To: Pharmacy Manager
From: Nevada State Board of Pharmacy Inspector
Subject: Self-Assessment/Inspection Process

The pharmacy inspection and assessment process allows you to know the standards anticipated in a pharmacy inspection.

Please read the entire instructions listed below in preparation for your inspection:

1. Print and complete the forms found online on the Nevada Board of Pharmacy Website. Have them ready, completed, and available for the inspector in case of your absence. The forms are:
   A. The Retail Pharmacy Inspection form
   B. The Work Place Assessment form
   C. Non-Sterile Compounding form if applicable
   D. Sterile Compounding form if applicable (pages 9-26 of the Institutional form)

2. I will review the forms with you and inspect your facility during the month listed on your Inspection Notice. Your inspection will occur during normal business hours at no specific date or time. To minimize disruption of pharmacy operations please have the following materials available at the time of inspection:
   A. Completed DEA-222 and/or E-222 electronic forms since last inspection (Must be filled out and printed)
   B. Most recent biennial inventory
   C. In-service training records (CE) for all pharmacy technicians
   D. Daily activity log for pharmacy technicians in training
   E. Daily work log (legible full name with shift worked)
   F. Inspection report from previous year

Our observations along with your findings will assure understanding and compliance with Nevada law.
Circle yes for compliant and no for non-compliant. You may make comments as needed.

**PHARMACY FACILITY**

Is there adequate space for storage including shelves, refrigerators, narcotic cabinets/safes, and counter areas to avoid crowding?  
NAC 639.469  
Yes  No

2' x 3' clear work area for each pharmacist & technician on duty and a minimum of free floor space behind the prescription counter that is not less than 8 feet in length and 4 feet in width.  
NAC 639.525  
Yes  No

Is there a clean and sanitary sink with hot and cold running water available in the pharmacy for all personnel to use?  
NAC 639.469  
Yes  No

Is each staff member’s attire clean and sanitary?  
NAC 639.530  
Yes  No

Are the floors/counters/other areas free of debris?  
NAC 639.530  
Yes  No

Is the pharmacy clean and arranged in an orderly manner?  
NAC 639.469  
Yes  No

Is the temperature in the pharmacy compatible with drug storage requirements? (USP 68-77 degrees F (20-25 C) with short excursions allowed from 59 degrees F to 86 degrees F).  
NAC 639.510  
NRS 639.282  
Yes  No

Is the temperature in the refrigerator(s) appropriate for the medications stored?  36-46 degrees F (2-8 C).  
NAC 639.527  
Yes  No

   How often is the temperature logged?  ______________________

Is the temperature in the freezer(s) appropriate for the medications stored? (in accordance with manufacturer’s requirements).  
NAC 639.527  
NAC 639.510  
Yes  No

   How often is the temperature logged?  ______________________

Nevada State Board of Pharmacy Self-Assessment Form 4/15/2019  
Page 2 of 15
Have there been any issues with the refrigerator(s) or freezer(s) being out of temperature range?

<circle> Yes  No

If Yes, have available for review the documentation of the results of the audit by the pharmacist of the safety or disposition of the medications in the refrigerator(s), freezer(s).

Are the refrigerator(s) and freezer(s) alarms always on and checked periodically? NAC 639.525  Yes  No

Are the facilities sufficient to allow for patient confidentiality to be maintained during counseling? NAC 639.708  Yes  No

Do all employees of the pharmacy wear an identification badge that clearly identifies the person by their name and job position? NAC 639.542  Yes  No

Are current licenses and registrations displayed? NRS 639.150  Yes  No
(Where it clearly may be read by the public)

Prescription readers: (effective 6/26/2018) NAC 639.756

1. Is there a visible sign posted in the pharmacy informing patients about the availability of prescription readers? Yes  No

2. Is written notice or verbal notice of the availability of a prescription reader given to the patient or caregiver of the patient to whom a drug is dispensed? Yes  No

3. Upon request, the patient or patient’s caregiver is provided a prescription reader or given directions or advice on the manner in which to obtain a prescription reader? Yes  No

EQUIPMENT

Does each computer terminal require the staff member to login with a password, biometric or other electronic means of identification? NAC 639.751  Yes  No
Does the computer require the entry of a password, biometric or other electronic means of identification each time there is new data entry or a change made to data?  
NAC 639.751  
Yes  No

How often are the passwords changed?  
NAC 639.751

Does the terminal automatically log out a staff member or does the staff member have to manually log out?  
NAC 639.751

<circle> Manual  Automatic

Is a poison control center telephone number posted in the pharmacy?  
NRS 454.130  
Yes  No

Current Nevada Pharmacy Regulations and References available?  
NAC 639.503  
Yes  No

