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NEVADA STATE BOARD OF PHARMACY

985 DAMONTE RANCH PKWY, SUITE 206 – RENO, NV 89521 - (775) 850-1440

This application cannot be returned by fax or email.
We must have an original signature and fee to process.

CHANGE OF MANAGING PHARMACIST FORM

Registration Fee: \$50.00

(non-refundable money order or cashier's check only, no cash or business check's)

*This form is only required for pharmacies physically located in Nevada. We only require written notification from an out-of-state pharmacy for a manager change.

General Information

**Nevada Pharmacy Board License #: PAC03673
 **(Do not use your RPH, NPI or DEA number. Number begins with a PH, IA, IB)

Pharmacy Name: ACRx Specialty Pharmacy Store #: _____
 Address: 3200 Soaring Gulls Dr. Ste 101
 City: Las Vegas State: * NV Zip: 89129
 Telephone: (702)800-6448 Fax: (702)522-8374
 New Managing Pharmacist Name: Paul Dichtel
 License #: 15832 Date Started: 7/10/2020
 Pharmacy email: admin@acrpharmacy.com

I understand that if I cease to be managing pharmacist of the above named pharmacy I will jointly, with the new managing pharmacist, take an inventory of all controlled substances.

As a managing pharmacist of the above referenced pharmacy, I understand within 48 hours after I report for duty as the managing pharmacist, I shall cause an inventory of all controlled substances of the pharmacy according to the method prescribed by the provision of 21 CFR Part 1304; and cause a copy of the inventory to be on file at the pharmacy.

						Yes	No	
Been diagnosed or treated for any mental illness, including alcohol or substance abuse, or physical condition that would impair your ability to perform the essential functions of your license?....							<input type="checkbox"/>	<input checked="" type="checkbox"/>
1. Been charged, arrested or convicted of a felony or misdemeanor in <u>any</u> state?							<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Been the subject of an administrative action whether completed or pending in <u>any</u> state?							<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Had your license subjected to any discipline for violation of pharmacy or drug laws in <u>any</u> state?							<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you marked YES to any of the numbered questions (1-3) above, include the following information & provide documentation:								
Board Administrative Action:		State	Date:	Case #:				
		IL	12/02/1988	88-999-X				
Criminal Action:	State	Date:	Case #:	County	Court			
	IL	02/10/1988	1987CR	COOK	COOK			

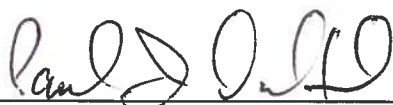
PHARMACY MANAGER'S RESPONSIBILITIES

(PHARMACY MANAGER, MUST READ, SIGN AND DATE THIS SECTION)

1. Insure the pharmacy is operated in accordance with all state and federal laws and regulations. (NRS 639.220).
2. Maintain all outdated, mislabeled or adulterated medications in an isolated area separated from medications for current use. (NRS 639.282; NAC 639.510; NAC 639.473(2).
3. Notify the Nevada State Board of Pharmacy of all employment changes of pharmacy staff within 10 days of the change. (NRS 639.540)
4. Maintain documentation of pharmacy technician in-service records or technician in training daily logs available for inspection at the pharmacy. (NAC 639.254(2))
5. A complete controlled substance inventory must be taken every 2 years and whenever there is a pharmacy manager change (must be completed within 48 hours). (CFR 1304.11; NAC 453.475)
6. Report any loss or theft of controlled substances to the Nevada State Board of Pharmacy, Department of Public Safety and Drug Enforcement Administration within 10 days of the occurrence. (NRS 453.568)
7. Maintain prescription records/logs for 2 years (2 years from the last fill date for original paper prescription). (NRS 639.236; NAC 453.480)
8. Maintain records of sales to practitioners or other licensed providers as invoices for 2 years. (NRS 639.268; NAC 453.485)
9. Maintain invoice records separated as required for 2 years. (NRS 454.286; NAC 639.487)

I understand that as the managing pharmacist I am responsible for compliance by the pharmacy and its personnel with all state and federal laws and regulations relating to the operation of the pharmacy and the practice of pharmacy. I understand my license can be revoked or that I can be the subject of disciplinary action if such laws or regulations are knowingly violated in the pharmacy in which I am managing pharmacist.

