IN THE MATTER OF \* BEFORE THE MARYLAND

CANDICE EXUM \* STATE BOARD OF

Registration No. T12854 \* Case No.: 24-014

PHARMACY TECHNICIAN

PHARMACY

# **FINAL DECISION AND ORDER**

## **Procedural Background**

On or about July 17, 2023, the Maryland Board of Pharmacy (the "Board") received a complaint from a hospital in Prince George's County (the "Hospital") that it was investigating pharmacy technician Candice Exum, Registration No. T12854 (the "Respondent"), for theft of medication; on or about August 11, 2023, the Hospital notified the Board that the Respondent's employment had been terminated. On October 24, 2023, following an investigation, the Board issued an Order of Summary Suspension, summarily suspending the Respondent's registration to practice as a pharmacy technician. The Respondent never requested a hearing on the Order of Summary Suspension. On October 16, 2024, the Board issued a Notice of Intent to Revoke Pharmacy Technician Registration to the Respondent under the Maryland Pharmacy Act (the "Act"), Md. Code Ann., Health Occ. § 12-101 et seq.

On or about November 16, 2024, the Board received a request for an evidentiary hearing from the Respondent. The Board scheduled the evidentiary hearing and sent the Respondent notice of the hearing via certified mail on November 26, 2024. At the Respondent's request, the hearing was rescheduled twice; the Board sent the Respondent notices that the hearing had been rescheduled on February 19, 2025, and April 1, 2025. On June 18, 2025, the Board held an evidentiary hearing before a quorum of the Board in accordance with the Maryland Administrative

Procedure Act, Md. Code Ann., State Gov't § 10-201 et seq., and the Board's regulations, COMAR 10.34.01. Following the hearing, the same quorum of the Board convened to deliberate and voted unanimously to revoke the Respondent's registration for the reasons set forth in this Final Decision and Order.

### **SUMMARY OF THE EVIDENCE**

#### A. Documents

The following documents were admitted into evidence.

State's Exhibit No. 1 - Report of Investigation, 8/31/2023

State's Exhibit No. 2 - Registration Information

State's Exhibit No. 3 - Board Hearing Notice, 11/26/2024

State's Exhibit No. 4 - Hospital's Complaint to Board, 7/17/2023

State's Exhibit No. 5 - Hospital's Letter to Board, 8/11/2023

State's Exhibit No. 6 - DEA Form 106

State's Exhibit No. 7 - Respondent's Signed Statement, 7/14/2023

State's Exhibit No. 8 - Hospital Audit Ledger

State's Exhibit No. 9 - Order for Summary Suspension, 10/24/2023

State's Exhibit No. 10 - Notice of Intent to Revoke, 10/16/2024

State's Exhibit No. 11 - Board Notice Rescheduling Hearing, 4/1/2025

Respondent's Exhibit No. 1 - Letters of Support

Respondent's Exhibit No. 2 - Consent for Service and Release of Information

#### B. Witnesses

State: Thomas Fernandez, Compliance Investigator, Board of Pharmacy

Oluchi Nwanajuobi-Agumane, Director of Pharmacy, Hospital

Respondent: Candice Exum, Respondent

### **FINDINGS OF FACT**

Based upon the documentary and testimonial evidence admitted at the evidentiary hearing, the Board finds the following:

- 1. The Respondent was originally registered to practice as a pharmacy technician in Maryland on June 14, 2013, under registration number T12854; her registration was summarily suspended by the Board on October 24, 2023, and it expired on October 31, 2024. (State's Ex. 2; Tr. at 21-22)
- 2. At all relevant times, the Respondent worked as a pharmacy technician at the Hospital. In 2023, the Respond was the "pharmacy lead tech[nician]," a pharmacy technician who oversees the other pharmacy technicians. (State's Ex. 4; Tr. at 29-30)
- 3. On or about July 17, 2023, the Board received a complaint from the Hospital stating that it was investigating the diversion of Oxycodone by the Respondent. In the letter, the Hospital estimated the loss to be 120 tablets and said they were completing a sixmonth audit and would follow up with a final report. (State's Ex. 4; Tr. at 15-17)
- 4. On or about August 11, 2023, the Board received a follow-up letter from the Hospital notifying the Board that the Respondent had been fired after admitting to taking 60 tablets of Oxycodone and selling it to a relative. (State's Ex. 5; Tr. at 17-18)
- 5. The Hospital's investigation revealed that the Respondent switched Oxycodone 5 mg tablets with Fludrocortisone 0.1 mg tablets during the prepackaging

process performed to refill an automated medication dispensing system.<sup>1</sup> Because the two tablets look similar (both in size and in color), the swap was not immediately detected by the Hospital. The Respondent also refilled the machine with a count of zero so it did not show up on the daily Schedule II comparison report. A nurse noticed the discrepancy on July 13, 2023. (State's Ex. 5; Tr. at 17-18, 30-31, 36-39)

- 6. During the Hospital's investigation, the pharmacy manager reviewed a report of transactions in the automated medication dispensing system and noticed that the Respondent entered an unusually large number of zero-count refills. Because of this, the pharmacy manager reviewed security footage that revealed the respondent grabbing Fludrocortisone while pre-packaging Oxycodone. Upon being confronted by the pharmacy manager, the Respondent admitted to taking the Oxycodone, claimed to be selling it to a family member, and refused a urine test. The Respondent was subsequently terminated. (Tr. at 35-39)
- 7. The Hospital also provided a copy of DEA form 106 "Report of Theft or Loss of Controlled Substances" that reported a theft of 120 tablets of Oxycodone. (State's Ex. 6; Tr. at 18)
- 8. The Hospital also provided a copy of a July 14, 2023 signed letter from the Respondent, in which she stated "Please accept my sincere apologies. There was misconduct on my part and I am resigning effectively immediately." (State's Ex. 7; Tr. at 18-19)

<sup>&</sup>lt;sup>1</sup> Oxycodone is a Schedule II opioid used to treat moderate to severe pain; Fludrocortisone is a corticosteroid used to treat various adrenal conditions.

