



STATE OF MARYLAND
DHMH

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

MARYLAND BOARD OF PHARMACY
4201 Patterson Avenue • Baltimore, Maryland 21215-2299
Michael N. Souranis, Board President - LaVerne G. Naesea, Executive Director

VIA REGULAR & CERTIFIED MAIL, RETURN RECEIPT REQUESTED
ARTICLE #7011 3500 0000 7160 1527

December 19, 2012

River Rx, Inc.
5257 River Road
Bethesda, Maryland 20816
Attn: Narendra S. Dhallan, PD

Re: Permit No. P04709
Finding of Deficiencies and Imposition of Civil Monetary Penalty
By Consent

Dear Mr. Dhallan:

On April 5, 2012, an annual inspection was conducted by the Board of Pharmacy (the "Board") to determine if River Rx, Inc. (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 compliance with regulatory requirements regarding, among other things, pharmacy technician registration. The Pharmacy employed three (3) pharmacy technicians who were not registered or in a Board-approved technician training program. The Pharmacy subsequently provided information to the Board indicating remedial actions taken to address registration of technicians. In addition, the Pharmacy provided information indicating that the citation regarding expired medications in the Pharmacy was erroneous.

I. FINDINGS AND CONCLUSION

The Board adopts the findings of deficiencies as set forth in the Pharmacy Inspection Report dated April 5, 2012 and attached as Exhibit A, with the exception of the citations regarding expired medications.

Based upon deficiencies cited at your Pharmacy, the Board finds that the Pharmacy was 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.

II. 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, and the subsequent mitigating factor presented by the Pharmacy, the Board hereby imposes 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 April 5, 2012.

In determining whether to impose a civil monetary penalty, the Board took into consideration the following factors:

1. The extent to which the permit holder derived any financial benefit from the unprofessional or improper conduct;
2. The willfulness of the unprofessional or improper conduct;
3. The extent of actual or potential public harm caused by the unprofessional or improper conduct;
4. The permit holder's history or previous violations;
5. The existence of mitigating factors.

The civil monetary penalty is **due within thirty (30) days** of the date of this letter, in the form of a check made payable to the Maryland Board of Pharmacy.

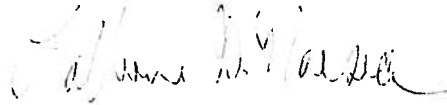
III. FOLLOW-UP INSPECTION

Please be advised that the Board, or its agents, may perform a follow-up inspection of the Pharmacy to insure that it continues to comply with Maryland laws and regulations. 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.

Upon the Pharmacy's payment of the civil monetary penalty, this Finding will constitute the Board's final action with respect to the Inspection Report dated April 5, 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, Compliance Investigator, at 410-764-2493.

Sincerely,



LaVerne G. Naesea
Executive Director

Attachment

cc: Linda Bethman, Assistant Attorney General
Board Counsel
Vanessa Thomas-Gray, Compliance Investigator



STATE OF MARYLAND

DHMH

Department of Health and Mental Hygiene

Martin O'Malley, Governor Anthony G. Brown, Lt. Governor - John M. Colmers, Secretary

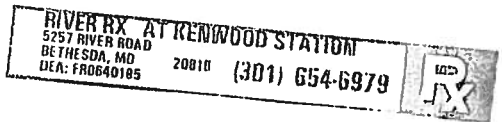
MARYLAND BOARD OF PHARMACY
4201 Patterson Avenue? Baltimore, Maryland 21215-2299
Michael Souranis, Board President - La'eme G. Nausea, Executive Director

Exhibit

A

COMMUNITY PHARMACY INSPECTION REPORT

Permit: P04709
Inspection Result
Type of Inspection Annual
Pharmacy Name RIVER RX INC
Corporate Name
Telephone 3016546979
Permit Exp. Date 2013
Arrival time 12:20pm



Inspection Date 4/5/2012
Previous Insp. Date: 3/18/20
Inspector Jeannell IV
Address 5257 RIVER RD
City BETHESDA State MD Zip 20816
Fax 3016546977
Departure Time 5pm

1. GENERAL INFORMATION

- 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 9am-7pm Saturday 9am-5pm Sunday 10am-4pm
- All permits, licenses, and registrations are posted conspicuously. HO §12-311, HO §12-408(b) and HO §12-6B-08
- CDS Registration # 465937 CDS Exp. Date 10/31/2013 DEA # FR0640195 DEA Exp. Date
- The pharmacy perform sterile compounding. (If yes, complete Sterile Compounding Inspection Form) COMAR 10.34.19
- The pharmacy provides services to Long Term Care facilities or assisted living facilities. (If yes, complete Long Term Care Inspection Form)
- The pharmacy fills original prescription received via the internet.
- The pharmacy fills original prescriptions via e-prescribing.
- 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. HG §21-220; COMAR 10.19.03.02
verify patient profile thru e script
Comments Please post current DEA Registration immediately.