I have read all questions, answers and statements and know the content thereof. I hereby certify, under penalty of perjury, that the information furnished on this application is true, accurate and correct.



Signature of New Managing Pharmacist (no stamps or copies)

07/10/2020
Date

Board Use Only

Date Received: _____

Amount: _____

50.00

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Committee on
Recovering Pharmacists

CONFIDENTIAL

Illinois Pharmacist Recovery Program

A Program of the Illinois Pharmacy Foundation



December 6, 1994

Alan Cutler
Supervisor/Probation Unit
Illinois Department of Professional Regulation
James R. Thompson Center
100 West Randolph, Suite 9-300
Chicago, IL 60601

Re: Paul Dichtel, R.Ph.
Case # 87-1164-LEG
License # 051-032942

Dear Mr. Cutler:

Pharmacist Paul Dichtel has been in compliance with all aspects of the Illinois Pharmacist Recovery Program, including but not limited to, the conditions of probation as set forth in his consent order approved on October 15, 1991.

Per my records, Mr. Dichtel's probationary period ended on November 6, 1994. Mr. Dichtel's most recent drug screening was performed on November 2, 1994 and was returned negative. We also received a final employment update received on November 7, 1994.

Please let me know if you require any additional information from me for your records and to formally release Mr. Dichtel's probationary status.

Sincerely,

Marjorie Jaski
Administrator, IPRP

cc: Richard Kuhlman, IDPR
Mary Clinton, IPRP Region Coordinator
Paul Dichtel

STATE OF ILLINOIS
DEPARTMENT OF PROFESSIONAL REGULATION

DEPARTMENT OF PROFESSIONAL REGULATION)	
of the State of Illinois, Complainant)	
v.)	No. 87-1164LEG
PAUL DICHTEL)	
Respondent)	

NOTICE

TO: William Coughlin, Esquire
David Blumenfeld, Ltd.
134 North LaSalle Street, Suite 1920
Chicago, Illinois 60602

PLEASE TAKE NOTICE that the Director of the Department of Professional Regulation did sign the attached Consent Order.

The Order of the Director of the Department of Professional Regulation will be implemented as of the date of the Order unless the Order states otherwise.

DEPARTMENT OF PROFESSIONAL REGULATION
of the State of Illinois

BY: _____

Jody L. Otterberry
Clerk for the Department

All inquiries should
be directed to the
Prosecutions Unit
312/814-4477

STATE OF ILLINOIS)
)
COUNTY OF SANGAMON)
) ss:

The undersigned, being duly sworn on oath, if a non-attorney, or certified, if an attorney, states that on the date hereinafter set out, I caused copies of the foregoing NOTICE AND ORDER, to be placed in the United States mail, by CERTIFIED mail at Capital Station, Stratton Building, Springfield, Illinois 62706, to all parties at the addresses listed above:

Jody L. Otterberry
AFFIANT

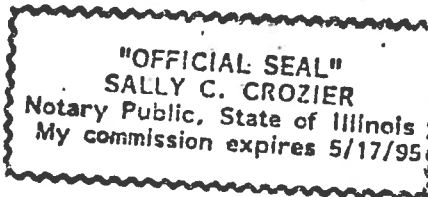
October 15, 1991
DATE

(If not an attorney) Signed

and sworn to before me this

15th day of October 1991

Sally C. Crozier
NOTARY PUBLIC



STATE OF ILLINOIS

DEPARTMENT OF PROFESSIONAL REGULATION

IN RE: The Petition for Restoration of)
 PAUL DICHTEL) No. 87-1164-LEG
 License No. 051-032942, Petitioner)

ORDER

This matter having come before the Board of Pharmacy of the Department of Professional Regulation of the State of Illinois, and the Board of Pharmacy having made certain Findings of Fact, Conclusions of Law and a Recommendation to the Director of the Department; and the Department having complied with all required notices; and the time allowed for the filing of a Motion for Rehearing before the Director of the Department having now passed;

NOW, THEREFORE, I, NIKKI M. ZOLLAR, DIRECTOR OF THE DEPARTMENT OF PROFESSIONAL REGULATION of the State of Illinois, do hereby adopt the Findings of Fact, Conclusions of Law and Recommendation of the Board of Pharmacy in this matter.

