IN THE MATTER OF	*	**BEFORE THE**
ULTRA CARE PHARMACY BALTIMORE	*	**MARYLAND STATE**
Respondent	*	**BOARD OF PHARMACY**
Permit Number: P08110	*	**Case Number: 22-321**

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

CONSENT ORDER

On August 21, 2024, the Maryland State Board of Pharmacy (the "Board") charged **ULTRA CARE PHARMACY BALTIMORE** (the "Respondent-Pharmacy"), Permit Number: **P08110**, under the Maryland Pharmacy Act, (the "Act") Md. Code Ann., Health Occ. §§ 12-101 *et seq.* (2021 Repl. Vol. & 2023 Supp.).

The Board charged the Respondent-Pharmacy with the following pertinent 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;

. . . .

(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[.]

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:

. . . .

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

. . . .

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

The pertinent provisions of Md. Code Ann., Health-General ("Health-Gen.") provide the following:

Health-Gen. § 21-2A-04.2. Prescriber to request prescription monitoring data.

. . . .

(e) If a pharmacist or pharmacist delegate has a reasonable belief that a patient may be seeking a monitored prescription drug for any purpose other than the treatment of an existing medical condition:

(1) Before dispensing a monitored prescription drug to the patient, the pharmacist or pharmacist delegate shall request prescription monitoring data to determine if the patient has received other prescriptions that indicate misuse, abuse, or diversion of a monitored prescription drug; and

(2) The pharmacist shall have the responsibility described in 21 C.F.R. 1306.04.

The pertinent provisions of the Code of Maryland Regulations ("COMAR") provide the following:

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[.]

. . . .

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

(2) Conveyed;

(a) In a manner that contains the handwritten, pen-to-paper signature of the prescriber[.]

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; [and]

B. Is maintained for at least 5 years from the date of dispensing[.]

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 10.19.03.07. 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 10.19.03.09. Controlled Substances Listed in Schedule III, IV, and V.

A. Requirement of Prescriptions Listed in Schedules III, IV, and V (21 CFR §1306.21).

(1) A pharmacist may dispense directly a controlled dangerous substance listed in Schedules III, IV, or V, which is a prescription drug as determined under the Federal Food, Drug, and Cosmetic Act, or State Law, only pursuant to either a written prescription signed by a prescribing individual practitioner or a facsimile received by facsimile

> equipment of a written, signed prescription transmitted by the practitioner or the practitioner's agent to the pharmacy or pursuant to an oral prescription made by a prescribing individual practitioner and immediately reduced to writing by the pharmacist containing all information required in Regulation .07 of this chapter, except the signature of the prescribing individual practitioner.

On November 13, 2024, 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 November 27, 2019. The Respondent-Pharmacy's permit expires on May 31, 2026.

2. At all times relevant hereto, the Respondent-Pharmacy employed a single 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 July 20, 2018. The Pharmacist's license expires on November 30, 2025.

[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.

4. On May 12, 2022, the United States District Court for the District of Maryland approved a Consent Decree of Injunction (the "Consent Decree") between the United States of America and the Respondent-Pharmacy and the Pharmacist. According to the Consent Decree, the United States alleged that:

> [The Respondent-Pharmacy and the Pharmacist] violated the [Controlled Substances Act] and its implementing regulations by failing to exercise their corresponding responsibility to ensure that the controlled substances they dispensed, helped dispense, or facilitated dispensing were issued for a legitimate medical purpose by an practitioner acting in the usual course of the practitioner's professional practice, as required under 21 C.F.R. § 1306.04, and by filling, helping fill, or facilitating the filling of a prescription for a controlled substance outside the usual course of [the Respondent-Pharmacy's and the Pharmacist's] professional practice, as required by 21 C.F.R. § 1306.06.

5. The Consent Decree required the Respondent-Pharmacy and the Pharmacist, before dispensing or assisting in the dispensing of any controlled substance prescription, for each prescription to:

a. Review the data available in the [Prescription Drug Monitoring Program ("PDMP")][2] and "other circumstances surrounding the presentation of the prescription [to reasonably determine] whether the prescription was issued for a legitimate medical purpose by an

[2] PDMP is a statewide electronic database that tracks all CDS prescriptions. The PDMP allows authorized users to: view prescription histories of their patients, including prescriptions from other states; identify patients who are obtaining opioids from multiple providers; review the average morphine milligram equivalent per day for patients who are prescribed opioids; identify patients who are being prescribed concurrent medications that may increase risk of overdose, such as benzodiazepines and opioids; and identify possible diversion, substance use disorder, or needed care coordination.

individual practitioner acting in the usual course of the practitioner's professional practice."

b. "[I]dentify [indications] that the prescribed controlled substances may not be for a legitimate medical purpose, or may be abused, misused, or otherwise diverted from legitimate uses."

c. "[D]ocument in detail any indications of abuse or diversion and the steps [the Respondent-Pharmacy and the Pharmacist] took to reasonably ensure [compliance with the two requirements listed above.]"

