



NEVADA STATE BOARD OF PHARMACY
OFFICE OF THE GENERAL COUNSEL

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April 17, 2018

CERTIFIED U.S. MAIL

Chelsea Rene Flores
 4880 E. Charleston Blvd. #10
 Las Vegas, Nevada 89104

RE: Notice of Denial of Pharmaceutical Technician in Training Application

Dear Ms. Flores:

On April 11, 2018, the Nevada State Board of Pharmacy ("Board") considered and denied your *Pharmaceutical Technician in Training Application* ("Application"). This letter shall serve as written notice of the Board's decision.

The Board's primary reason for denying your application is your unlawful use of marijuana, which you admit occurred while you were on a break at your pharmaceutical technician school. The Board provided you the opportunity to appear before it on April 11 to discuss the matter, but you failed to appear. With your admissions, and absent your presentation of any mitigating factors, the Board denied your application out of concern for safety and the public interest.

Nevada law, NRS 639.210, states that "[t]he Board may . . . deny the application of any person for a certificate, license, registration or permit, if the holder or applicant":

- "[i]s not of good moral character;"
- "[is] guilty of unprofessional conduct or conduct contrary to the public interest;"

or

- "[h]as violated any provision of the Federal Food, Drug and Cosmetic Act or any other federal law or regulation relating to prescription drugs." Each of those factors apply to the circumstances put before the Board with your application.

You have the right under NRS 639.139 to petition the Board for reconsideration of your Application. The statute provides in relevant part:

NRS 639.139 Denial of application: Procedure for reconsideration.

1. At any time within *30 days after receipt of the notice of denial* of an application, the applicant may petition the Board for reconsideration of the application. The petition *must set forth a denial, in whole or in part, of the violations alleged* and a statement that the applicant is prepared to submit evidence in support of the denial of the allegations.

....

(Emphasis added.)

If you opt to exercise your right to petition the Board for reconsideration, please submit that petition and all supporting evidence you wish to present to the Board's offices at 431 W. Plumb Lane, Reno, Nevada 89509, within thirty (30) days of receipt of this notice.

Please feel free to contact me if you have questions.

Best regards,



S. Paul Edwards
General Counsel
Nevada State Board of Pharmacy

Cc: Larry Pinson, Executive Secretary of the Nevada Board of Pharmacy

PT20618

NEVADA STATE BOARD OF PHARMACY

431 W Plumb Lane ~ Reno, NV 89509

PHARMACEUTICAL TECHNICIAN IN TRAINING APPLICATION

Registration Fee: \$40.00 - (non-refundable money order only, no cash)

Complete Name (no abbreviations):

First: Chelsea Middle: Rene Last: Flores

Home Address: E-Charleston Apt #: 10

City: Las Vegas State: NV Zip Code: 89104

Telephone: Social Security Number:

Date of Birth: Place of Birth: Sex: M or F

E-mail Address:

A licensee is not required to have a Nevada State Business License, however, if you, personally, have one, please provide the number:

I am requesting registration at the following pharmacy:

Pharmacy: NORTHWEST CAREER COLLEGE Store #:

Address: 7398 SMOKE RANCH ROAD

City: LAS VEGAS State: NV Zip Code: 89120

Signature of Managing Pharmacist: Lic #: PT07935 Date:

(Without the signature of the managing pharmacist, the application will be returned.)

- 1. Are you 18 years of age or older? Yes X No
2. Are you a high school graduate or the equivalent? Yes X No
(IF YOU ANSWERED "NO" TO QUESTION 1 AND/OR 2, YOU CAN NOT SUBMIT THIS APPLICATION)

Table with 2 columns: Question, Yes/No. Contains questions about mental illness, legal issues, and disciplinary actions.

If you marked YES to any of the numbered questions (3-5) above, include the following information & provide an explanation & documentation:

Table for Board Administrative and Criminal Actions with columns for State, Date, Case #, County, and Court.

The Nevada Legislature requires that we include the following questions as part of all applications (NRS639.129)
Are you the subject of a court order for the support of a child?
IF you marked YES to the question, above are you in compliance with the court order?

I hereby certify that the information furnished on this document is true and correct. I agree to abide by all the statutes, rules and regulations governing pharmaceutical technicians and understand that a violation of any such statutes, rules and regulations may be grounds for suspension or revocation of this permit.

Original Signature, no copies or stamps accepted: Chelsea Rene Flores Date: Jan 30, 2018

Board Use Only Date Processed: 2/15/18 Amount: \$40.00