IT IS THEREFORE ORDERED that the Petition for Restoration is approved, and that the Certificate of Registration, License No. 051-032942, heretofore issued to Paul Dichtel to carry on the practice of Pharmacy in the State of Illinois is restored on Probation for a period of three (3) years. The conditions of Probation shall be as detailed in the Board of Pharmacy's Recommendation.

IT IS FURTHER ORDERED that Paul Dichtel, upon payment of the proper renewal fee(s), be issued an active Certificate of Registration from the Department of Professional Regulation of the State of Illinois.

06/08/2010 09:12 FAX

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IT IS FURTHER ORDERED that Paul Dichtel, case No. 87-1164 and license No. 051-032942 upon receipt of licenses immediately surrender said wall and wallet sizes of said Certificate of Registration to the Department (Prosecution Division) to be marked with the term of the Probation and returned. Upon failure to do so, the Department shall seize the same.

DATED THIS 15th DAY OF October, 1991.

DEPARTMENT OF PROFESSIONAL REGULATION
of the State of Illinois

Nikki M. Zollar
NIKKI M. ZOLLAR
DIRECTOR

NMZ:cah

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YOUR RECORDS**

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STATE OF ILLINOIS

DEPARTMENT OF PROFESSIONAL REGULATION

DEPARTMENT OF PROFESSIONAL REGULATION)	
of the State of Illinois,)	
v.)	No. 88-999-X
PAUL DICHTEL)	
License No. 051-032942,)	
Respondent)	

STIPULATION AND RECOMMENDATION FOR SETTLEMENT

The Department by Hal Taylor, its attorney, and Paul Dichtel, Respondent, submit the following Stipulation and Recommendation for Settlement to the State Board of Pharmacy for its approval and favorable recommendation to the Director.

STIPULATION OF FACTS

1. THAT on August 4, 1988, the Department filed a Complaint against Respondent, alleging that Respondent had been convicted of possession and delivery of a controlled substance and sentenced to four (4) years incarceration.
2. Respondent has been advised that he has the right to be represented by counsel and has retained no counsel.
3. Respondent admits that at all times pertinent to the Complaint, he was a licensed Pharmacist practicing in the State of Illinois.
4. Respondent admits that he was convicted and sentenced as alleged and has been incarcerated since February 10, 1988.
5. Respondent is fully aware that this Recommendation must be approved by the State Board of Pharmacy. By submission of this Recommendation for approval, Respondent expressly waives any objection based upon

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prejudice should the State Board of Pharmacy refuse to accept this Recommendation.

6. For purposes of settlement only, Respondent acknowledges that a violation of the Illinois Pharmacy Act may be found by the State Board of Pharmacy.
7. Respondent has been advised that he has the right to file for a rehearing of the matter within 20 days of the Board's action in this case. Respondent hereby waives such a right to a rehearing if this Recommendation is approved.
8. Respondent has been advised that he has a right to Administrative Review of the Order entered by the Director in this case. Respondent hereby waives such right to review if this Recommendation is approved.

RECOMMENDATION FOR SETTLEMENT

9. In the interest of a prompt and just settlement in this matter in a manner consistent with the public interest and in light of the responsibilities of the State Board of Pharmacy, the Department and the Respondent offer the following program for approval by the State Board of Pharmacy. This Recommendation shall be considered to be an integrated package such that approval of this Recommendation without change is necessary.
11. Upon notification that the Recommendation has been approved and that the Director has entered an Order adopting the Recommendation of the State Board of Pharmacy, Respondent agrees to have his license to

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) practice as a Pharmacist, License No. 051-032942,
Indefinitely Suspended. Respondent may petition for
restoration no sooner than upon his release from
incarceration.

