

**COMMONWEALTH OF MASSACHUSETTS**  
**Board of Registration in Pharmacy**

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

**January 8, 2026**

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

**Join link:**

<https://eohhs.webex.com/eohhs/j.php?MTID=m80f30de3941766fb91e155d11bd3cde2>

**Webinar number:** 2537 093 0177

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*If you need reasonable accommodations in order to participate in the meeting, contact the DPH ADA Coordinator **Stacy Hart**, [Stacy.Hart@mass.gov](mailto:Stacy.Hart@mass.gov) or 857-274-1120 in advance of the meeting. While the Board will do its best to accommodate you, certain accommodation may require distinctive requests or the hiring of outside contractors and may not be available if requested immediately before the meeting.*

**Agenda**

8:00	I	<b>CALL TO ORDER</b>		S. Dinno
8:05	II	<b>APPROVAL OF AGENDA</b>		
8:10	III	<b>APPROVAL OF BOARD MINUTES</b> <ul style="list-style-type: none"><li>Draft of December 4, 2025, Regular Session Minutes</li></ul>		
8:15	IV	<b>REPORTS</b> <ul style="list-style-type: none"><li>Applications approved pursuant to Licensure Policy 13-01</li><li>Monthly report from Probation</li><li>Board Delegated Review pursuant to Licensure Policy 14-02</li><li>Research Drug Study report pursuant to Staff Action Policy 18-02</li></ul>		
8:30	V	<b>FLEX</b> <ul style="list-style-type: none"><li>New Board member introduction</li><li>Revised Controlled Substance Loss Protocol</li></ul>		

8:45	VI	<b>POLICY</b> <ul style="list-style-type: none"> <li>Policy 13-01 Licensure Applications and Notices</li> <li>Policy 14-02 Board Delegated Review (BDR)</li> <li>Policy 2023-09: Action Level Environmental Monitoring Results</li> </ul>		M. Chan																
9:00	VII	<b>ADVISORY</b> <ul style="list-style-type: none"> <li>Environmental Monitoring</li> </ul>		M. Chan																
9:15	VIII	<b>APPLICATIONS</b> <ul style="list-style-type: none"> <li>Vital Care of Springfield <ul style="list-style-type: none"> <li>New Retail Pharmacy-DSNE10000462</li> </ul> </li> <li>Holyoke Medical Center Specialty Pharmacy <ul style="list-style-type: none"> <li>New Retail Pharmacy -DSNE10000279</li> </ul> </li> <li>Family Health Center of Worcester Pharmacy <ul style="list-style-type: none"> <li>New Retail Pharmacy - DSNE10000052</li> </ul> </li> <li>Promise Pharmacy <ul style="list-style-type: none"> <li>Non-Resident - Sterile Compounding License; NDSNE97478SC</li> </ul> </li> </ul>																		
10:00	IX	<b>REVIEW OF COMPLIANCE</b> <ul style="list-style-type: none"> <li>CVS #166, Lic. No. DS3449- Docket No. PHA-2023-0256</li> </ul>		K. Fishman																
10:15	X	<b>FILE REVIEW</b> <table border="1"> <tr> <td>1</td> <td>CASE-2025-2891</td> <td>PHA-2025-0096</td> <td>American Life Pharmacy, NDS31969</td> </tr> <tr> <td>2</td> <td>CASE-2025-0819</td> <td>PHA-2025-0034</td> <td>Aequita Pharmacy, NDS31471</td> </tr> <tr> <td>3</td> <td>CASE-2025-3333</td> <td>PHA-2025-0121</td> <td>Partners of Connecticut, LLC, NDS31906</td> </tr> <tr> <td>4</td> <td>CASE-2025-3196</td> <td>PHA-2025-0111</td> <td>Walgreens #3469, DS2593</td> </tr> </table>	1	CASE-2025-2891	PHA-2025-0096	American Life Pharmacy, NDS31969	2	CASE-2025-0819	PHA-2025-0034	Aequita Pharmacy, NDS31471	3	CASE-2025-3333	PHA-2025-0121	Partners of Connecticut, LLC, NDS31906	4	CASE-2025-3196	PHA-2025-0111	Walgreens #3469, DS2593		
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3	CASE-2025-3333	PHA-2025-0121	Partners of Connecticut, LLC, NDS31906																	
4	CASE-2025-3196	PHA-2025-0111	Walgreens #3469, DS2593																	
10:45	XI	<b>EXECUTIVE SESSION</b> 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 evaluate the Good Moral Character as required for registration for a pending applicant.																		
11:15	XII	<b>ADJUDICATORY SESSION (M.G.L. c. 30A, § 18)</b>																		
<b>LUNCH BREAK</b>																				

