

COMMONWEALTH OF MASSACHUSETTS
Board of Registration in Pharmacy

NOTICE OF THE REGULARLY SCHEDULED MEETING OF THE
BOARD OF REGISTRATION IN PHARMACY

January 11, 2024

The regular session is open to the public by video or phone.

Join link:

<https://eohhs.webex.com/eohhs/j.php?MTID=ma2596b6ca2bf080e74f1f846842cf2fe>

Webinar number:
2534 486 7342

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Access code: 253 448 67342

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Agenda

Time	#	Item	Page	
8:00	I	CALL TO ORDER		K. Thornell
8:02	II	APPROVAL OF AGENDA		
8:05	III	APPROVAL OF BOARD MINUTES <ul style="list-style-type: none">Draft of December 7, 2023, Regular Session Minutes		
8:10	IV	REPORTS <ul style="list-style-type: none">Applications approved pursuant to Licensure Policy 13-01Monthly report from ProbationBoard Delegated Review pursuant to Licensure Policy 14-02PSUD Report-Policy 17-03Research Drug Study report pursuant to Staff Action Policy 18-02		

8:15	V	FLEX <ul style="list-style-type: none"> NABP Annual Meeting; May 14-17, 2024, Fort Worth, TX Discussion of compounding 	D. Sencabaugh
8:20	VI	APPLICATIONS <ul style="list-style-type: none"> Cardinal Health – New Wholesale Distributor Dimock Pharmacy- Transfer of Ownership Lynn Community Health – Transfer of Ownership Health Care Technology – WD522- Renovation BWH Outpatient Pharmacy – New Retail Pharmacy MGH Outpatient Pharmacy – New Retail Pharmacy Reliant Care Solutions – New Retail Pharmacy Central Pharmacy – Transfer of Ownership Athol Pharmacy – Transfer of Ownership Chair City Pharmacy – Transfer of Ownership 	
9:20	VII	POLICIES <ul style="list-style-type: none"> Policy 2024-01: Naloxone Dispensing Policy 2019-02: Automated Dispensing Device Use Policy 2018-01: Permitted Prescription Changes and Additions Rescission of Policy 17-02: Staff Action Approval of Pharmacy Technician Training Programs and Examinations 	M. Chan
9:30	VIII	REGULATION <ul style="list-style-type: none"> 247 CMR 22.00: Monetary Penalties 	
9:45	IX	VIOLATION OF STAYED PROBATION <ul style="list-style-type: none"> CVS #1015 DS1534 PHA-2022-0076 	K. Fishman
10:00	X	RECONSIDERATION <ul style="list-style-type: none"> The Hilsinger Company Parent LLC, DBA Hilco Vision, PHA-2021-0053, WD517 	
	XI	RECONSIDERATION <ul style="list-style-type: none"> Domenico Carbone, PH16514; PHA-2023-0142 	

10:15	XII	FILE REVIEW			
		1	CASE-2023-0456	PHA-2023-0206	Beacon Pharmacy, DS15362
		2	CASE-2023-0456	PHA-2023-0207	Garry Levitsky, PH15889
		3	CAS-2023-0934	PHA-2023-0196	Optum Infusion Services, DS90100
		4	CAS-2023-0596	PHA-2023-0173	Stop & Shop #45, DS1754
		5	CAS-2023-0418	PHA-2023-0176	Stop & Shop #64, DS90161
		6	CAS-2022-1376	PHA-2022-0207	Nephron SC, Inc, NO00036
		7	CASE-2023-1126	PHA-2023-0222	CVS #2177, DS2723
		8	CAS-2023-1131	PHA-2023-0188	CVS #8, DS2926
		9	CAS-2023-1134	PHA-2023-0191	CVS #634, DS2725
		10	CASE-2023-0488	PHA-2023-0227	CVS #11266, DS89870
		11	CASE-2023-1036	PHA-2023-0229	CVS #1945, DS3485
		12	CAS-2023-0662	PHA-2023-0213	CVS #1859, DS2945
		13	CAS-2023-1132	PHA-2023-0189	CVS #708, DS2706
		14	CAS-2023-0937	INV8784	Alana DeSimone, PH239781
		15	CAS-2023-1130	PHA-2023-0192	CVS #7109, DS89836
16	CAS-2023-1100	PHA-2023-0187	CVS #2138, DS2815		
12:00	LUNCH BREAK				
12:30	XIII	EXECUTIVE SESSION The Board will meet in Executive Session as authorized pursuant to M.G.L. c. 30A, § 21(a)(1) for the purpose of discussing the reputation, character, physical condition, or mental health, rather than professional competence, of an individual, or to discuss the discipline or dismissal of, or complaints or charges brought against, a public officer, employee, staff member or individual. Specifically, to review a recommendation for suspension, and to evaluate the Good Moral Character as required for registration for a pending applicant.			
1:30	XIV	M.G.L. c. 112, § 65C SESSION			
4:00	XV	ADJOURNMENT			

**COMMONWEALTH OF MASSACHUSETTS
BOARD OF REGISTRATION IN PHARMACY**

**MINUTES OF THE GENERAL SESSION
Via Remote WebEx Meeting
January 11, 2024**

Board Members Present

Katie Thornell, RPh, MBA President
Caryn Belisle, RPh, MBA
Johanna Lopez, MS
Dr. Richard Lopez, MD
Sebastian Hamilton, Pharm D, MBA, RPh
John Rocchio, RPh, PharmD
Sami Ahmed, PharmD., RPh, BCPS, BCSCP President Elect
Rita Morelli, PharmD, BCACP, RPh Secretary
Delilah Barnes, RPh
Dawn Perry, JD
Mark Sciaraffa, CPhT
Julie Dorgan, RN

Board Members Not Present

Board Staff Present

David Sencabaugh, RPh, Executive Director
Monica Botto, Associate Executive Director
Jacqueline Petrillo, PharmD, RPh, JD, Board Counsel
Michael Egan, JD, Board Counsel
William Frisch, RPh Director of Pharmacy Compliance
Michelle Chan, RPh, Quality Assurance Pharmacist
Richard Harris, Program Analyst
Joanna Chow, Program Analyst
Taylor Lee, Office Support Specialist
Joanne Trifone, RPh, Director of Investigations
Gregory Melton, JD, PharmD, BCPS, Investigator
Julienne Tran, RPh PharmD, Investigator
Christina Mogni, RPh, Investigator
Keith Johnston, Compliance Office
Joshua Kim, Pharmacy Intern

TOPIC I. Attendance by roll call:

CALL TO ORDER 8:03 AM

A quorum of the Board was present, established by roll call. President Katie Thornell chaired the meeting and explained that the Board of Pharmacy was recording the meeting.