I have read this Stipulation and Recommendation for
Settlement and have fully discussed it with my attorney. I agree to
be bound by its terms.

) September 12, 1988
DATE

Paul Dichtel
Paul Dichtel
Respondent

) 9/16/88
DATE

Lt. Margaret Wright
Member of the State Board of
Pharmacy

) 9/16/88
DATE

Hal Taylor
Hal Taylor
Attorney for the Department

)
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The foregoing Stipulation and Recommendation for Settlement is approved by the State Board of Pharmacy as its decision this _____ day of _____, 19____. The State Board of Pharmacy concludes that Respondent has violated the Pharmacy Act and hereby recommends that the Director approve the Recommendation set forth herein by issuing an appropriate Order.

9-20-88

DATE

Director Pham suit 6/1/88
Chairman of State Board of
Pharmacy

9/22/88

DATE

Member

9/24/88

DATE

Member

9/26/88

DATE

Member

11/2/88

DATE

Member

11/7/88

DATE

Member

HT:kai

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STATE OF ILLINOIS

DEPARTMENT OF PROFESSIONAL REGULATION

DEPARTMENT OF PROFESSIONAL REGULATION
of the State of Illinois, Complainant

PAUL DICHTEL
License No. 051-032942, Respondent

No. 88-999-X

ORDER

This matter having come before the State Board of Pharmacy of the Department of Professional Regulation of the State of Illinois, and the State Board of Pharmacy, having approved a Stipulation and Recommendation for Settlement submitted by the parties;

NOW, THEREFORE, I, STEPHEN F. SELCKE, DIRECTOR OF THE DEPARTMENT OF PROFESSIONAL REGULATION of the State of Illinois, do hereby adopt the Stipulation and Recommendation for Settlement approved by the State Board of Pharmacy in this matter.

IT IS THEREFORE ORDERED that the Certificate of Registration, License No. 051-032942, heretofore issued to Paul Dichtel to carry on the practice of Pharmacy in the State of Illinois is Indefinitely Suspended in accordance with the Stipulation and Recommendation for Settlement which is attached hereto and incorporated herein.

IT IS FURTHER ORDERED that Respondent immediately surrender said Certificate of Registration and all other indicia of licensure to the Department of Professional Regulation of the State of Illinois. Upon failure to do so, the Department shall seize said Certificate of Registration.

DATED THIS 2 DAY OF December, 1988.

DEPARTMENT OF PROFESSIONAL REGULATION
of the State of Illinois

Stephen F. Selcke
STEPHEN F. SELCKE
DIRECTOR

SFS:HT:vat

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INFO. NO. B7 C R-3645

44

Also known as


JOHN FURSER

PAUL DICHTEL

THE PEOPLE OF THE STATE OF ILLINOIS represented by the State's Attorney of Cook County, do hereby inform and charge that against the peace and dignity of the People of the State of Illinois and in violation of the laws of the State of Illinois the herein named defendant(s) contrary to the 1985 Illinois revised statutes did violate said laws of Illinois as described herein.

FILED

MAR 23 8 / AM



MORGAN M. FINLEY
Clerk of the Circuit Court
CRIMINAL DIVISION

MORGAN M. FINLEY, CLERK OF THE CIRCUIT COURT OF COOK COUNTY.