2. PERSONNEL (COMAR 10.34.03.05)

Name of Pharmacist/Manager who is charged with ensuring compliance with all applicable laws Narender S. Dhallan
Pharmacist Employees

License Number	Last Name	First Name	Expiration	Status
06647	HEALY	DAVID C	09/2013	A
11398	ARMAR	NAA AMART	06/2012	A
12089	DHALLAN	KAMLESH RA	12/2013	A
19232	RAULLI	ROBERT E	09/2012	A

Unlicensed Personnel:	Name	Title	Duties
	Yuri Jiron	Technician	
	Rilza Martinez	Clerk	Filling Prescriptions,
Comments:	Pharmacist Narendra S. Dhalla #13114 exp 9-12		

3. PERSONNEL TRAINING

- 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
- All Unlicensed personnel who perform tasks in the pharmacy receive documented training for the tasks they perform. COMAR 10.34.21.03B(1)
- All personnel have received training in (check all that apply): 10.34.21.03B (3)-(4)
- Maintaining records Patient confidentiality Sanitation, hygiene, infection Control
- Biohazard precautions Patient safety and medication errors COMAR 10.34.26.03
- Comments: Fraud, Waste, Abuse Training was available for review.

4. SECURITY COMAR 10.34.05

- 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)
- Alarm System
- The pharmacy and/or pharmacy department has a security system. COMAR 10.34.05.02A(2)
- 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: Pharmacy and front end have same hours of operation.

5. PHYSICAL REQUIREMENTS AND EQUIPMENT

- Pharmacy area is clean, neat, and organized. HO §12-403(b)(11)(ii)2.
- The pharmacy provides a compounding service (non-sterile procedures).
 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
- The pharmacy has a Class A prescription balance and weights, or a prescription balance with equivalent or superior sensitivity. COMAR 10.34.07.01A
- The pharmacy has hot and cold running water.
- The medication refrigerator(s) contain only prescription and OTC items. COMAR 10.34.07.01B
- The medication refrigerator(s) have a thermometer and the current temperature is between (36 - 46 F) USP COMAR 10.34.07.01B Temperature:
- The current temperature of the pharmacy department is between 59 to 86 F. COMAR 10.34.05.02A(1)(a) Temperature: 40F; 46F
- If the pharmacy stocks medications requiring freezing, the freezer is maintained at temperatures required by the medications stored within it. Temperature: 68F
- 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)
- The pharmacy has online resources. HO §12-403(b)(15)
- Comments:

6. PRESCRIPTION LABELING FILES AND STORAGE

- 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
- The name and address of the pharmacy; HG §21-221(a) (1) The serial number of the prescription; HG §21-221(a) (2)
- The date the prescription was filled; HO §12-505(b) (1) and HG §21-221(a)(3) The name of the prescriber; HG §21-221(a) (4)
- The name of the patient; HG §21-221(a) (5) (i) The name and strength of the drug or devices; HO §12-505(c)
- The directions for use; HO §12-505(b)(2)(ii) and HG §21-221(a)(5)(iii) The required cautionary statements or auxiliary labels; HG §21-221(a)(5)(iii)
- The name of generic manufacturer; and HO §12-504(d) (2) and §12-505(c) (2) The expiration date is indicated; HO §12-505(b) (2)
- Original prescriptions and data entry technician initials are on prescriptions. COMAR 10.34.03.01
- Original prescriptions are dispensed within 120 days after the issue date. HO §12-503
- Comments: Pharmacist initials are on prescriptions.

QUALITY ASSURANCE - PATIENT SAFETY/MEDICATION ERRORS

- Yes There 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
- No The pharmacy maintains a minimum of 2 continuous years of records clearly demonstrating the content of annual educational training provided 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: Need documented training in preventing medication errors.

8. CONFIDENTIALTY

- No Confidentiality is maintained in the creation, storage, access disposal and disclosure of patient records. HIPAA Regulations. HO§12-403(b)(13), COMAR 10.34.10.03.
- 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 HIG §4-301 through §4-307. COMAR 10.34.10.03B
- Comments: Patient labels should not be placed in with regular trash.