Does all equipment such as the phone, fax, computer, computer printer, electronic signature devices, copy machine work properly?  
NAC 639.469  
NAC 639.525  
Yes  No

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**PATIENT COUNSELING**

Does the pharmacy maintain documentation of acceptance or refusal of counseling on all new prescriptions?  
NAC 639.707  
Yes  No

Counseling is documented by:  
<circle> (electronic log)  (handwritten log)

Does the pharmacist document counseling immediately on completion of counseling?  
NAC 639.707  
Yes  No
STOCK OF DRUGS

Is the representative stock of drugs available appropriate for the practice site?  
Are all pharmaceutical stock bottles properly labeled including pre-packed drugs?  
- Name of product  
- Manufacturer  
- Expiration date  
- Lot number

Is there a procedure for monitoring the stock of drugs for outdated, mislabeled, or adulterated drugs?  

How often are the drug stocks checked for outdated, mislabeled or adulterated drugs? ________________

Are outdated, mislabeled, or adulterated drugs removed from stock and secured in an area where they will not be used to fill prescriptions?

PRESCRIPTION LABELING

Do labels bear all information required?  

Does the computer only issue labels with a date that is the most recent date on which the prescription was filled?  

Expiration/discard date on the label appears as: <circle>  
- (default)  
- (order entry)  
- (handwritten)
RECORDS

Are all records of pharmacy personnel (RPh & Tech & Tech in Training) on duty each day maintained in a written record & available for prior 2 years? (written record must be a legible full name, that can be printed).

NAC 639.245
NAC 639.250
Yes  No

Do you keep a manual or electronic daily work log for technicians?
<Circle>  (electronic)  (handwritten)

Do you keep a manual or electronic daily work log for pharmacists and pharmacy management?  <Circle>  (electronic)  (handwritten)
If electronic, the record must be able to be printed for the last 2 years. If electronic, the record must clearly identify the job description performed that day for each staff member. If electronic, be prepared to print 1 or more daily records immediately on request.

Yes  No

Are all records of the acquisition, storage and disposition of drugs accurate and complete?

NAC 639.510
Yes  No

Does the pharmacy maintain invoices, records of returns, work schedules, refill logs, counseling logs, inventories, & other required records for 2 years?

NRS 454.286
NAC 639.245
Yes  No

Are scheduled II controlled substances prescriptions filed separately from all other prescriptions?

NRS 639.236
Yes  No

The inspector may review a random sample of scheduled II controlled substances prescriptions and verify that they are tendered within 14 days from the date of issue.

NRS 453.431

Are all telephoned prescriptions dated and initialed and documented with the name of the person who called in the prescription when transcribed to paper?

NAC 639.712
Yes  No

Legibly write your pharmacy’s DEA number on the line provided.

Nevada State Board of Pharmacy Self-Assessment Form 4/15/2019
Page 6 of 15
Does the facility participate in the Controlled Substance Ordering System (CSOS – [electronic] E222 order form)? The pharmacy must have a completed and printed copy of the electronic form.

21 CFR 1305

Yes No

Are schedule 2 order forms (DEA-222 or E-222) properly completed? (Dated and initialed by pharmacist) (Quantity and date received)

NRS 453.251
21 CFR 1305.13
NAC 639.487

Yes No

Are schedule 2 order forms (DEA-222 or E-222) and invoices maintained separately from other records?

21 CFR 1304.04
NRS 453.246

Yes No

Are schedule 3 through 5 invoices maintained separately from other records?

NRS 453.246
21 CFR 1304.04

Yes No

Are all invoices signed by a pharmacist upon delivery to acknowledge the drugs listed on the invoice were physically received by the pharmacy?

NAC 639.523
NAC 639.487

Yes No

Enter the date of the last biennial inventory?

NRS 453.246

Is the documentation of the biennial inventory complete?

21 CFR 1304.11

Yes No

(Signed, Dated, and time inventory completed listed on form)

Is the perpetual inventory updated immediately at the time of dispensing and/or receipt of the controlled substance(s)?

NAC 639.485
NRS 453.246

Yes No

Are you complying with the current reporting requirements of the Controlled Substance Task Force (PMP)?

NAC 639.926

Yes No

Prescription Monitoring Program
985 Damonte Ranch Parkway Suite 206, Reno NV 89521 Phone: 775-687-5694
Email: pmp@pharmacy.nv.gov
Do all controlled substance prescriptions contain the additional elements as required by AB474?