6. The consent decree further required the Respondent-Pharmacy and the Pharmacist to provide documentation relating to their compliance with the consent decree.

7. On or about January 3, 2024, the Board issued a subpoena duces tecum to the PDMP requesting dispensing information for all CDS dispensed by the Respondent-Pharmacy from April 15, 2020, to January 6, 2021. The Board received the PDMP Report, which included data for dates from April 15, 2020, through January 6, 2021, inclusive.

8. On or about January 3, 2024, the Board issued a subpoena duces tecum to the PDMP requesting the dispensing information for all CDS dispensed by the Pharmacist and their delegates from April 15, 2020, to January 6, 2021. The Board received the audit log, which included data for dates from April 20, 2020, through June 1, 2021, inclusive.[3]

[3] A PDMP Audit Trail Report contains a log of all PDMP data accessed by a clinical user under their individual CRISP account or through an approved PDMP integration within their workflow. Clinical users (prescribers, pharmacists, and delegates) can query (search for) PDMP data related to a patient through CRISP products. A record exists when a query was successfully made, regardless of whether data was returned (i.e. a provider can search for a patient in the

9. On or about January 3, 2024, the Board issued a subpoena duces tecum to the Respondent-Pharmacy requesting a complete copy of all hardcopy prescriptions for Schedule II-V drug products from April 15, 2020, to January 6, 2021. The Respondent-Pharmacy produced hardcopy prescriptions; however, nine (9) prescriptions or prescription refills were not included in the hardcopies produced.

10. On February 23, 2024, the Maryland Office of Controlled Substances Administration's ("OCSA's") Clinical Pharmacist Inspector (the "Clinical Pharmacist Inspector") reviewed the PDMP report, Audit Log, and hardcopies of the CDS prescriptions from the Respondent-Pharmacy, and provided the Board with their analysis. The Clinical Pharmacist Inspector identified 58 prescriptions as forgeries. These prescriptions were made in the name of four (4) health care providers. The Clinical Pharmacist Inspector found that the 58 prescriptions had one or more of the following indicators of a forged prescription:

[a.] The incorrect phone number for the prescriber is on the hardcopy prescription.
[b.] Non-existing practice name is on the hardcopy prescription.
[c.] An existing practice name, but incorrect practice address is on the hardcopy prescription.
[d.] Prescriber on the hardcopy does not work at the practice named on the hardcopy prescription.
[e.] One or more of the four prescribers names has been used for the same, non-existent practice.
[f.] The drugs are attributed to prescribers that would not in the course of their usual practice be prescribing these types of drugs.
[g.] The same handwriting is used on prescriptions attributed to different prescribers and different practices.

---

system and be shown either PDMP prescription data or be told that no data exists for the searched patient demographics; both of these situations would be logged as a query).

[h.] The prescriptions are for the same three drugs among multiple patients and prescribers: alprazolam[4] 2mg #90 tablets, promethazine with codeine[5] liquid 240ml, and tramadol[6] 50mg #90 tablets.

[i.] The alprazolam 2mg tablets and promethazine with codeine liquid are drugs that are frequently abused and diverted.

The Clinical Pharmacist Inspector noted two (2) prescriptions for oxycodone[7] among the prescriptions identified as forgeries. The Clinical Pharmacist Inspector concluded that "[t]here was dispensing of forged prescriptions at [the Respondent-Pharmacy] which had many red flags that would identify them as forgeries."

11. The Respondent-Pharmacy has fulfilled all the terms and conditions of the Consent Decree, including all terms and conditions of probation and monitoring.

CONCLUSIONS OF LAW

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

12. By filling prescriptions with red flags, the Respondent-Pharmacy violated Health-Gen. § 21-2A-04.2(e)(1)-(2) and/or Health Occ. § 12-403(c)(1) in that the Respondent-Pharmacy violated COMAR 10.34.10.01(A)(1) and/or (A)(2) and/or (B)(1)-(3), and/or COMAR 10.34.20.02(A)(1) and/or (A)(2), and/or COMAR 10.34.20.03(A)

[4] Alprazolam, a Schedule IV drug, is used to treat anxiety disorders and panic disorder. Alprazolam is in a class of medications called benzodiazepines.

[5] Promethazine with Codeine, a Schedule V drug, is used for the temporary relief of coughs and upper respiratory symptoms associated with allergy or the common cold. Codeine belongs to a class of medications called opiate (narcotic) analgesics and to a class of medications called antitussives.

[6] Tramadol, a Schedule IV drug, is used to relieve severe pain. Tramadol is in a class of medications called opiate (narcotic) analgesics.