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:

10. CONTROLLED SUBSTANCES

- Power of Attorney
- 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: 03/03/2012
- 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 1304.03
- 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 maintains 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: POA: Narender S. Dhallan #13114 exp 9-12

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 Control of access to the device
- N/A Sufficient safeguards are in place to ensure accurate replenishment of the automated medication system.
- N/A Training of personnel using the system
- N/A Accounting for medication added and removed from the system.
- N/A Operations during system downtime
- If yes, describe safe guards. COMAR 10.34.28.06
- 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 Quality Assurance Reports.
- N/A System failure reports.
- N/A Reports on system access and changes in access
- N/A Accuracy audits.
- N/A Training records.
- A 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 10.34.28.04B
- A 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:

12. 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 and management. If yes, COMAR 10.34.04.06E

Name of Agency:
 State of Incorporation:
 Service contracted:
 MD License#:

Comments:

- 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
- N/A 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 10.34.04.06E
 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 10.34.04.06F

- 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 10.34.04.06G
- 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 if it was sent back to the primary pharmacy.

13. 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: Additional Staff: Kathleen Miller- Training; Cesar Sandoval- Driver, Johnny Zuniga- Clerk/Driver; Erika Adaza- Nurse (vacines). Pharmacy provides service to Casey Hospice. Be sure that all CII-V invoices are signed and dated. Be sure to attach CSOS or DEA 222 form to all CII invoices. Post current DEA Registration in pharmacy immediately and fax a copy to my office by 4/12/12. 3. Training that was available for review was Fraud, Waste, Abuse. 7. Each staff member needs to have annual ongoing documented training in preventing medication errors. Fax training documentation for preventing medication errors to my office by 4/12/12. Please fax all requested documents by 4/12/12 Attn: Jeannelle McKnight CPhT 410-358-9512 (fax). 8. Patient labels should not be in regular trash bins. They should be placed in bins that are only HIPAA related documents. See attached list of expired drugs (4 pages). Computer would not accept information for pharmacist Narender S. Dhallan #13114 exp 9-12. Reviewed inspection report with pharmacist on duty David Healy #06647.

CONTROLLED DANGEROUS SUBSTANCES WORKSHEET

Date of Inspection: 4-5-12
 Pharmacy: River Rx
 Permit #: P04709

Rx# N764320

DRUGS	ON HAND INVENTORY	PERPETUAL INVENTORY
<u>Focalin XR 20mg</u>	<u>244</u>	<u>244</u>
<u>Methadone 5mg</u>	<u>275</u>	<u>272</u>
<u>Vyvanse 60mg</u>	<u>162</u>	<u>160</u>
<u>Endocet 10-32.5mg</u>	<u>232</u>	<u>232</u>

COMMENTS: OK

SCHEDULE II AUDIT

Drug _____
 Date of last Inspection/Biennial _____

Amount at last inspection/biennial _____
 Purchased since inspection/biennial _____
 Total inventory _____ (A)
 Quantity dispensed _____ (B)
 Expected inventory _____ (C) = A + B
 Quantity on Hand _____ (D)
 Discrepancy _____ (E) = C - D
 _____ (F)
 _____ (G) = (F-E) or (E-F)
Excess Shortage

INVOICE REVIEW

CII
OK - Please be sure to attach CSOS or DEA 222 forms to all CII invoices.

CIII - CV
Please be sure to sign and date all invoices

PRESCRIPTION REVIEW

CII # N765021 - # N765311
 DATE 3-30-12 - 4-4-12

COMMENTS: OK

CIII - CV # 765200 - # 765296
 DATE 4-3-12 - 4-4-12

river Rx Staff

- 1) Narendra Dhallan / Pharmacist
- 2) Kamles Dhallan / Pharmacist
- 3) David Healy / Pharmacist
- 4) Erika Apaza / nurse
- 5) Yuni Jhon / Pharmacy Tech
- 6) Ritza Martinez / clerk
- 7) Kathleen Miller / Training
- 8) Cesar Sandoval / Driver
- 9) Johnny Zuniga / clerk / driver