Roll call attendance: C. Belisle, yes; S. Hamilton, yes; D. Barnes; J. Rocchio, yes; M. Sciaraffa, yes; R. Lopez, yes; S. Ahmed, yes; R. Morelli, yes; J. Lopez, yes; J. Dorgan, yes. D. Perry, yes; K. Thornell, yes.

Topic II. **Approval of Agenda** **TIME 8:05 AM**
Agenda: 01/11/24

DISCUSSION: PHA-2022-0207; Nephron SC, Inc, NO00036 is deferred
Lynn Community Health will be a New Retail Pharmacy applicant.

ACTION:

Motion by C. Belisle, seconded by D. Barnes and voted unanimously by those present to approve the agenda with the noted changes by roll call vote.

Topic III **Approval of Board Minutes** **TIME: 8:06 AM**

Minutes

1. Draft 12/7/23

Change: No changes

Action:

Motion by R. Lopez seconded S. Ahmed and voted unanimously to approve the regular session minutes of 12/7/23 with no noted changes by roll call vote.

Topic IV. **REPORTS**

Applications approved pursuant to Licensure Policy 13-01 **TIME: 8:07 AM**

PRESENTED BY: M. BOTTO

DISCUSSION: R. Harris reported a total of 36 Change of Manager applications and 3 facility closures that have been approved via Staff Action since the December 7th Board meeting.

So noted.

Topic IV. **REPORTS**

Monthly Report from Probation **TIME: 8:07 AM**

PRESENTED BY: M. BOTTO

DISCUSSION: R. Harris indicated 1 licensee was given the opportunity to cure in addition to 3 issuances of final notice by Board counsel since the December 7th Board meeting.

So noted.

Topic IV.

REPORTS

Monthly Report from BDCR pursuant to Policy 14-02

TIME: 8:08 AM

PRESENTED BY: M. BOTTO

DISCUSSION: D. Sencabaugh indicated 2 specific deficiency cases, each of which were issued a reprimand. This included unlicensed practice and an instance of a Change in Manager of Record violation. 1 CE discrepancy was closed with no discipline warranted: remediation complete.

So noted.

Topic IV.

REPORTS

PSUD report by Staff Action 17-03

TIME: 8:08 AM

PRESENTED BY: M. BOTTO

DISCUSSION: M. Botto indicated no new changes to report since the last Board meeting.

So noted.

Topic IV.

REPORTS

Research Drug Study report pursuant to Staff Action Policy 18-02

TIME: 8:08 AM

PRESENTED BY: M. CHAN

DISCUSSION: M. Chan reported 2 pharmacies dispensing of investigational drug study drugs. Currently, there are 14 active studies, 5 of which involve investigational drugs.

So noted.

TOPIC V

FLEX

1. NABP Annual Meeting; May 14-17, 2024, Fort Worth, TX

Time: 8:09 AM

Presented by: David Sencabaugh

Recusal: none

Discussion:

- At the February BORP meeting a delegate and alternate will be nominated to attend the NABP Annual Meeting on 5/14/24/to 5/17/24 in Texas as BORP representatives.

2. Discussion of compounding
Presented by: David Sencabaugh, William Frisch
Recusal: none

Time: 8:10 AM

Discussion:

- Revision to USP 795 and USP 797 effective November 2023 has resulted in inquiries concerning the changes
- Dave stated the BORP's expectation is that retail pharmacies are to continue to perform USP 795 compounding including First kits per 247 CMR 9.01(16)
- Bill indicated that the revised USP 795 is geared toward pharmacies with USP 795 compounding as their core business model. BORP staff will be providing guidance for retail pharmacies.

TOPIC VI

APPLICATIONS

1. Cardinal Health

New Wholesale Distributor

Time: 8:16 AM

Represented by: Cheryl Davis, Keegan Chamberlain
Recusal: none

Discussion:

- Pages 29 to 59 of the General Session Packet
- New WD to be located in Boylston, MA
- Will not have federally controlled CII-CV medications

Action: An amended vote was taken at 8:55am - A motion was made by D. Barnes to approve Cardinal Health's application for a new wholesale distributor pending a successful inspection; Seconded by C. Belisle then Board Members present voted unanimously by roll call to approve motion.

2. Dimock Pharmacy

Transfer of Ownership

Time: 8:19 AM

Represented by: Mariebelle Elkhoury
Recusal: David Sencabaugh, John Rocchio

Discussion:

- Pages 60 to 65 of the General Session Packet
- 340B and retail pharmacy at the Dimock Center in Roxbury is currently owned and operated by CVS Pharmacy.
- CVS is terminating their lease and will end onsite operations in April 2024.

Action: An amended vote was taken at 8:55am - A motion was made by D. Barnes to approve Dimock Pharmacy's application for a transfer of ownership pending a successful inspection; Seconded by C. Belisle then Board Members present voted unanimously by roll call to approve motion.

3. Lynn Community Health**New Pharmacy****Time: 8:24 AM****Represented by: Diane Martin, Ron Lanton****Recusal: David Sencabaugh, John Rocchio****Discussion:**

- Pages 66 to 74 of the General Session Packet
- CVS currently owns and operates Eaton Apothecary in Peabody which serves PACE patients who use compliance packaging and other patients
- On 1/12/2024, operations for the PACE patients will transfer to Lynn Community Health to ensure a continuity of care for those patients
- Eaton Apothecary staff were hired and the same computer system will be used to process prescriptions
- Until the pharmacy is issued a new DEA registration, all controlled substances will be filled by Lynn Community Health Pharmacy in Lynn

Action: An amended vote was taken at 8:55am - A motion was made by C. Belisle to approve Lynn Community Health Pharmacy's application for a new pharmacy pending a successful inspection; Seconded by J. Lopez then Board Members present voted unanimously by roll call to approve motion.

4. Health Care Technology, WD522**Renovation****Time: 8:32 AM****Represented by: Jenny Morey, Tim Mottahed****Recusal: none****Discussion:**

- Pages 75 to 77 of the General Session Packet
- Proposed change is to open the wall to access the space next to the door and expand the warehouse for additional storage space
- Wholesaler distributes saline flushes and heparin flushes

Action: A motion was made by D. Barnes to approve Health Care Technology's application for a renovation pending a successful inspection; Seconded by J. Lopez then Board Members present voted unanimously by roll call, except for John Rocchio who abstained, to approve motion.