<b>11:45</b>	<b>XIII</b>	<b>M.G.L. c. 112, § 65C SESSION</b>		
<b>2:00</b>		<b>ADJOURNMENT</b>		

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

**MINUTES OF THE GENERAL SESSION**

**Via Remote WebEx Meeting**

**January 8, 2026**

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**Board Members Present**

Saad Dinno, RPh, FACP/FACA, President  
Timothy Fensky, RPh, President-Elect  
Mark Sciaraffa, CPhT  
Sami Ahmed, PharmD., RPh, BCPS, BCSCP  
Katie Thornell, RPh, MBA  
Caryn Belisle, RPh, MBA  
John Rocchio, RPh, PharmD  
Rita Morelli, PharmD, BCACP, RPh  
Frank Lombardo  
Stephanie Patel, MD, MBA, FFHMP, HMDC  
Patricia Wolohan, RN, BLS, ACLS

**Board Members Not Present**

Julie Dorgan, RN, Secretary  
Delilah Barnes, RPh

**Board Staff Present**

Michael Godek, Executive Director  
Monica Botto, Associative Executive Director  
Jacqueline Petrillo, PharmD, RPh, 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  
Julienne Tran, RPh PharmD, Investigator  
Gregory Melton, JD, PharmD, BCPS, Investigator  
Keith Johnstone, Compliance Officer  
Gayatri Ramasubramanian, Pharmacy Intern  
Madhurima Chowdhury, Pharmacy Intern

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**TOPIC I.** Attendance by roll call:

**CALL TO ORDER 8:01 AM**

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

Roll call attendance: T. Fensky, present; S. Ahmed, present; C. Belisle, present; F. Lombardo, present; S. Patel, present; J. Rocchio, present; Mark Sciaraffa, present; K. Thornell, present; P. Wolohan, present; S. Dinno, present.

**Topic II.**

**Approval of Agenda**

**TIME 8:03 AM**

**Agenda: 01/08/25**

**DISCUSSION:** Deferred: CASE-2025-3333; PHS-2025-0121; Partners of Connecticut NDS31906

**ACTION:** Motion by K. THORNELL, seconded by M. SCIARAFFA and voted unanimously by those present to approve the agenda with the noted change by roll call vote.

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**Topic III**

**Approval of Board Minutes**

**TIME: 8:04 AM**

**Minutes**

1. Draft **12/04/25**

**Change:** William Frisch was not present

**ACTION:** Motion by K. THORNELL seconded M. SCIARAFFA and voted to approve the regular session minutes of 12/4/2025 with an abstention of P. WOLOHAN by roll call vote with one noted change.

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**Topic IV.**

**REPORTS**

**Applications approved pursuant to Licensure Policy 13-01**

**TIME: 8:04 AM**

**PRESENTED BY:** R. HARRIS

**DISCUSSION:** R. Harris reported a total of 30 Resident Change Pharmacist Manager of Record applications, 14 Non-resident Change Designated Pharmacist-in-Charge applications, and 2 facility closures that have been approved via Staff Action since the November 6<sup>th</sup> Board meeting.

So noted.

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**Topic IV.**

**REPORTS**

**Applications approved pursuant to Licensure Policy 13-01**

**TIME: 8:06 AM**

**PRESENTED BY:** R. HARRIS

**DISCUSSION:** R. Harris reported a total of 36 Resident Change Pharmacist Manager of Record applications, 12 Non-Resident Change Designated Pharmacist-in-Charge applications, and 1 facility closure, all of which have been approved via Staff Action since the December 4<sup>th</sup> Board meeting.

So noted.

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**Topic IV.**

**REPORTS**

**Monthly Report from Probation**

**TIME: 8:06 AM**

PRESENTED BY: R. HARRIS

DISCUSSION: R. Harris reported 3 cases of probation monitoring that have been closed since the last Board meeting.

So noted.