[7] Oxycodone, a Schedule II drug, is used to relieve severe pain. Oxycodone is in a class of medications called opiate (narcotic) analgesics.

and/or (B), and/or COMAR 10.34.20.04, and/or COMAR 10.19.03.07(C)(1) and/or (D)(1), and/or COMAR 10.19.03.08(A)(1), and/or COMAR 10.19.03.09(A)(1).

13. By filling numerous prescriptions despite several red flags and/or failing to document verification checks were completed for red flag prescriptions, the Respondent-Pharmacy violated Health-Gen. § 21-2A-04.2(e)(1)-(2) and/or Health Occ. § 12-403(c)(1) in that the Respondent-Pharmacy violated COMAR 10.34.10.01(A)(1) and/or (A)(2) and/or (B)(1)-(3), and/or COMAR 10.34.20.02(A)(1) and/or (A)(2), and/or COMAR 10.34.20.03(A) and/or (B), and/or COMAR 10.34.20.04, and/or COMAR 10.19.03.07(C)(1) and/or (D)(1), and/or COMAR 10.19.03.08(A)(1), and/or COMAR 10.19.03.09(A)(1).

14. By filling forged prescriptions and/or filling prescriptions with red flags that would identify them as forgeries, the Respondent-Pharmacy violated Health-Gen. § 21-2A-04.2(e)(1)-(2) and/or Health Occ. § 12-403(c)(1) in that the Respondent-Pharmacy violated COMAR 10.34.10.01(A)(1) and/or (A)(2) and/or (B)(1)-(3), and/or COMAR 10.34.20.02(A)(1) and/or (A)(2), and/or COMAR 10.34.20.03(A) and/or (B), and/or COMAR 10.34.20.04, and/or COMAR 10.19.03.07(C)(1) and/or (D)(1), and/or COMAR 10.19.03.08(A)(1), and/or COMAR 10.19.03.09(A)(1).

15. By failing to maintain prescription records, the Respondent-Pharmacy violated Health Occ. § 12-403(c)(1) in that the Respondent-Pharmacy violated COMAR 10.34.10.01(B)(1)-(3) and/or COMAR 10.34.20.03(A) and/or (B).

16. By participating in activities, as outlined above, that are a ground for Board action against the Pharmacist under § 12-313, including Health Occ. § 12-313(b)(21) and/or (25), the Respondent-Pharmacy violated § 12-403(c)(9) of the Act.

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 **ONE (1) YEAR**, 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. The Respondent-Pharmacy shall provide written documentation indicating the successful completion of this training;

4. As the Respondent-Pharmacy has fulfilled all the terms and conditions of the Consent Decree, the following terms and conditions of probation are stayed:

    a. During the period of probation, the Respondent-Pharmacy shall be monitored by a Board-approved supervisor;

    b. Within thirty (30) days of the effective date of the Consent Order, the Respondent-Pharmacy shall submit to the Board the name and

curriculum vitae of a pharmacist who will serve as the supervisor for the Board's approval;

c. The Respondent-Pharmacy shall meet in person quarterly with the Board-approved supervisor;

d. The Board approved supervisor shall consult with the Respondent-Pharmacy on the pharmacy operation and work with the Respondent-Pharmacy to develop policies regarding Controlled Dangerous Substances ("CDS") which should include, among other things, inquires of the prescription drug monitoring program (PDMP);

e. During the period of probation, the Respondent-Pharmacy's Board-approved supervisor shall provide the Board with quarterly reports addressing the Respondent-Pharmacy's practice;

5. After **ONE (1) YEAR** 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 **$5,000**, payable within one (1) year 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 22-321 – Ultra Care Pharmacy Baltimore 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. & 2023 Supp.).

4-3-25
Date

Kristopher Rusinko
President, Maryland Board of Pharmacy

CONSENT

I, Gayatri Patel, owner of Ultra Care Pharmacy Baltimore, acknowledge that I have had the opportunity to consult with legal counsel before signing this document. By this Consent, I accept, on behalf of Ultra Care Pharmacy Baltimore to be bound by this Consent Order and its conditions and restrictions. On its behalf, I waive any rights Ultra Care Pharmacy Baltimore 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 Ultra Care Pharmacy Baltimore 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 Ultra Care Pharmacy Baltimore'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 Ultra Care Pharmacy Baltimore and understand its meaning and effect.

03/03/25
Date

Gayatri Patel
Owner
Ultra Care Pharmacy Baltimore

NOTARY

STATE OF Maryland
CITY/COUNTY OF Montgomery

I hereby certify that on this 3 day of March, 2025, before me, a Notary Public of the State of Maryland and City/County aforesaid, personally appeared GAYATRI PATEL 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.

Notary Public
My commission Expires: 8/21/2026

PADMA BAJRACHARYA
Notary Public - Maryland
Montgomery County
My Commission Expires Aug. 21, 2026