5. BWH Outpatient Pharmacy**New Retail Pharmacy****TIME 8:37 AM****Represented by: Rita****Recusal: Belisle, Ahmed, Sciaraffa, Dorgan**

Discussion: Applying for a new retail pharmacy with waivers. Brief summary: BWH outpatient has been operating under a hospital licensed for 30 years. Looking for a retail pharmacy license to better service the community. The 2 waivers requested are for the sign affixed at the front of business 247CMR 6.02 (8) and other for the balanced scale 247 CMR 6.01(5)(a)4 for the balance

Applicants will need to change/transition their inventory from a clinic inventory to a retail inventory. Board staff asks that this is added as a condition of the motion

Action: Motion by S. Hamilton, seconded by D. Barnes, voted unanimously by those present to approve application pending a successful inspection and a satisfactory plan to transition from a hospital inventory to a retail inventory, and the requested waivers

6. MGH Outpatient Pharmacy

New Retail Pharmacy

TIME 8:43 AM

Represented by: Erin Stack,

Recusal: Belisle, Ahmed, Sciaraffa, Dorgan

Discussion: Requesting a new retail pharmacy application. Currently, MGH has a clinic license and have had one for over 25 years. MGH believes that having a retail license would better increase access to patients. Additionally, MGH is applying for two waivers as well:

- 1) the sign affixed at the front of business 247CMR 6.02 (8) and
- 2) The balanced scale 247 CMR 6.01(5)(a)4

Board staff also noted that there would need to be a plan to transition inventory and a successful inspection

Action: Motion by D. Barnes, seconded by R. Rocchio, voted unanimously by those present to approve application pending a successful inspection and inventory transition plan.

D. Perry leaves meeting at 8:50 AM

S. Hamilton leaves meeting at 8:50 AM

7. Reliant Care Solutions

New Retail Pharmacy

TIME 9:10 AM

Represented by: Jason Barrett

Recusal:

Discussion:

A closed door p[pharmacy that is focused on the underserved populations. Their goal is to reduce the burden of care for patients. They are planning to offer packaging for patients who need a higher level of care and for those who are, blind, deaf, both blind and deaf.

247 9.01 16

Action: Motion by C. Belisle, seconded by D. Barnes, voted unanimously by those present to approve application pending a successful inspection.

8. Central Pharmacy

Transfer of Ownership

TIME 9:01 AM

Represented by: Steve MacNeill

Recusal: Frisch

Discussion: Central Pharmacy, in addition to Athol Pharmacy and Chair City Pharmacy, are looking to transfer ownership and merge with Injured Workers Pharmacy. The expectation of this merger is to increase the Injured Workers Pharmacy portfolio, and there are no plans in place that would change the way in which Central Pharmacy, Athol pharmacy, or Chair City Pharmacy would operate.

Sami noted that when reviewing the application, it looks like that there was nothing checked off for “previous action” for Central Pharmacy. Steven noted that there was confusion on his end when completing the application. Once the confusion was rectified, they sent an updated and completed application.

Action: Motion by D. Barnes seconded by R. Lopez voted unanimously by those present to approve application pending a successful inspection.

9. Athol Pharmacy

Transfer of Ownership

TIME 9:01 AM

Represented by: Steve MacNeill

Recusal: Frisch

Discussion: See Central Pharmacy Discussion

Action: Motion by J. Lopez seconded by C. Belisle voted unanimously by those present to approve application pending a successful inspection.

10. Chair City Pharmacy

Transfer of Ownership

TIME 9:01 AM

Represented by: Steve MacNeill

Recusal: Frisch

Discussion: See Central Pharmacy Discussion

Action: Motion by S. Ahmed seconded by J. Rocchio voted unanimously by those present to approve application pending a successful inspection.

TOPIC VII

POLICIES

1. Policy 2024-01: Naloxone Dispensing

Time: 9:31 AM

Presented by: M. CHAN

Discussion: Now that OTC naloxone is available, the policy has been updated to explain that the standing order may still be used to dispense naloxone products using insurance. A link to the new standing order that contains all available prescription and OTC products was added as well.

Action: Motion by S. AHMED, seconded by J. ROCCHIO, and voted unanimously by roll call of those present, to approve the new, updated policy.

2. Policy 2019-02: Automated Dispensing Device Use

Time: 9:32 AM

Presented by: M. CHAN

Discussion: DPH requires the use of ADDs for Hospice Inpatient Facility acute use, so it has been added to this policy for completeness.

Action: Motion by D. BARNES, seconded by C. BELISLE, and voted unanimously by roll call of those present, to approve the edits to the policy.

3. Policy 2018-01: Permitted Prescription Changes and Additions

Time: 9:33 AM

Presented by: M. CHAN

Discussion: Updates to this policy now allow pharmacists to add flavoring agent information to Schedule VI prescriptions without first having to contact the prescriber.

Action: Motion by J. LOPEZ, seconded by R. MORELLI, and voted unanimously by roll call of those present, to approve the edits to the policy.

4. Rescission of Policy 17-02: Staff Action Approval of Pharmacy Technician Training Programs and Examinations

Time: 9:35 AM

Presented by: M. CHAN

Discussion: The procedure has changed with a new policy in place, so this staff action policy is no longer needed.

Action: Motion by C. BELISLE, seconded by J. LOPEZ, and voted unanimously by roll call of those present, to rescind the policy.

TOPIC VIII

REGULATION

247 CMR 22.00: Monetary Penalties

Time: 9:36 AM

Presented by: W. FRISCH and M. CHAN

Discussion: Language edits have been made for clarity.

Action: Motion by J. ROCCHIO, seconded by S. AHMED, and voted unanimously by roll call of those present, to forward the document for administrative review and approval to hold a public hearing.

TOPIC IX

VIOLATION OF STAYED PROBATION

CVS #1015 DS1534 PHA-2022-0076

Time: 9:45 AM

Presented by: Karen Fishman

Recusal: Rocchio

Discussion: KAREN FISHMAN explained that CVS #1015 entered into a consent agreement with BORP on May 23, 2023 for a one-year stayed probation with terms and conditions including the control substance protocol for all benzodiazepines to resolve complaint no. PHA-2022-0076 involving an unknown loss of 425 lorazepam 0.5mg tablets. FISHMAN then notified BORP that CVS #1015 violated the terms of the probation after a plan of correction was issued during a retail compliance inspection on November 29, 2023 for unresolved temperature excursions and incurring an unknown loss of 477 zolpidem 10mg tablets reported on November 9, 2023. FISHMAN next recommended that BORP find CVS #1015 in violation of the stayed probation then lift the stay and extend probation for one-year with the addition of all zolpidem products to the control substance loss protocol.

