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APPLICATION BY RECIPROCATATION AS A PHARMACIST

If you are requesting licensure by reciprocatation (i.e. you have a current pharmacist license from another state and wish to transfer license information and only need to take the Nevada MPJE), complete this application:

Total Fee: \$330.00 (non-refundable, money order or cashier's check only, no cash)

Money Order or Cashier's Check made payable to: Nevada State Board of Pharmacy

Complete Name (no abbreviations):

First: Sheila Middle: Damaris Last: Colón

Mailing Address: N. Albion St.

City: Denver State: CO Zip Code: 80220

Telephone: _____ E-mail Address: _____

Date of Birth: _____ Place of Birth: Ponce, Puerto Rico

Social Security Number: _____ Sex: M or F
(Full Number Required)

Original State of Licensure you are reciprocating from must be active and issued by exam;

State: CA - RPH62205 Date of Issuance: 2/11/09

College of Pharmacy Information

Graduation Date: 04/27/08
(mm/dd/yy)

Degree Received: PharmD BS in Pharmacy Other (check one)

Name of Pharmacy School: Florida A+M University

Location of School: Tallahassee, FL.

If you are a **foreign graduate** you must attach a copy of your FPGE certificate to THIS APPLICATION. You also need to complete the college of pharmacy information

Board Use Only

Processed: AUG 13 2019 Amount: 330.00 Entity #: _____

Email _____ MPJE _____

Other states where you are (or were) licensed as a pharmacist or print "none"

State	Lic #	Is the license active?	State	Lic #	Is the license active?
<u>FL</u>	<u>PS53262</u>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	<u>CO</u>	<u>PHA.00022620</u>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
_____		Yes <input type="checkbox"/> No <input type="checkbox"/>			Yes <input type="checkbox"/> No <input type="checkbox"/>

**Attach separate sheet if needed

Have you ever served in the military, either active, reserve or retired? Yes No

Branch: N/A

Military Occupation/Specialty: N/A

Dates of Service: N/A

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

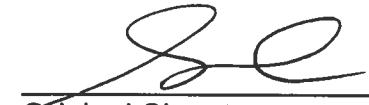
						Yes	No	
Been diagnosed or treated for any mental illness, including alcohol or substance abuse, or physical condition that would impair your ability to perform the essential functions of your license?.....							<input type="checkbox"/>	<input checked="" type="checkbox"/>
1. Been charged, arrested or convicted of a felony or misdemeanor in <u>any</u> state?.....							<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Been the subject of a board citation or an administrative action or board citation 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 type="checkbox"/>	<input checked="" type="checkbox"/>
If you marked YES to any of the numbered questions (1-3) above, include the following information & provide an explanation & documentation: <u>Please see provided documents for 2 citations: 1. CI 2016 72525 +</u>								
Board Administrative Action:		State	Date:	Case #:				
<u>Board of Pharmacy</u>		<u>CA</u>	<u>10/24/16</u>	<u>CASE #1: CI 2016 72525</u>				
		<u>CA</u>	<u>12/13/18</u>	<u>CASE #2: CI 2013 80874</u>				
Criminal Action:	State	Date:	Case #:	County	Court			
		<u>/ /</u>						
<u>FEDERALLY MANDATED REQUIREMENTS</u>								
In response to Federally mandated requirements, the Nevada Legislature and Attorney General require that we include this questions as part of all applications.								
4. Are you the subject of a court order for the support of a child?.....							Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
4a. If you marked Yes. to the question 4. are you in compliance with the court order?.....							Yes <input type="checkbox"/>	No <input type="checkbox"/>

I have read all questions, answers and statements and know the contents thereof. I hereby certify, under penalty of perjury, that the information furnished on this application are true, accurate and correct. I hereby authorize the Nevada State Board of Pharmacy, it's agents, servants and employees, to conduct any investigation(s) of my business, professional, social and moral background, qualification and reputation, as it may deem necessary, proper or desirable.

No liability of any sort or kind shall attach to the said Nevada State Board of Pharmacy, it's members, servants or employees because or by reason of the use of the authorization.