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**Topic IV.**

**REPORTS**

**Monthly Report from BDCR pursuant to Policy 14-02**

**TIME: 8:07 AM**

PRESENTED BY: R. HARRIS

DISCUSSION: R. Harris reported a total of 9 cases that were reviewed at the January 5<sup>th</sup> Board Delegated Review, including 3 controlled substance deficiencies, all of which were closed with no discipline warranted. 1 failure to report discipline and 1 instance of controlled substance loss each incurred a reprimand. Additionally, 1 controlled substance loss case will require a controlled substance loss protocol for all benzodiazepines. Waivers have been approved for 3 facilities since the last report.

So noted.

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**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 reporting in research drug studies. There have been no new or concluded studies since the last report. Currently, 11 studies involve commercially available drugs while 3 include investigational drugs.

So noted.

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**R. Morelli enters the meeting at 8:09 AM**

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**TOPIC V**

**FLEX**

**1. New Board member introduction**

**TIME: 8:09 AM**

**Presented by:** M. GODEK

**Discussion:** Patricia Woolhan was introduced as the newest member of the Board.

She currently serves as a nurse within the UMass Health Care System. The Board welcomed her and acknowledged the valuable clinical perspective she will contribute to its regulatory work.

**So noted.**

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## **2. Revised Controlled Substance Loss Protocol**

**TIME: 8:09 AM**

**Presented by:** J. PETRILLO

### **Discussion:**

- The Board reviewed the Controlled Substance Loss Protocol, formally adopted in October 2023 and used operationally since 2017.
- The protocol applies when a pharmacist reports or discovers a controlled substance loss.
- Such matters are routinely referred to the Office of Prosecution for an Order to Show Cause, often resulting in non-disciplinary state probation.

### **Current Requirements**

- Pharmacies on probation must submit documentation showing all staff were retrained in Inventory Management, Prescription production and Waiting bin management.
- Training must occur within 30 days of the agreement.

### **Proposed Revision**

- Add a requirement that all staff hired, rehired, or commencing employment, who will work more than 30 total hours, must be trained in the same areas within 30 days of starting.
- Documentation must be submitted to the Probation Department.

### **Board Discussion**

- John supported the intent, noting that anyone performing waiting, inventory, or production functions should be trained. He questioned whether the requirement should be tied to duties rather than hours worked.
- Jackie clarified the 30 hour total threshold was chosen to avoid burdening pharmacies when staff float in briefly for single shift coverage.

### **Scope of Change**

- Applies to all staff working behind the counter.
- Applies only to staff hired, rehired, or starting employment after the effective date and only during the probationary period.
- The hour threshold prevents unnecessary requirements for short term or temporary staff.

**Action:** Motion by T. SMITH, seconded by F. LOMBARDO, and voted by the majority of those present with P. WOOLHAN abstaining, to adopt the revised Controlled Substance Loss Protocol as presented.

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**TOPIC VI.**

**POLICY**

- **Policy 13-01 Licensure Applications and Notices**

**TIME: 8:17 AM**

**Presented by:** M. CHAN

**Discussion:** In addition to minor edits, the major change is regarding institutional sterile compounding licenses. Since the Board's institutional sterile compounding licenses are based on the hospital or clinic's MCSR number, MCSR changes would require a new Board license. The policy change allows staff to approve these licenses when there is a change in the DPH-issued MCSR as long as the general operation remains the same.

**Action:** Motion by S. AHMED, seconded by T. FENSKY, and voted unanimously by roll call of those present, to approve edits to the policy.

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**TOPIC VI.**

**POLICY**

- **Policy 14-02 Board Delegated Review (BDR)**

**TIME: 8:19 AM**

**Presented by:** M. CHAN

**Discussion:** Major edits allow BDR approval for HCQ-licensed clinic pharmacies that are converting to Board-licensed retail licenses. Also, new pharmacy applications in the setting of a change in ownership and waivers for the designated compounding area may also be approved by BDR.

**Action:** Motion by J. ROCCHIO, seconded by M. SCIARAFFA, and voted unanimously by roll call of those present, to approve edits to the policy.

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**TOPIC VI.**

**POLICY**

- **Policy 2023-09: Action Level Environmental Monitoring Results**

**TIME: 8:20 AM**

**Presented by:** M. CHAN

**Discussion:** The edit to this policy would require identification to the species level for any growth found in ISO-5 areas and ISO-7 buffer rooms, and any action level growth in any other ISO classified areas.