Action: DELILAH BARNES motioned to find CVS #1015 in violation of the consent agreement for stayed probation, lift the stay on probation, extend the period of the disciplinary probation to May 23, 2025 with the same terms and conditions, and add all zolpidem products to the control substance loss protocol. Seconded by CARYN BELISLE then Board Members present voted unanimously by roll call to approve motion except for JOHN ROCCIO who recused and JOHANNA LOPEZ who left the meeting at 9:45am.

J. Lopez leaves meeting at 8:57 AM

TOPIC X

RECONSIDERATION

The Hilsinger Company Parent LLC, DBA Hilco Vision, PHA-2021-0053, WD517

Time: 9:57 AM

Presented by: Jacqueline Petrillo

Recusal: None

Discussion: JACQUELINE PETRILLO explained that BORP voted during the October 15, 2021 Board Meeting to offer a consent agreement for a two-year probation to resolve complaint no. PHA-2021-0053. However, the agreement was lost to follow-up. In the interim, the business closed on December 7, 2022. PETRILLO recommended that BORP dismiss the complaint because the business closed.

Action: DELILAH BARNES motioned to dismiss the complaint because the business closed; Seconded by RITA MORELLI then Board Members present voted unanimously by roll call to approve motion except for JOHANNA LOPEZ who left the meeting at 9:45am.

TOPIC XI

RECONSIDERATION

Domenico Carbone, PH16514; PHA-2023-0142

Time: 10:04 AM

Presented by: Jacqueline Petrillo

Recusal:

Discussion: JACQUELINE PETRILLO explained that DOMENICO CARBONE self-disclosed that he failed to complete annual requirements for continuing education (CE) during 2021 and 2022. He then failed to remediate the 2021 and 2022 during 2023 as requested by BORP Staff. In the interim, CARBONE failed to complete annual CE for 2023 which he did not self-disclose. In total, CARBONE was deficient 20 contact hours in 2021, 17.25 contact hours in 2022, and 13.5 contact hours in 2023. PETRILLO recommended that BORP authorize a consent agreement for a six-month non-disciplinary stayed probation requiring CARBONE to complete 1:1 remediation of his CE deficiencies for 2021, 2022, and 2023.

Action: CARYN BELISLE motioned to refer the matter, to the Office of Prosecution for the issuance of an order to show cause and to authorize resolution of the matter by a consent agreement for a six-month non-disciplinary stayed probation with terms and conditions requiring licensee to complete 1:1 remediation of his CE deficiencies of 20 contact hours in 2021, 17.25 contact hours in 2022, and 13.5 contact hours in 2023; Seconded by DELILAH BARNES then Board Members present voted unanimously by roll call to approve motion except for JOHANNA LOPEZ who left the meeting at 9:45am.

TOPIC IX

FILE REVIEW

Case #1 /CASE-2023-0456

PHA-2023-0206

Beacon Pharmacy, DS15362

Time: 10:20 AM

RECUSAL: NONE

DISCUSSION: C. MOGNI presented and summarized the investigative report that pertained to this matter.

- Inspectional deficiency on 8/28/23 for unlicensed practice by PTT McMaster who was observed performing PT duties. The POC stated PTT McMaster was removed from the bench until after she was issued a license on 8/30/23.
- MOR Levitsky was not aware of the requirements for PTT licensure as he only trained one other technician about 8-9 years ago. PTT McMaster was hired on 5/22/23. The Pharmacy had no specific policy for tracking PTT hours but will now follow the requirements for a PTT. PTT McMaster had worked approximately 416 hours while unlicensed.

- PTT McMaster related she had performed prescription production, receiving and putting away non-controlled substance orders, pulling expired/soon to be expired medications from the shelves, inventory tracking for replenishment, and general cleaning and restocking of supplies while unlicensed.
- MOR Levitsky stated there was no intent on his part and he did not knowingly permit PTT McMaster to perform PT duties without being licensed.
- Going forward, any new hires will have their PTT license before beginning any technician related duties or training programs and the training program has been corrected to be compliant with the current requirements. MOR Levitsky attested a policy and procedure for a PTT program is in place at the Pharmacy. MOR Levitsky and Pharmacist Miller reviewed the guidelines for the PTT at the Pharmacy. MOR Levitsky reviewed 247 CMR 8 Pharmacy interns and technicians in its entirety.

ACTION: Motion by D. BARNES, seconded by C. BELISLE, and voted unanimously by those present, to refer the matter (PHA-2023-0206), to the Office of Prosecution for the issuance of an order to show cause and to authorize resolution of the matter by a consent agreement for REPRIMAND.

Case #2/CASE-23023-0456

PHA-2023-0207

Garry Levitsky, PH15889

Time: 10:24 AM

RECUSAL: NONE

DISCUSSION: C. MOGNI presented and summarized the investigative report that pertained to this matter.

- Inspectional deficiency on 8/28/23 for unlicensed practice by PTT McMaster who was observed performing PT duties. The POC stated PTT McMaster was removed from the bench until after she was issued a license on 8/30/23.
- MOR Levitsky was not aware of the requirements for PTT licensure as he only trained one other technician about 8-9 years ago. PTT McMaster was hired on 5/22/23. The Pharmacy had no specific policy for tracking PTT hours but will now follow the requirements for a PTT. PTT McMaster had worked approximately 416 hours while unlicensed.
- PTT McMaster related she had performed prescription production, receiving and putting away non-controlled substance orders, pulling expired/soon to be expired medications from the shelves, inventory tracking for replenishment, and general cleaning and restocking of supplies while unlicensed.
- MOR Levitsky stated there was no intent on his part and he did not knowingly permit PTT McMaster to perform PT duties without being licensed.
- Going forward, any new hires will have their PTT license before beginning any technician related duties or training programs and the training program has been corrected to be compliant with the current requirements. MOR Levitsky attested a policy and procedure for a PTT program is in place at the Pharmacy. MOR Levitsky and Pharmacist Miller reviewed the guidelines for the PTT at the Pharmacy. MOR Levitsky reviewed 247 CMR 8 Pharmacy interns and technicians in its entirety.