The State's Attorney of Cook County now appears before the Circuit Court
of Cook County and in the name and by the authority of the People of the
State of Illinois states that on or about JANUARY 7, 1987,
in the Cook County, Illinois

PAUL DICHTEL

committed the offense of POSSESSION OF CONTROLLED SUBSTANCE

in that HE, KNOWINGLY AND UNLAWFULLY POSSESSED OTHERWISE
 THAN AS AUTHORIZED IN THE ILLINOIS CONTROLLED SUBSTANCES
 ACT OF SAID STATE OF ILLINOIS THEN IN FORCE AND EFFECT,
 LESS THAN 30 GRAMS OF A SUBSTANCE
 CONTAINING A CERTAIN CONTROLLED SUBSTANCE, TO WIT:
 COCAINE IN VIOLATION OF CHAPTER 56-1/2,
 SECTION 1402(B) OF THE ILLINOIS REVISED STATUTES
 1985 AS AMENDED, AND

contrary to the Statute, and against the peace and dignity of the
People of the State of Illinois.

(Count No. 1)

Charge ID Code: 5318
No: 87CR-3645

MORGAN M. FINLEY, CLERK OF THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS

The State's Attorney of Cook County now appears before the Circuit Court
of Cook County and in the name and by the authority of the People of the
State of Illinois states that on or about JANUARY 7, 1987,
in the Cook County, Illinois

also known as JON WRIGHT
 JOHN PURSER
 PAUL DICHTEL

committed the offense of DELIVERY OF CONTROLLED SUBSTANCE

In that THEY, UNLAWFULLY AND KNOWINGLY DELIVERED
 OTHERWISE THAN AS AUTHORIZED
 IN THE ILLINOIS CONTROLLED SUBSTANCES ACT OF
 SAID STATE OF ILLINOIS THEN IN FORCE AND EFFECT,
 MORE THAN 30 GRAMS OF A SUBSTANCE
 CONTAINING A CERTAIN CONTROLLED SUBSTANCE, TO WIT:
 COCAINE IN VIOLATION OF CHAPTER 56-1/2,
 SECTION 1401(A2) OF THE ILLINOIS REVISED STATUTES
 1985 AS AMENDED, AND

contrary to the Statute, and against the peace and dignity of the
People of the State of Illinois.

(Count No. 2)

Charge ID Code: 5205
No: B7CR-3645

MORGAN M. FINLEY, CLERK OF THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS

THE PEOPLE OF THE STATE OF ILLINOIS by the State's Attorney of Cook County
through his Assistant State's Attorney, after first being duly sworn on hi
oath, deposes and swears that the foregoing TWO count(s) in this
information has/have been read and subscribed by him as evidenced by his
signature below and that the same in each count hereby incorporated is
true.

Jeffrey A. Chudwin
Assistant State's Attorney

Subscribed and sworn (or affirmed) to before me *Feb 27, 1960*
by *Jeffrey A. Chudwin*
[Signature]
Notary Public

The bail is fixed at

JUDGE:
Enter

MORGAN M. FINLEY, CLERK OF THE CIRCUIT COURT OF COOK COUNTY

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS

Page 001

PEOPLE OF THE STATE OF ILLINOIS

VS

NUMBER 87CR0364502

PAUL

DICHTEL

CERTIFIED STATEMENT OF CONVICTION / DISPOSITION

I, AURELIA PUCINSKI, Clerk of the Circuit Court of Cook County, Illinois, and keeper of the records and seal thereof do hereby certify that the electronic records of the Circuit Court of Cook County show that:

The States Attorney of Cook County filed an INFORMATION with the Clerk of the Circuit Court on 03/23/87.

Charging the above named defendant with:

56.5-1402-B
A 56.5-1401-B(2)

POSS CONT SUB
MAN/DEL >10-30G COC

The following disposition was rendered before the Honorable Judge BOHARIC, ROBERT V. On :

02/10/88 PG JW FINDING GUILTY	C002
02/10/88 NOLLE PROSEQUI	C001
02/10/88 DEF SENTENCED ILLINOIS DOC	C002
4 YRS	

986-598-801

I hereby certify that the foregoing has been entered of record on the above captioned case.

Date 05/17/94



Aurelia Pucinski

AURELIA PUCINSKI

CLERK OF THE CIRCUIT COURT OF COOK COUNTY