**Action:** Motion by T. FENSKY, seconded by F. LOMBARDO, and voted unanimously by roll call of those present, to approve edits to the policy.

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**TOPIC VII.**

**ADVISORY**

- **Environmental Monitoring**

**TIME: 8:22 AM**

**Presented by:** M. CHAN

**Discussion:** The edits align with the changes to Policy 2023-09: Action Level Environmental Monitoring Results.

**Action:** Motion by T. FENSKY, seconded by S. AHMED, and voted unanimously by roll call of those present, to approve edits to the advisory.

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**TOPIC VIII:**

**APPLICATIONS**

- **Vital Care of Springfield**
  - **New Retail Pharmacy-DSNE10000462**

**TIME: 8:23 AM**

**Presented by:** Jessica Figueroa, Cameron Helm

**Recusal:** None

**Discussion:** We plan to have a closed door, home infusion pharmacy. We plan to initially dispense only commercially available home infusion products. We will be doing home deliveries, patient education, and counseling with our home infusion patients. The plan is to have a sterile compounding suite in the future.

Waivers include:

247 CMR 9.18(6)

247 CMR 9.18(7)

247 CMR 9.19(1)(e)

247 CMR 9.19 (1)(g)

247 CMR 9.19 (1)(j)

247 CMR 9.01(15)

247 CMR 9.19(1)(f)

**Action:** T. Fensky made a motion to approve the application with waivers pending successful inspection, Seconded by K. Thornell and voted unanimously by those present to approve the motion.

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**TOPIC VIII: APPLICATIONS**

- **Holyoke Medical Center Specialty Pharmacy**
  - **New Retail Pharmacy -DSNE10000279**

**TIME: 8:28 AM**

**Presented by:** Scott Gould

**Recusal:** None

**Discussion:** This pharmacy is owned by Holyoke Medical Center, and we are looking to start up a retail pharmacy on site. It has received Bureau of Health Care Safety and Quality (HCQ) approval

**Waivers:**

247 CMR9.19(1)(e)

247 CMR 9.19(1)(g)

247 CMR 9.01(15)

**Questions:**

- Is this a specialty pharmacy or a full retail pharmacy?
  - We are applying for a full retail license. We are focused on specialty and mail order, we still want to provide a variety for discharge and employee benefit.
- What is the entity that will be overseeing the pharmacy?
  - Vital one is a pharmacy consulting service, and we are contracted to run all the pharmacy services.
- Do you have policies and procedures to compound if you get that request?
  - Yes, we have methodology to triage prescriptions with another pharmacy nearby\
- Are the staff employed by the medical center, or with Vital One?
  - Vital One
- What is your current staffing?
  - We will be opening with 2 pharmacy technicians and 1 pharmacist and will hire as we need.

**Action:** C. Belisle made a motion to approve the application as submitted with waivers pending successful inspection; seconded by K. Thornell and voted unanimously by roll call of those present to approve the motion.

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**TOPIC VIII: APPLICATIONS**

- **Family Health Center of Worcester Pharmacy**
  - **New Retail Pharmacy - DSNE10000052**

**TIME: 8:35 AM**

**Presented by:** Muhammad Xhemali

**Recusal:**

**Discussion:** We are currently functioning as a clinic pharmacy and hoping to expand to operations a retail pharmacy. We are applying to license a space adjacent to the pharmacy. This application is approved by HCQ. This would be a temporary space which would allow them to get 3<sup>rd</sup> party contracts set, and then would re-apply with the renovation application for the permanent site.

Waivers:

- 247 CMR 9.01(15)
- 247 CMR 9.18(6)
- 247 CMR 9.18(7)
- 247 CMR 9.19(1)(e)
- 247 CMR 9.19(10)
- 247 CMR 9.19(11)
- 247 CMR 9.19(14) (a)
- 247 CMR 9.19(2)

- Can this project be complete in 5 months?
  - We believe so. It is not a lot of renovation that is necessary.
- Will the clinic pharmacy run adjacent to the retail pharmacy?
  - Once credentials are complete, the retail pharmacy will be the only pharmacy
- Will this space be a fully functional pharmacy?
  - It will be capable of being a fully functional pharmacy

**Action:** T. Fensky made a motion to approve the application with waivers upon successful inspection; seconded by R. Morelli and voted unanimously by roll call of those present to approve the application.