- ICD-10 diagnosis code for the disease being treated with the CS;  
  - Yes  
  - No

- Patient’s date of birth;  
  - Yes  
  - No

- The day’s supply of the medication as indicated and determined by the practitioner;  
  - Yes  
  - No

- Practitioner’s DEA number. If the prescription blank lists multiple preprinted practitioners, the prescriber must clearly indicate his or her DEA registration number. The DEA registration number cannot be added by the pharmacy.  
  - Yes  
  - No

Pharmacy manager start date: ________________________________
(if changed since last inspection)

Controlled substance inventory for change of manager completed?  
(if changed since last inspection) (must be completed within 48 hours and signed by current and prior pharmacy manager)  
  - Yes  
  - No

  Date inventory was taken: ________________________________

How are non-child resistant cap requests documented and maintained? (circle) (electronic) (handwritten)  
  - Yes  
  - No

SECURITY

Does any person other than authorized pharmacy staff have access to the pharmacy computer system? If yes, explain why in notes section.  
  - Yes  
  - No

Does any person other than authorized pharmacy staff have access to any protected patient information? If yes, explain why in notes section.  
  - Yes  
  - No

Is the pharmacy secured to prevent unauthorized access? Only a Nevada licensed pharmacist may have a key, keypad code or other means of access/entrance into the pharmacy.  
  - Yes  
  - No

Is the door secured by a deadbolt or electronic lock?  
  - Yes  
  - No

Can the pharmacy area be closed from the remainder of the store to allow for different hours of operation?  
  - Yes  
  - No

Pharmacy alarm system provided by: ________________________________
  - Yes  
  - No
<table>
<thead>
<tr>
<th>STORE HOURS</th>
<th>PHARMACY HOURS</th>
<th>IF DIFFERENT FROM STORE HOURS</th>
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<tbody>
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<td>Monday thru Friday</td>
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<td>Holidays</td>
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<td>Holidays</td>
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</table>

Does the pharmacy routinely deliver prescriptions outside the local area on a regular basis?  
(If YES- list the toll-free number provided for patients to call the pharmacy for questions/counseling.)

Does the pharmacy have an internet website?  
If yes, what is the web address?

Does the pharmacy dispense prescription medications via the website/internet?  
If yes, is the pharmacy VIPPS (Verified Internet Pharmacy Practice Site) certified or received certification from the Nevada Board of Pharmacy?

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**PHARMACEUTICAL TECHNICIANS AND TECHNICIANS IN TRAINING**

(In service training records (CE) and technicians in training daily activity logs must be available on site for review by the inspector. Technicians and Technicians in Training are required to complete 1 hour of Nevada law CE for renewal.)

Does the pharmacy manager maintain documentation on site of at least 12 hours of in-service training that is required of each technician for registration renewal?

Note: Technician in service hours are audited every other year in the year following renewal of technician registrations (technicians must renew by November 1st of even years). Make sure technician in-service hours are current, organized and available for review. File old in-service records and law credits and only have the most current records available for review. Current PTCB or Institute for Certification of Pharmacy Technicians certification is accepted for the 11 hours of required general in-service hours. (Certification does not apply towards the 1-hour Nevada pharmacy law that is required on renewal).
Does the pharmacy manager maintain for each technician in training a daily training record?  
Note: Technician in Training daily activities logs are reviewed yearly. The log must contain the trainee’s full name, date, hours worked, activity and signoff of the pharmacist. Trainees are required to have 1 hour of Nevada law in addition to their daily log. Trainees do not have to complete in service hours (CE) until licensed as a technician.  

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>NAC 639.240</td>
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<td>NAC 639.254</td>
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</table>

Written documentation of completion of the orientation and training that demonstrates competency is available for review.  

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<tr>
<th>Requirement</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>NAC 639.247</td>
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</table>

Does the pharmacy use a maximum of 3:1 technicians and technicians in training (in any combination) per each pharmacist working?  

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<tr>
<th>Requirement</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>NAC 639.250</td>
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Are all licensed personnel’s home and work address current with the Board? (The licensee and pharmacy must notify the Board within 10 days of a change of work or home address).  

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<tr>
<th>Requirement</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td>NRS 639.160</td>
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<td>NAC 639.540</td>
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<tr>
<td>NAC 639.225</td>
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IMMUNIZATION  
NRS 639.065 Annual report concerning immunizations administered by pharmacists. The Board shall prepare an annual report concerning immunizations administered by pharmacists. (NOTE: the question below is for reporting to the Board for inclusion in the annual immunization report as required by law not entry of data into WebIZ.)  

Do your pharmacists administer immunizations?  
(If this is a new pharmacy or you begin to administer vaccines, send an email to j.dodge@pharmacy.nv.gov stating you do provide immunizations and identify your store and contact information. In May of each year you will be contacted to provide data on immunizations administered. If centrally, please have the responsible person send an email to the above email address.)  