Triver Pak
4-5-12

Expired Drugs

Drug name/ strength	Quantity	Lot#	Expiration	Page 1 of 4 Comment
Sorbitol 70% sol.	1	L001A10A	1-12	
Albuterol 2mg/5ml	1	30209377R	7-11	
Fluoxetine 20mg/5ml	1	0B88	8-11	
Belladonna w/Phenobarbital	1	L092C08A	3-11	
Diclofenac Ophth. Sol. 0.1%	5ml	179497F	12-11	
Cromolyn Ophth. 4%	10ml	143811F	9-10	
Anurolex Otic solution	10ml	6375	7-11	
Melbexal 100mg	2	201019P	4-11	
Potassium Chloride 10mEq	1	90637	11-11	
Sumatriptan 100mg	1	2001394	7-11	
Benazepril 40mg	1	3063243	2-10	
Buspiron 15mg	1	3V0122	2-11	
Buspiron 5mg	1	3V0313	4-11	
Propinrole 0.25mg	1	101188	11-10	
Tussi-12D	1	000005743	7-11	
Vicodin 5mg/500mg	1	8VICR5005F	3-11	
Vicodin 5mg/500mg	1	8VICR5007D	3-11	
Cefprozil 500mg	1	AJ5345	6-11	
Spectracef 200mg	1	SPL7002A	10-10	
Trileptal 600mg	1	F0280	2-12	
Krsodiol 300mg	1	998629	1-12	
Sulfacetamide/ Prednisolone Sodium Ophth. Sol. 10%/0.23%	5ml	417531	10-10	

River Pix
4-5-12

Expired Drugs

Drug name/ strength	Quantity	Lot #	Expiration	Comment
Synthroid 2.5mcg	1	85036A8A	3-11	
Bromocriptine 2.5mg	1	16174101	10-09	
Doryx 100mg	1	03418F	9-10	
Oxaprozin 600mg	1	787149	4-12	Short-Dated
Bupropion 5mg	1		7-11	Unable to read lot #
Codeine 30mg	1	958826A	8-11	
Codeine 30mg	1	059871B	11-11	
Codeine 30mg	1	059358A	9-11	
Oxcarbazepine 150mg	1	958460A	2-12	
Carbidopa / Levodopa 10mg/100mg	1	758248	3-12	
Terazosin 5mg	1	7K031	11-09	
Bupropion 5mg	1	21533402	7-10	
Azithromycin 600mg	1	LK10575	3-12	
Benazepril 5mg	1	186967	4-11	
Benazepril 5mg	1	190932	7-11	
Benazepril 5mg	1	192480	9-11	
Tacrolimus 1mg	1	KW092707	4-11	
Terazosin 1mg	1	0P119	2-12	
Risperidone 4mg	1	966685	4-11	
Risperidone 3mg	1	9HG881	6-11	
Simvastatin 5mg	1	WM0510003	3-12	
Terazosin 10mg	1	HN0723	10-09	

River Rx

4-5-12

Expired Drugs

Drug name/ strength	Quantity	Lot #	Expiration	Comment
Paroxetine 20mg	1	PE0210005-A	2-12	
Chloroquine 250mg	2	64063A	5-11	
Carvedilol 6.25mg	1	MJ3830	4-11	
Diflunisal 500mg	1	753154	4-11	
Bupropion 150mg	1	382230A	4-12	Short Dated
Diltiazem CD 180mg	1	568B01	12-11	
Flurazepam 15mg	2	659000	2-12	
Flurazepam 30mg	3	66285A	9-11	
Chlordiazepoxide/ Clindam Bromide	2 bottles 5mg/2.5mg	S1001007	2-12	
Imipramine 10mg	1	61802	5-10	
Imipramine 10mg	1	61935	9-10	
Chlorpromazine 10mg	1	175171	4-11	
Imipramine 25mg	1	62721	2-12	
Imipramine 25mg	1	62527	12-11	
Propranolol 80mg	1	3020607	2-12	
Glyburide/Metformin 1.25mg/250mg	1	146616	5-11	
Fluphenazine 5mg	1	18715101	8-10	
Fluphenazine 10mg	1	18715001	11-10	
Fexofenadine/ Pseudoephedrine	1 bottle 60mg/120mg	1128622	11-11	
Naproxen 275mg	1	HG17209	10-11	
Chlorpromazine 10mg	1	268496	9-11	
Chlorpromazine 10mg	1	279363	12-11	

Pharmacist Signature:

David E. Healy
Jannelle McNaughton CPhT

Inspector Signature:

Pharmacist Printed Name David Healy

Date: 4-5-12

Rx# **N764320** Refills Left: 0
4-05-12

TAKE ONE TABLET TWICE DAILY AS
NEEDED FOR PAIN

OXYCODONE/APAP TABLETS 5MG/325MG
#60 Gen Eq. PERCODET 5/325 MALLINCKRODT SPEC CHEM
Dr. KALMAT, CHANDRASHEKAR FK1467320
Discard After: 4/05/13 NSC Rpl: DH

CAUTION: Federal law prohibits transfer of this drug to any other person if on the path of a non-prescriber.

Reviewed inspection report and gave copy to pharmacist on duty David H

Pharmacist Signature: David E. Healy

Date: 4/5/12