1,000**, payable within two (2) years of the effective date of the Consent Order, payable by certified check or money order to The Maryland State Board of Pharmacy and sent to:

Wells Fargo Bank
Attn: State of MD - Board of Pharmacy
Lockbox 2051
401 Market Street
Philadelphia, PA 19106

Please reference Case Number 23-166 – Carroll Drugs of Manchester on your check or money order to ensure proper assignment to your case; and it is further

ORDERED that the Respondent-Pharmacy shall operate in accordance with the laws and regulations governing the practice of pharmacy in Maryland; and it is further

ORDERED that the Respondent-Pharmacy shall bear the cost(s) of complying with the Consent Order; and it is further

ORDERED that the Respondent-Pharmacy shall at all times cooperate with the Board in the monitoring, supervision, and investigation of its compliance with the terms and conditions of this Order; and it is further

ORDERED that the failure to comply with the terms and conditions of the Consent Order, including failure to pay the monetary fine in full by the deadline, constitutes a violation of the Consent Order and the Board, in its discretion, after notice and an opportunity for a show cause hearing before the Board, may impose any appropriate sanction under the Act; and it is further

ORDERED that the Consent Order shall be a public document pursuant to Md. Code Ann., Gen. Prov. § 4-101 *et seq.* (2019 Repl. Vol. & 2024 Supp.).

6-9-25
Date

Kristopher Rusinko
President, Maryland Board of Pharmacy

CONSENT

I, Thomas McLean Bolton, owner of Carroll Drugs of Manchester, acknowledge that I have had the opportunity to consult with legal counsel before signing this document. By this Consent, I accept, on behalf of Carroll Drugs of Manchester to be bound by this Consent Order and its conditions and restrictions. On its behalf, I waive any rights Carroll Drugs of Manchester may have had to contest the Findings of Fact and Conclusions of Law.

I acknowledge the validity of this Consent Order as if entered into after the conclusion of a formal evidentiary hearing in which Carroll Drugs of Manchester would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on its behalf and to all other substantive and procedural protections as provided by law.

I acknowledge the legal authority and the jurisdiction of the Board to initiate these proceedings and to issue and enforce this Consent Order. I also affirm that I am waiving Carroll Drugs of Manchester's right to appeal any adverse ruling of the Board that might have followed any such hearing.

I sign this Consent Order without reservation, and I fully understand and comprehend the language, meaning and terms of this Consent Order. I voluntarily sign this Order on behalf of Carroll Drugs of Manchester and understand its meaning and effect.

5/30/25
Date

Thomas McLean Bolton
Owner
Carroll Drugs of Manchester

NOTARY

STATE OF MARYLAND

CITY/COUNTY OF CARROLL COUNTY

I hereby certify that on this 30th day of MAY, 2025, before me, a Notary Public of the State of Maryland and City/County aforesaid, personally appeared THOMAS MCLEAN BOLTON and made an oath in due form that the foregoing Consent Order was his voluntary act and deed.

AS WITNESS, my hand and Notary Seal.

BARBARA LECHNER
Notary Public
Carroll County
Maryland
My Commission Expires Oct. 23, 2027

Barbara Lechner
Notary Public

My commission Expires: 10/23/2027