ACTION: Motion by S. AHMED, seconded by R. MORELLI, and voted unanimously by those present, to refer the matter (PHA-2023-0207), to the Office of Prosecution for the issuance of an order to show cause and to authorize resolution of the matter by a consent agreement for REPRIMAND.

RECUSAL: NONE

DISCUSSION: J. TRAN presented and summarized the investigative report that pertained to this matter.

- The Pharmacy failed to timely submit the mandatory biannual Sterile Compounding Reporting Form and Excel Spreadsheet for the compounded sterile products (CSP) Prescriptions for the following reporting periods: July - December 2020; January - June 2021; July - December 2021; January - June 2022; July - December 2022.
- MOR Donovan acknowledged her responsibility to submit the mandatory reports, noting that she did not become MOR at the Pharmacy until 01/25/2023. She was unaware that the previous MORs had not submitted the reports during their tenure until notified by BORP on 07/06/2023.
- MOR Donovan note several contributing factors that may have caused the failure to report, including a change in ownership in 2020, and the Pharmacy's dispensing software system having been updated in 2021 to a different version of the same platform with a different reporting functionality. On 09/14/2023. MOR Donovan submitted all the outstanding sterile compounding reports and product attestation reports.
- MOR Donovan noted that Optum has initiated a quarterly compliance reporting checklist. This will be conducted to ensure all required site reports have been submitted timely to the Board, including the bi-annual sterile compounding reports. Optum will also implement a checklist whenever there is a change in the Pharmacist in Charge to ensure reporting is up to date.

ACTION: Motion by C. BELISLE, seconded by D. BARNES, and voted unanimously by those present, to refer the matter (PHA-2023-0196), to the Office of Prosecution for the issuance of an order to show cause and to authorize resolution of the matter by a consent agreement for REPRIMAND.

Case #4

RECUSAL: K. THORNELL and J. LOPEZ recused and were not present for the vote or discussion in this matter.

DISCUSSION: G. MELTON presented and summarized the investigative report that pertained to this matter.

- On 04-24-2023, Investigator Brosnan discovered during a RCI that the pharmacy underwent a renovation without approval from BORP. Investigator Brosnan described that "there have been changes made to the pharmacy. Most of these were cosmetic, however a new door into the pharmacy was installed where there was no door before..." Accordingly, he then issued a POC. Investigator Brosnan included a request that S&S 45 complete and submit an application for renovation as part of the POC.
- CA/POC: S&S 45 submitted a renovation application after the inspection. S&S 45 explained that the initial plans for the remodel were cosmetic and did not require submission of a reno application. However, last minute changes were made to the remodel to the pharmacy door to enhance staff safety

after a robbery at another S&S Pharmacy which required submission of a reno application but did not happen due to the last-minute change. Going forward, S&S Construction and Rx Operations will work more closely and allow for more time for review of plans and submission of a remodel application to BORP.

ACTION: Motion by J. ROCCHIO, seconded by D. BARNES, and voted unanimously by those present, to refer the matter (PHA-2023-0173), to the Office of Prosecution for the issuance of an order to show cause and to authorize resolution of the matter by a consent agreement for REPRIMAND.

Case #5/CAS-2023-0418
PHA-2023-0176 Stop & Shop #64, DS0161 Time: 10:32 AM

RECUSAL: K. THORNELL and J. LOPEZ recused and were not present for the vote or discussion in this matter.

DISCUSSION: G. MELTON presented and summarized the investigative report that pertained to this matter.

- On August 23, 2022, Rx Operations self-disclosed that a PTT at S&S 64 worked with an expired license from August 5, 2023 to August 10, 2023. Rx Operations explained that S&S 64 was notified prior to the PTT’s license expiration on August 4, 2023 that they could not work as a PTT after that date. However, S&S 64 did not follow the guidance from Rx Operations and the PTT continued to work. Ultimately, when the violation was discovered, the PTT’s access to the dispensing system was revoked and the PTT duties were restricted to Pharmacy Clerk activities after August 10, 2023.
- S&S 64’s MOR acknowledged that Rx Operations notified them about the PTT’s license expiration. However, an extension request was not submitted in a timely manner, and he knowingly let the PTT continue to work with an expired license.
- CA: On August 22, 2023, the PTT was granted an expiration extension by BORP to August 4, 2024. The MOR also pledged to review “licenses... on a monthly basis to ensure all licenses are up to date” going forward.

ACTION: Motion by J. ROCCHIO, seconded by R. MORELLI, and voted unanimously by those present, to DISMISS the matter (PHA-2023-0176), No Discipline Warranted, Remediation Complete. A second motion was made by C. BELISLE, seconded by D. BARNES, and voted unanimously by those present, to open a complaint on MOR Adam Smith, PH234871.

Case #6/CAS-2022-1376
PHA-2022-0207 Nephron SC, Inc, NO00036 Time: N/A

DEFERRED

Case #7/CASE-2023-1126
PHA-2023-0222 CVS #2177, DS2723 Time: 10:37 AM

RECUSAL: J. ROCCHIO recused and was not present for the vote or discussion in this matter.

DISCUSSION: G. MELTON presented and summarized the investigative report that pertained to this matter.

- On August 11, 2023, CVS 2177 reported an unknown loss of loss of 72 Vyvanse (lisdexamfetamine) 40mg capsules (CII, 100 tablet stock bottle) discovered on July 24, 2023 “while completing an inventory count.” MOR Roope indicated that an extensive investigation including contacting patients who were dispensed Vyvanse was unsuccessful. She was unable to find the drug or determine a reason for the loss.
- MOR Roope wrote in RLCS supplemental information, “All C-II dispensing policy and procedures have been reviewed with the Pharmacists. This includes diligent inventory management, as well as back counting of all narcotics at the time of dispensing to ensure accuracy.” MOR Roope added in her response to the complaint, “I notified my District Leader, Shawna Amoroso, of the shortage and requested accountability with the floater involved. I reviewed the loss with my Staff Pharmacist, Andrew Lee. We continue to follow procedure and back count immediately after each prescription we fill...”

ACTION: Motion by S. AHMED, seconded by D. BARNES, and voted unanimously by those present, to refer the matter (PHA-2023-0222), to the Office of Prosecution for the issuance of an order to show cause and to authorize resolution of the matter by a consent agreement for REPRIMAND.

Case #8/CAS-2023-1131

PHA-2023-0188

CVS #8, DS2926

Time: 10:39 AM

RECUSAL: J. ROCCHIO recused and WAS not present for the vote or discussion in this matter.