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**TOPIC VIII: APPLICATIONS**

- **Promise Pharmacy**
  - **Non-Resident - Sterile Compounding License; NDSNE97478SC**

**TIME: 8:46 AM**

**Presented by:** Mipal Patel

**Recusal:**

**Discussion:** This Application was previously reviewed at the December 2025 Board meeting, where the Board voted to defer the application until Board staff received documentation of updated order forms, compliance with the previous inspection, clinical data regarding compounding with Semaglutide and Vitamin b6, and compliance with section 503 a of the Federal Food Drugs and Cosmetics act.

Questions:

- Is there any clinical data for compounding the semaglutide and Vitamin b6 together?
  - There is a lot of clinical studies about independent B6 injections and that it helps with nausea. There are also studies about other conditions such as hypertension and constipation, and we included that documentation
- Is there any data specifically about the administration of semaglutide and Vitamin b6 together?

- There is no clinical study. We don't claim that the combination works, we facilitate the doctors request.
- There is no data that you can give us as to why B6 should be added to semaglutide.
  - No there is not, but I can say anecdotally that it does help with the nausea
- Can you clarify, what is the dosage used in the B6 and semaglutide combination?
  - We use Semaglutide 2.5mg/mL with Vitamin B6 10mg/mL
- Are you still compounding peptides?
  - We are no longer compounding peptides.
- What other sterile products were you shipping to Massachusetts?
  - We do testosterone, injectable vitamins, and sermorelin
- When is your next inspection?
  - We are expecting the next Gates inspection this year in the fall.

**Action:** S. Ahmed made a motion to deny the sterile compounding license application; Seconded by C. Belisle and voted by roll call of those present to approve the motion.

**Nays:** T. Fensky, S. Patel, J. Rocchio, P. Wolohan

**Ayes:** S. Ahmed, C. Belisle, F. Lombardo, R. Morelli, M. Sciaraffa, K. Thornell

**TOPIC IX: REVIEW OF COMPLIANCE**

● **CVS #166, Lic. No. DS3449- Docket No. PHA-2023-0256** **TIME: 9:11 AM**

**Presented by:** K. Fishman

**Recusal:** Rocchio

**Discussion:** CVS #166 is under a one year probationary consent agreement related to an unknown loss of benzodiazepines.

- Agreement Effective: October 9, 2024
- Original Earliest Release Date: October 9, 2025
- Two Month Extension Granted: New earliest release date December 2025
- The matter returned to the Board due to three violations occurring during the probationary period.

**Underlying Cause and Agreement Terms**

- Underlying Cause: Unknown loss of 400 clonazepam 0.5 mg tablets
- Regulatory Violation: 247 CMR 9.01(5)
- Agreement Terms: Standard conditions for retail pharmacy unknown loss cases
- The licensee complied with general terms; however, three violations occurred during probation.

**Violations During Probation**

1. July 1, 2025 – Controlled Substance Loss
  - Loss of 508 lorazepam 5 mg tablets
  - Discovered June 2025
  - Final report confirmed unknown loss

- Considered a repeat violation under the existing probation
2. August 28, 2025 – Patient Complaint
- Patient received an extra prescription at the drive through
  - Patient left voicemail requesting a call back; no return call was made
3. November 13, 2025 – Inspection and Plan of Correction
- Technician Adorno was administering vaccines without readily available training documentation.
  - Adorno stated she had been immunizing; no documentation was retrievable.
  - PTT license expired: October 7, 2025
  - PT license issued: October 8, 2025
  - Adorno ceased immunizing until proper documentation was provided.
  - CVS corporate submitted internal training documentation, not APhA issued
  - APhA certificate submitted lacked APhA insignia or logo
  - Adorno had completed the self study portion but not full certification.
  - Adorno administered 24 vaccines between April 25 – July 15, 2025, while still a PTT, outside the scope of practice.

**Action:**

First Motion by S. AHMED, seconded by R. MORELLI, and voted unanimously by those present, to find that the pharmacy violated the conditions of its probation agreement in the matter (PHA 2023 0256).

Second Motion by R. MORELLI, seconded by T. FENSKY, and voted unanimously by those present, to extend the probation period for one year, to October 9, 2026, in the matter (PHA 2023 0256).