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<th>Requirement</th>
<th>Yes</th>
<th>No</th>
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Temperature logs as required by the CDC are available for review.  

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<tr>
<th>Requirement</th>
<th>Yes</th>
<th>No</th>
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Will the immunization data be reported by individual store or centrally?  
(circle)  
(If by individual store, please enter the store email and contact information of the person who will be provide data on immunizations to the Board. If centrally, please provide that person’s email and contact information.)  

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<thead>
<tr>
<th>Requirement</th>
<th>Individually</th>
<th>Centrally</th>
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</table>
Required reporting of vaccinations administered by pharmacists to Nevada WebIZ: If your pharmacists do administer immunizations you are required to register and record the immunizations in WebIZ.

Effective January 28, 2010 all ACIP recommended vaccinations administered to children and adults must be recorded in Nevada WebIZ. This means that patients of all ages who receive a vaccination must be entered in Nevada WebIZ. Some providers have thought that the law only applies to VFC (Vaccines for Children) vaccines. The law requires entry for all vaccines, regardless of patient age or payment method.

Individuals may “opt-out” by completing the Participation Form and the provider must mail or fax the form to the WebIZ program.

Are you reporting to WebIZ as required by Nevada Revised Statute? NRS 439.265  
Yes  No

Nevada State Health Division: WebIZ: 775-684-5954 or 1-877-689-3249 (toll free)

**ISMP General Guidelines**

Use more than one patient identifier when medications are picked up. (i.e. Name, Address, Phone Number, Date of Birth, Other)

Open the medication bottle and show the medication to the patient on all refill or new prescriptions that the pharmacist counsels on.

Arrange drug products that have similar or confusing manufacturer labeling, packaging, and/or drug names (that look or sound alike) to be clearly separated on shelves or have warnings.

Use a system to separate patient orders and keep multiple filled prescriptions for a patient together.

Write out all prescription information avoiding the use of error-prone abbreviations and dose designations on all phoned in scripts and notations in the computer.

Repeat back “echo” information to the practitioner or practitioner’s agent.

Say and repeat back numbers as digits “five zero milligrams rather than 50 milligrams”.

Nevada State Board of Pharmacy Self-Assessment Form 4/15/2019
Page 11 of 15
General guidelines related to receipt of prescriptions

**NAC 639.711 Transmission of prescription by facsimile machine** - Written prescriptions and faxed prescriptions, regardless of method of receipt via standalone fax, by a computerized fax queue or other fax method, require the handwritten signature of the prescribing practitioner. A prescription received via fax or written is not a legal prescription without a handwritten signature. A pharmacist must validate that a prescription received by fax in a computer fax queue has a handwritten signature and not an electronically signed signature.

**21 CFR 1306.05** A practitioner may sign a paper prescription in the same manner as he would sign a check or legal document (e.g., J.H. Smith or John H. Smith). Where an oral order is not permitted, paper prescriptions shall be written with ink or indelible pencil, typewriter, or printed on a computer printer and shall be manually signed by the practitioner. A computer-generated prescription that is printed out or faxed by the practitioner must be manually signed. (can’t be electronically signed).

**NAC 639.7105 Electronic transmission of prescription** - The electronic signature must be digitally signed with at least all the information required under part 1306, Prescriptions, of 21CFR. (e) - **21 CFR 1311** A prescription that is digitally signed with a practitioner’s private key may be transmitted to a pharmacy without the digital signature.
Remarks/Suggestions/Comments/Follow-up related to Inspection

INSPECTOR USE ONLY
1. If you are required to provide any documentation to the inspector via fax or email, attach a copy of the document(s) to this inspection form for future review on inspection.

2. If you are required to fax or email information, fax to 702-486-7903 for inspections completed by the Las Vegas Board office or 775-850-1444 for inspections completed by the Reno office.

3. If you are required to fill out a sterile or a non-sterile inspection form, refer to the remarks section of those forms for any additional remarks, suggestions, to do’s or citations.

I verify that by signing this document all personnel in the pharmacy have all current licensing, educational requirements met and that this pharmacy meets all state and federal laws.

__________________________________________
Pharmacist on duty (signature)                     Date

__________________________________________
Pharmacist on duty (print)

Inspector: __________________________________  Date Inspected_________________

Your pharmacy has been inspected by an agent of the Nevada State Board of Pharmacy. Conditions that require remedial action are listed in the remarks section above and they must be corrected within the time frame(s) stated to ensure compliance with laws and regulations governing the practice of pharmacy. I acknowledge that the noted unsatisfactory conditions have been explained to me and that I have received a copy of this Inspection report.