DISCUSSION: G. MELTON presented and summarized the investigative report that pertained to this matter.

- On August 4, 2023, Investigator Seed learned from MOR Ngo that “there [was] an unresolved discrepancy for a return to stock for oxycodone 5mg #10 tablets” during an RCI. In turn, Investigator Seed issued a plan of correction (POC) to the pharmacy for the unresolved discrepancy.
- CA/POC: MOR Ngo indicated that the discrepancy was resolved after he determined that “we mistakenly dispensed 10 tablets of another manufacturer for the same narcotic strength to a customer. We have 2 manufacturers of the Oxycodone. 1 was over 10 tabs and the other was under 10 tabs. District Leader was able to get it all resolved. All individuals were contacted of the error and proper actions were taken. No true loss.” Of note, a dispensing incident report was filed.
- MOR Ngo then assured BORP that discrepancies for Schedule II controlled substances would be resolved as soon as possible or reported in accordance with BORP Policy 2022-01 going forward. In addition, CVS Health Regulatory Affairs added that the discrepancy did not need to be reported because the loss was deemed insignificant.

ACTION: Motion by C.BELISLE, seconded by R. MORELLI, and voted unanimously by those present, to DISMISS the matter (PHA-2023-0188), No Violation.

Case #9/CAS-2023-1134

PHA-2023-0191

CVS #634, DS2725

Time: 10:42 AM

RECUSAL: J. ROCCHIO recused and was not present for the vote or discussion in this matter.

DISCUSSION: G. MELTON presented and summarized the investigative report that pertained to this matter.

- On August 7, 2023, OPP Investigator Nathan Van Allen discovered documentation concerning an initial notification of loss transmitted internally to CVS corporate on February 9, 2023 which reported that 1 stock bottle of 100 oxycodone-APAP 5-325mg tablets was accidentally discarded in the trash when a shipment of a total of 5 bottles was being added to inventory. The report indicated that the incident was captured on surveillance video. A POC was issued based in part on the loss.
- CVS 634 in the POC and response to the complaint asserted that no loss occurred because the drug was confirmed to have been discarded in the trash. CVS 634 submitted a copy of a retraction of loss submitted to DEA to support this assertion. On the other hand, CVS 634 was unable to provide a copy of the video that showed the accident used to confirm the accidental discard.

ACTION: Motion by C. BELISLE, seconded by S. AHMED, and voted unanimously by those present, to refer the matter (PHA-2023-0191), to the Office of Prosecution for the issuance of an order to show cause and to authorize resolution of the matter by a consent agreement for REPRIMAND.

Case #10/CASE-2023-0488

PHA-2023-0227

CVS #11266, DS89870

Time: 10:46 AM

RECUSAL: J. ROCCHIO recused and was not present for the vote or discussion in this matter.

DISCUSSION: G. MELTON presented and summarized the investigative report that pertained to this matter.

- On August 28, 2023, Pharmacist Amy Sullivan, Director of Clinical Pharmacy Services at Lowell Community Health Center, reported that patients started on Suboxone (CIII, buprenorphine-naloxone) same day for induction at the facility's Office Based Addiction Treatment Program were "running into issues with picking up prescriptions at [CVS 11266]" because patients did not possess government-issued identification. Of note, patient specific details of the alleged incidents were not provided by Director Sullivan.
- CVS 11266 was notified about the complaint and provided references to regulations and guidance for dispensing federally controlled substances to patients without government-issued identification
- CA: In turn, CVS Health Pharmacy District Leader Muhammad Elswesy indicated that "105 CMR 700.012(A) was reviewed. The pharmacy manager and staff are now aware they can waive the ID in the future."

ACTION: Motion by R. MORELLI, seconded by D. BARNES, and voted unanimously by those present, to DISMISS the matter (PHA-2023-0227), No Discipline Warranted, Remediation Complete.

Case #11/CASE-2023-1036

PHA-2023-0229

CVS #1945, DS3485

Time: 10:49 AM

RECUSAL: J. ROCCHIO recused and was not present for the vote or discussion in this matter.

DISCUSSION: C. MOGNI presented and summarized the investigative report that pertained to this matter.

- RLCS for unknown loss of #534 lorazepam 0.5mg identified on 6/22/23 via corporate controlled substance monitoring. Interim MOR Violet confirmed cycle counts, biennial inventories, staffing schedules and inventory reports were reviewed. The cause of the loss remained unknown.
- DL Ali indicated the quantity loss is approximately that of a full stock bottle. She stated, "It is possible that the bottle was inadvertently discarded. There is no evidence of theft or diversion". DL Ali contended, "Shannon Hammond, the Divisional Diversion Manager, reviewed camera footage. The bulk of the variance occurred between 5/1/23 and 5/6/23 cycle counts. That period was reviewed on video from all available angles and nothing suspicious was noted. Camera coverage is limited".
- Conflicting documentation related to the loss was provided. The NDC Level Recon report for 4/30/23 to 7/13/23 showed a loss of 585 tablets. Cycle counts provided from 5/8/22 to 7/8/23 showed a loss of 534 tablets; from 4/20/23 to 7/8/23 showed a loss of 443 tablets; and from 05/01/23 to 7/8/23 showed a loss of 513 tablets.
- DL Ali stated, "Policies and procedures regarding controlled substance check ins and dispensing have been reviewed with the team". Page 12 of 21 of CVS ROPP-047561 Federal Regulations and CVS Pharmacy Guidelines for Controlled Substances was submitted that was signed and dated by the Pharmacy staff confirming review.

ACTION: Motion by S. AHMED, seconded by C. BELISLE, and voted unanimously by those present, to refer the matter (PHA-2023-0229), to the Office of Prosecution for the issuance of an order to show cause and to authorize resolution of the matter by a consent agreement for STAYED PROBATION for a period of 1 year, with special terms to include the CS Loss Protocol for all Benzodiazepines.

Case #12/CAS-2023-0662

PHA-2023-0213

CVS #1859, DS2945

Time: 10:53 AM

RECUSAL: J. ROCCHIO recused and was not present for the vote or discussion in this matter.

DISCUSSION: C. MOGNI presented and summarized the investigative report that pertained to this matter.