9. At the evidentiary hearing, the Respondent admitted to switching the drugs and stated that she personally ingested the Oxycodone. The Respondent said she lied about selling the drugs to a relative because she was embarrassed and refused the urine test because she knew it would be positive. She also stated that she used Oxycodone for about three months and was no longer using it. The Respondent also expressed remorse, particularly about creating a risk of harm to patients. (Tr. at 55-58)

#### **OPINION**

Pharmacy technicians play an integral role in the dispensing process, providing support to pharmacists and trusted care to patients. Pharmacy technicians are expected to act with honesty and integrity, which includes a duty to obey the law and maintain the highest level of moral and ethical conduct. By the very nature of their employment behind the pharmacy counter, pharmacy technicians have immediate access to prescription drugs, and they must be trusted to handle those drugs appropriately at all times.

Diverting drugs from a pharmacy, whether for one's own personal use, for a friend or family member's personal use, or for sale, violates the ethical principles and obligations of the profession. The Respondent was expected to exercise good judgment and adhere to pharmacy laws and regulations. The Respondent failed to do so by stealing medication from the Hospital. The Respondent acted dishonestly, betrayed her employer's trust, and failed to exercise good judgment. The Board believes that showing an extreme lack of judgment and moral character by stealing medication is, in and of itself, more than enough justification to revoke the Respondent's registration in this case.

The Board has two particularly significant concerns in this case. First, the Respondent was the lead pharmacy technician at the Hospital, in a supervisory position over the other pharmacy technicians. As the lead pharmacy technician, the Respondent should have led by example, showing the other technicians how to ethically and safely practice; additionally, as lead pharmacy technician, the Respondent clearly knew what she was doing and used her position to really plan out her theft scheme. Second, replacing a narcotic pain killer with a corticosteroid could lead to severe adverse outcomes. The patients who received the drugs the Respondent swapped would not be getting much-needed pain relief and would be subject to unexpected side effects and drug interactions from the Fludrocortisone. The Board believes creating a risk of such severe patient harm is patently unacceptable.

The Board's sanctioning guidelines provided for revocation as a potential sanction in cases where a pharmacy technician diverts drugs. COMAR 10.34.11.05. Reviewing the aggravating and mitigating factors for determining a sanction in COMAR 10.34.11.08, the Board finds two mitigating factors: that the Respondent admitted her unethical conduct once she was caught, and the Respondent's lack of prior disciplinary history. The Board also, however, finds three aggravating factors: that the Respondent acted deliberately, that there was the potential for significant patient harm, and that there was a pattern of misconduct. On balance, and given everything stated in this Order, the Board believes revocation is the appropriate sanction in this case.

#### **CONCLUSIONS OF LAW**

Based upon the foregoing summary of evidence, findings of fact, and opinion, the Board concludes that the Respondent is subject to discipline pursuant to the Act, Md. Code Ann., Health Occ. §§ 12-6B-09(3), (25), and (27) and 12-313(25), and COMAR 10.34.10.01A(1), 10.34.10.01B, and 10.34.20.04.

#### **ORDER**

Based on the foregoing Findings of Fact, Opinion, and Conclusions of Law, by a unanimous decision of a quorum of the Board, it is hereby:

**ORDERED** that the Respondent's registration with the Board to practice as a pharmacy technician in Maryland, Registration No. T12854, shall be and is **REVOKED**; and be if further,

ORDERED that this is a final order of the Maryland Board of Pharmacy and as such is a PUBLIC DOCUMENT pursuant to Md. Code Ann., Gen. Provisions § 4-333(b).

11-19-2025

Kristopher Rusinko, Pharm. D.

President

Maryland Board of Pharmacy

# NOTICE OF RIGHT TO APPEAL

Pursuant to Md. Code Ann., Health Occ. § 12-316, the Respondent has the right to seek judicial review of this Order. Any petition for judicial review shall be filed within thirty days from the date of mailing of this Order. The cover letter accompanying this Order indicates the date the decision is mailed. Any petition for judicial review shall be made as provided for in the Administrative Procedure Act, Md. Code Ann., State Gov't § 10-21 et seq., and Title 7, Chapter 200 of the Maryland Rules of Procedure.

If the Respondent files a petition for judicial review, the Board is a party and should be served with the court's process at the following address:

Maryland State Board of Pharmacy Deena Speights-Napata, MA, Executive Director 4201 Patterson Avenue, 5<sup>th</sup> Floor Baltimore, Maryland 21215 Notice of any petition should also be sent to the Board's counsel at the following address:

Brett E. Felter Assistant Attorney General Maryland Department of Health 300 West Preston Street, Suite 302 Baltimore, Maryland 21201