I attest to knowledge of and compliance with the guidelines of the Centers for Disease Control and Prevention concerning the prevention of transmission of infectious agents through safe and appropriate injection practices.

I understand that Nevada law requires a licensed pharmacist who, in their professional or occupational capacity, comes to know or has reasonable cause to believe, a child has been abused/neglected, to report the abuse/neglect to an agency which provides child welfare services or to a local law enforcement agency.



Original Signature, no copies or stamps accepted

7/18/19

Date

**California State Board of Pharmacy**

1625 North Market Boulevard, Suite N219, Sacramento, CA 95834
Phone (916) 574-7900
Fax (916) 574-8618
www.pharmacy.ca.gov

BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY
DEPARTMENT OF CONSUMER AFFAIRS
GOVERNOR EDMUND G. BROWN JR.

December 21, 2016

SHEILA DAMARIS COLON
N. VERDUGO ROAD
GLENDALE, CA 91208

RE: CI 2016 72525
SHEILA DAMARIS COLON
RPH 62205

This is in response to the administrative fine provided to the board for the above referenced citation. The payment has been received and accepted as satisfactorily resolving the matter.

Please be advised that this citation has become a part of the board's records and constitutes a public record for purposes of disclosure.

If you have any questions regarding this matter, please contact the Enforcement Analyst, Ericka Busby at (916) 574-7731.

Sincerely

A handwritten signature in cursive script that reads "Virginia Herold".

Virginia Herold
Executive Officer
Board of Pharmacy

**BOARD OF PHARMACY
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

CITATION AND FINE

Citation Number CI 2016 72525	Name, License No. SHEILA DAMARIS COLON, RPH 62205
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JURISDICTION: Bus. & Prof. Code § 4314; CCR, title 16, § 1775; Bus. & Prof. Code § 4113 subd. (c)		
VIOLATION CODE SECTION	OFFENSE	AMOUNT OF FINE
CCR, Title 16, § 1751.7 subd. (c)	Batch produced sterile injectable drug products compounded from one or more non-sterile ingredients shall be subject to documented end product testing for sterility and pyrogens and shall be quarantined until the end product testing confirms sterility and acceptable levels of pyrogens	\$1,000.00
Health & Safety Code § 111250/Health & Safety Code § 111295	Any drug or device is adulterated if it consists, in whole or in part, of any filthy, putrid, or decomposed substance/It is unlawful for any person to manufacture, sell, deliver, hold, or offer for sale any drug or device that is adulterated	\$1,000.00

CONDUCT:

California Code of Regulation Section 1751.7(c):

PIC Colon at Anatomy Pharmacy, located at 1544 Purdue Ave, Los Angeles, CA 90025, was not compliant. Specifically, on 04/26/2016, at least the following batch-produced sterile injectable products compounded from one or more non-sterile ingredients had no documented testing for sterility and pyrogens and were dispensed, not quarantined until the end product testing confirmed sterility and acceptable levels of pyrogens:

Compounded Sterile Injectable Product	Lot Number
Energy Cocktail Injection Exp: 05/2016	2025
Super B Complex Injection Exp: 09/2016	2011
Super Shot Injection Exp: 04/2016	2020

These are violations of Pharmacy Law.

California Health & Safety Code 111250 as related to California Health & Safety Code Section 111295:

PIC Colon at Anatomy Pharmacy, located at 1544 Purdue Ave, Los Angeles, CA 90025, was not compliant. Specifically, during the pharmacy inspection on 04/26/2016, the following adulterated drugs were found to be offered for sale, held or sold at Anatomy;

- Oxytocin Injection 10 iu/ml Lot #2001 which expired on 01/2016 held and offered for sale.
- Compounding using expired ingredients adulterating all compounds, all offered for sale, held or sold at Anatomy.