- Previously SA-INV-22567 heard on 9/6/23 - Allegation on 5/8/23 by PT DeBruyn the Pharmacy violated supervisory ratios by failing to consistently schedule 1:2 pharmacist to PT ratio and allowed pharmacy practice by unlicensed employees. PT DeBruyn gave notice on 4/26/23.
- On 5/9/23, Investigator Horn conducted an inspection and noted the Pharmacy was within supervisory ratio. The Pharmacy recently lost 1 FT technician and 3 PT technicians and was having difficulty covering budgeted hours.
- Sr. Analyst Furtado confirmed 4 technicians recently left employment including PT DeBruyn whose last date worked was 5/1/23. She related a new PT started on 8/5/23 and a PI started on 8/12/23. There is no CVS P&P for scheduling. CPhT Ryder is responsible for writing schedules using the mySchedule tool.
- MOR Shannon-Eckhardt stated to the best of his knowledge, the Pharmacy has not violated supervisory ratios or allowed pharmacy practice by unlicensed employees. He contended unlicensed personnel have only helped at the registers or provided customer service. According to documentation provided for 1/1/23-5/1/23, the Pharmacy exceeded supervisory ratios on 30 days from 1/3/23-4/25/23. PTT Kelley worked 8 days with a license that expired on 1/5/22. Two unlicensed employees worked in the Pharmacy on 2 days. Only 1 individual was identified on the schedule as a clerk/cashier.

- In response to the complaint, MOR Shannon-Eckhardt stated to the best of his knowledge the Pharmacy didn't exceed supervisory ratios. He and CPhT Ryder indicated excess scheduled staff worked as cashiers. Former MOR Cooper alleged PTT Kelly and the unlicensed employees all worked as cashiers.
- It was determined during the investigation the Pharmacy failed to submit a timely change of MOR application. DL Day stated the paperwork was submitted on 6/11/23 but it was lost in the mail. The issue was not identified until several months passed. The application was resubmitted on 9/28/23.
- MOR Shannon-Eckhardt will ensure the Pharmacy will not exceed supervisory ratios and designated cashiers will not perform PT duties. CPhT Ryder will ensure staff are scheduled within supervisory ratios.

ACTION: Motion by D. BARNES, seconded by S. AHMED, and voted unanimously by those present, to refer the matter (PHA-2023-0213), to the Office of Prosecution for the issuance of an order to show cause and to authorize resolution of the matter by a consent agreement for REPRIMAND.

Case #13/CAS-2023-1132

PHA-2023-0189

CVS #708, DS2706

Time: 10:58 AM

RECUSAL: J. ROCCHIO recused and was not present for the vote or discussion in this matter.

DISCUSSION: C. MOGNI presented and summarized the investigative report that pertained to this matter.

- Inspectional deficiency on 8/3/23 when CPhT DeSimone was heard counseling a patient at POS. Pharmacist Keeman was notified by Investigator Seed. She changed her credential code and spoke to CPhT Desimone. The POC stated the MOR will ensure Pharmacy staff are aware of their scope of practice and that Pharmacist's credentials are not shared.
- CPhT Desimone stated when reading the DUR to inform Pharmacist Keeman, the customer stated the doctor went over it with her already. She stated, "I did not counsel the patient and I did not intend to at any time". Since Pharmacist Keeman had previously counseled at POS, CPhT Desimone was aware of her credentials and entered them for this DUR.
- Pharmacist Keeman stated she was unaware of the incident as she was at the drop-off station. She stated, "I did not give her my credentials, but she may have known what they were because we have to go over each time and enter them into the computer for DUR's". Once notified during the inspection, she changed them immediately.
- MOR Dester believed that CPhT Desimone obtained Pharmacist Keeman's credentials from Pharmacist Keeman going to POS multiple times throughout the morning to complete DURs.
- MOR Dester and Pharmacist Keeman reiterated to CPhT Desimone a pharmacist is still required to counsel despite a patient communicating knowledge of the intended counseling. Under no circumstances are the pharmacist's credentials shared when completing DURs and will be immediately changed if exposed. They have been more intentional about protecting their credentials. Pharmacy staff reviewed CVS MA Technician Duties, policy Filling/Dispensing Prescriptions - Stores with Two Step Verification Workflow, policy Professional Standards for Patient Counseling.

ACTION: Motion by D. BARNES, seconded by C. BELISLE, and voted unanimously by those present, to DISMISS the matter (PHA-2023-0189), No Discipline Warranted, Remediation Complete. A second

motion was made by S. AHMED, seconded by C. BELISLE, and voted unanimously by those present to open a complaint against Laura DeSimone, PT5232.

Case #14/CAS-2023-0937

INV8784

Alana DeSimone, PH239781

Time: 11:03 AM

RECUSAL: J. ROCCHIO recused and was not present for the vote or discussion in this matter.

DISCUSSION: C. MOGNI presented and summarized the investigative report that pertained to this matter.

- Companion to PHA-2023-0162 for CVS #1204 heard on 11/2/23 (Reprimand) - Allegation that MOR DeSimone refused to accept a telephone veterinary prescription for ursodiol on 6/28/23 without veterinarian's DEA number. The Complainant reported the incident to DL Lee who apologized and stated he would deal with the situation. Believing the issue was resolved on 6/30/23 they tried to call in the prescription again and it was allegedly refused.
- MOR DeSimone indicated she was unable to locate the prescriber in the system and requested the DEA number although she understood it wasn't required. She claimed she said it would take more time to locate/add the prescriber without it. Since the Pharmacy was backed up, she advised them to call another pharmacy if it was urgent. She claimed she offered to fill it under another prescriber's name if they had someone else to phone it in.
- A telephone prescription for #90 ursodiol 250mg tablets was filled at CVS #669 in Swampscott on 6/30/23. Sr. Analyst Furtado stated CVS has no P&P for veterinary prescriptions. No corrective action was submitted.
- In response to INV8784, MOR DeSimone provided a copy of the prescription phoned in on 6/28/23 for ursodiol 200mg under clinic owner's name. The prescription did not get data entered until 06/30/2023 due to the backup, at which time it was realized that the medication was out of stock. She notified the office on 6/30/23 and a new prescription for 250mg tablets was authorized. The prescription was filled then RTS because it was picked up at CVS #669.
- MOR DeSimone stated, "I will review the steps for adding a prescriber over, even though I am already familiar with them". She reviewed the MA Veterinary Medical Association's FAQ's concerning prescriptions.

ACTION: Motion by R. MORELLI, seconded by S. AHMED, and voted unanimously by those present, to CLOSE the matter (INV8784), No Discipline Warranted, Remediation Complete.

Case #15/CAS-2023-1130

PHA-2023-0192

CVS #7109, DS89836

Time: 11:07 AM

RECUSAL: J. ROCCHIO recused and was not present for the vote or discussion in this matter.