CSP name and expiration dated listed on the bottle	Lot Number	Compounding Record (CR) Review / Dispensing Records
Alprostadil Injection 60mcg/ml Exp: 08/2016 (found inside the refrigerator)	2013	-Active ingredients listed in CR (mannitol) expired on 06/2014. -Active ingredient listed in CR (bacteriostatic water) expired on 03/2016.
Methylcobalamine (vitamin B12) Injection 1000 mcg/ml Exp: 09/2016	2006	-Active ingredient listed in CR (pyridoxin) expired on 04/2016. -Active ingredient listed in CR (bacteriostatic water) expired on 03/2016.
Super Shot Injection 30 ml Exp: 08/2016	2000	-Active ingredient listed in CR (choline chloride) expired on 03/11/2016. -Active ingredient listed in CR (dexpanthenol) expired on 02/28/2016. -Active ingredient listed in CR (bacteriostatic water) expired on 02/01/2016. -Active ingredient listed in CR (thiamine) expired on 03/30/2015. -Active ingredient listed in CR (l-carnitine) expired 05/31/2016.

These are violations of Pharmacy Law.

CITATION ISSUED ON: October 24, 2016

TOTAL AMOUNT OF FINE(S): \$2,000.00

PAYMENT OF FINE(S) DUE BY: November 23, 2016

**California State Board of Pharmacy**

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BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY
DEPARTMENT OF CONSUMER AFFAIRS
GOVERNOR EDMUND G. BROWN JR.

December 13, 2018

DATED MATERIAL ENCLOSED

SHEILA DAMARIS COLON
N. ALBION ST.#443
DENVER, CO 80220

**RE: CI 2018 80874
SHEILA DAMAP'S COLON
RPH 62205**

As a result of the explanation and information you provided at the office conference, the amount of the fines assessed in Citation and Fine, CI 2018 80874 have been reduced.

The modified Citation is attached and is hereby issued pursuant to California Code of Regulations, title 16, section 1775.4, subdivision (d).

No fine has been assessed with this citation and no proof of abatement has been ordered.

If the Board does not receive a written request to appeal this citation within 30 days of the issue date, you will be deemed to have waived your right to appeal this citation. The Citation shall then become the final order of the Board. Please be advised that if not appealed this citation will become a part of the board's records and constitute a public record for purposes of disclosure.

If you have any questions regarding this Citation please contact Jennifer Sevilla at (916) 574-7925.

Sincerely

A handwritten signature in cursive script that reads "Virginia Herold".

Virginia Herold
Executive Officer
Board of Pharmacy

Attachments

**BOARD OF PHARMACY
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

MODIFIED CITATION

Citation Number CI 2018 80874	Name, License No. SHEILA DAMARIS COLON, RPH 62205
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JURISDICTION: Bus. & Prof. Code § 4314; CCR, title 16, § 1775; Bus. & Prof. Code § 4113 subd. (c)	
VIOLATION CODE SECTION	OFFENSE
Bus. & Prof. Code § 4059.5 subd. (a)	Dangerous drugs and devices may only be ordered by... and shall be delivered to licensed premises and signed for and received by a pharmacist...

CONDUCT:

Business and Professions Code 4059.5(a) states dangerous drugs or dangerous devices may only be ordered by an entity licensed by the board and shall be delivered to the licensed premises and signed for and received by a pharmacist. Specifically, from 6/24/16 to 7/13/16 while Sheila Colon (RPH 62205) was the pharmacist-in-charge, www.precisionmeds.com (PHY 54403) located at 638 E. Colorado Blvd. #202, Pasadena, CA 91101, purchased dangerous drugs from drug wholesaler Capital Wholesale Drug (OSD 4902) located at 873 Williams Ave., Columbus, OH, 43212. However, the investigation revealed the dangerous drug deliveries were not signed for or received by a pharmacist. This was a violation of Business and Professions Code 4059.5(a).

Date	Invoice#	Drug	Quantity	Received By
6/24/16	541482	Lipitor 80mg	1	Paul Durelli (non-RPH)
7/13/16	545388	Viagra 100mg	1	Joe Reno (non-RPH)

CITATION ISSUED ON: December 13, 2018