DISCUSSION: J. TRAN presented and summarized the investigative report that pertained to this matter.

- During a retail compliance inspection conducted on 08/14/2023, epinephrine autoinjectors, needles and syringes were observed stored in the immunization room which is unlicensed space.
- MOR Son submitted a POC response indicating that all the controlled substances in Schedule II-VI will be stored in the pharmacy area.

- He added that as the immunization supplies were being allocated to the Pharmacy, he mistakenly kept the excess supplies in the immunization room noting he was unaware that the immunization room was unlicensed space since it was locked and alarmed. MOR Son stated that there will be daily check-up to ensure vaccine supplies will not be placed in the immunization room. Staff was counselled to only store epinephrine, needles and syringes used for vaccinations in the dedicated area created within the pharmacy to store immunization supplies.

ACTION: Motion by R. LOPEZ, seconded by S. AHMED, and voted unanimously by those present, to refer the matter (PHA-2023-0192), and refer to the Office of Prosecution for the issuance of an order to show cause and to authorize resolution of the matter by a consent agreement for REPRIMAND.

Case #16/CASE-2023-1100

PHA-2023-0187

CVS #2138, DS2815

Time: 11:09 AM

RECUSAL: J. ROCCHIO recused and was not present for the vote or discussion in this matter.

DISCUSSION: J. TRAN presented and summarized the investigative report that pertained to this matter.

- Unknown loss of #100 oxycodone 30mg tablets on or about 07/11/2023.
- Former MOR Hanson reported the loss was identified during the perpetual inventory count on 07/11/2023.
- She noted that a full investigation was conducted, and the patients were contacted
- The video footage was reviewed, and it showed that the full bottle of oxycodone 30mg tablets was thrown into the green trash bag located behind the pharmacist station. The video was not saved. The Pharmacist removed multiple bottles from the safe to fill a prescription with a quantity of #280 tablets. Upon completion of the prescription, the multiple bottles that were used to fill the prescriptions were bundled together in the pharmacist's hands and thrown into the trash simultaneously.
- Current MOR Sandhal related that after this incident occurred, she reviewed all Loss Prevention and Controlled Substance policies and procedures with the team to prevent a situation like this from happening again.

ACTION: Motion by D. BARNES, seconded by S. AHMED, and voted unanimously by those present, to COMBINE the matter (PHA-2023-0187), with PHA-2023-0043, and refer to the Office of Prosecution for the issuance of an order to show cause and to authorize resolution of the matter by a consent agreement for REPRIMAND.

Topic XIII:

Executive Session Call to Order:

Time: 11:12 AM

By: Katie Thornell reads the executive session language and requests a motion to enter executive session.

Action: A motion was made by to C. Belisle enter Executive Session; Seconded by S. Ahmed and Board Members present voted unanimously by roll call to approve motion. Roll call attendance:

Roll call attendance: C. Belisle, yes; S. Hamilton, yes; D. Barnes; J. Rocchio, yes; M. Sciaraffa, yes; R. Lopez, yes; S. Ahmed, yes; R. Morelli, yes; J. Lopez, yes; J. Dorgan, yes. D. Perry, yes; K. Thornell, yes.

Topic XIV:

65C Sessions MGL c. 112 section 65C

Time: 11:32 AM

DISCUSSION: None

ACTION: President K. Thornell request a motion to enter 65C.

At 11:32 AM R. Lopez, seconded by S. Ahmed and voted unanimously by all those present to enter 65C by roll call vote.

Lunch 12:00 PM to 12:30 PM

J. Lopez joins meeting at 12:30 PM

Topic XV:

ADJOURNMENT OF MEETING

TIME: 1:56 PM

ACTION: Motion by R. Lopez seconded by D. Barnes and voted unanimously by those present, to adjourn from General Session by roll call vote.

EXHIBITS USED DURING THE OPEN SESSION OF THE MEETING

1. Draft Agenda of the 1/11/24 General Session
2. Draft Minutes of the 12/7/23 Meeting
3. Report on Applications approved pursuant to Licensure Policy 13-01
4. Report on Board Delegated Complaint Review to licensure policy 14-02
5. Report on PSUD 17-03
6. Research Drug Study report pursuant to Staff Action Policy 18-02
7. Cardinal Health – New Wholesale Distributor
8. Dimock Pharmacy- Transfer of Ownership
9. Lynn Community Health – Transfer of Ownership
10. Health Care Technology – WD522- Renovation
11. BWH Outpatient Pharmacy – New Retail Pharmacy
12. MGH Outpatient Pharmacy – New Retail Pharmacy
13. Reliant Care Solutions – New Retail Pharmacy
14. Central Pharmacy – Transfer of Ownership
15. Athol Pharmacy – Transfer of Ownership
16. Chair City Pharmacy – Transfer of Ownership
17. Policy 2024-01: Naloxone Dispensing
18. Policy 2019-02: Automated Dispensing Device Use
19. Policy 2018-01: Permitted Prescription Changes and Additions
20. Rescission of Policy 17-02: Staff Action Approval of PTT Programs and Examinations

21. Regulation: 247 CMR 22.00: Monetary Penalties
22. Violation of Stayed Probation: CVS 1015; DS1534; PHA-2022-0076
23. Reconsideration: The Hilsinger Company/Hilco Vision; WD517; PHA-2021-0053
24. Reconsideration: Domenico Carbone; PH16514; PHA-2023-0142
25. PHA-2023-0206 Beacon Pharmacy, DS15362
26. PHA-2023-0207 Garry Levitsky, PH15889
27. PHA-2023-0196 Optum Infusion Services, DS90100
28. PHA-2023-0173 Stop & Shop #45, DS1754
29. PHA-2023-0176 Stop & Shop #64, DS90161
30. PHA-2022-0207 Nephron SC, Inc, NO00036
31. PHA-2023-0222 CVS #2177, DS2723
32. PHA-2023-0188 CVS #8, DS2926
33. PHA-2023-0191 CVS #634, DS2725
34. PHA-2023-0227 CVS #11266, DS89870
35. PHA-2023-0229 CVS #1945, DS3485
36. PHA-2023-0213 CVS #1859, DS2945
37. PHA-2023-0189 CVS #708, DS2706
38. INV8784 Alana DeSimone, PH239781
39. PHA-2023-0192 CVS #7109, DS89836
40. PHA-2023-0187 CVS #2138, DS2815

Respectfully Submitted,

Rita Morelli