Third Motion by T. FENSKY, seconded by M. SCIARAFFA, and voted unanimously by those present, to open a PHA complaint against Pharmacist Porcaro for allowing a PTT to work outside the scope of practice and administer vaccines in the matter (PHA 2023 0256).

**TOPIC X:**

**FILE REVIEW**

Case #1/CASE-2025-2891

PHA-2025-0096

American Life Pharmacy, NDS31969

Time: 10:03 AM

RECUSAL: NONE

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

- ALP shipped approximately 1926 CSP prescriptions into Massachusetts between the end of the grace period on 05/01/2025 for non-resident pharmacies to comply with new licensing requirements and 09/19/2025 when the pharmacy obtained proper licensure including approximately 292 after an inquiry was made about licensure status on 08/05/2025.
- ALP asserted that BORP was aware that the pharmacy’s practice included sterile compounding after discussion with BORP Staff in November 2024 about 503A versus 503B status. ALP relied on this fact when interpreting that the pharmacy was compliant with licensing regulations when only a non-resident pharmacy license was issued on 04/23/2025. However, ALP did not submit an application for a

non-resident pharmacy license until 04/22/2025 after promulgation of new regulations for non-resident pharmacies on 12/06/2024.

ACTION: Motion by C. BELISLE, seconded by T. FENSKY, and voted unanimously by those present, to consolidate the matter (PHA-2025-0096) with PHA-2025-0056. A second motion was made by C BELISLE, seconded by T. FENSKY, and voted unanimously to refer the matters 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-2025-0819

PHA-2025-0034

Aequita Pharmacy, NDS31471

Time: 10:08 AM

RECUSAL: NONE

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

- BORP learned that the Washington State Department of Health’s Pharmacy Quality Assurance Commission ordered Aequita to cease (1) compounding and (2) dispensing, delivery, and distribution of compounded products on March 12, 2025 after a PQAC investigation “found deficient practices or conditions” which “constituted immediate jeopardy as they have placed the health and safety of individuals at risk of serious injury, serious harm, serious impairment, or death.”
- BORP then requested that Aequita voluntarily recall any compounded preparations within expiry which were shipped into Massachusetts affected. Aequita commenced the recall as requested.
- Aequita ceased any and all sterile compounding after entering into an agreed order with PQAC. Aequita was permitted to resume non-sterile compounding in the same order after corrective action was implemented including hiring of additional staff with compounding experience and installation of additional observation camera stations and cameras throughout the cleanroom and facility.
- Furthermore, Aequita was required to submit quarterly reports detailing non-sterile compounded products prepared during that period and designated non-sterile compounding personnel who prepared those non-sterile compounded products including proof of training, experience, and knowledge of particular compounding.
- Lastly, Aequita indicated on 11/17/2025 that the pharmacy was not currently shipping any prescriptions into Massachusetts. Aequita was then reminded of new licensing regulations for non-resident sterile and non-sterile pharmacies in order for such a pharmacy to ship compounded products into Massachusetts.

ACTION: Motion by T. FENSKY, seconded by S. AHMED, and voted unanimously by those present, to refer the matter (PHA-2025-0034), 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.

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Case #3/CASE-2025-3333

PHA-2025-0121

Partners of Connecticut, LLC, NDS31906

Time: N/A

**DEFERRED**

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RECUSAL: NONE

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

- On 09/10/2025, WAG 3469 submitted a final report of an unknown loss of 360GM (144 packets) of testosterone gel 1.62%-2.5GM packets which occurred on 08/14/2025. WAG 3469 indicated that a joint investigation with APM was conducted. However, the cause of the loss was not determined.
- WAG 3469 indicated that “at the time of loss discovery, procedures were reinforced to ensure the correct package size is entered during prescription data entry and that the appropriate number of boxes is dispensed to the patient.”

ACTION: Motion by S. AHMED, seconded by R. MORELLI, and voted unanimously by those present, to refer the matter (PHA-2025-0111), 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.

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**Topic XI:** **Executive Session Call to Order:** **TIME: 10:15 AM**

By: President S. Dinno reads the executive session language and requests a motion to enter executive session.

ACTION: Motion by K. THORNELL seconded by S. AHMED, voted unanimously by roll call to enter executive session #1.

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**Topic XII:** **Adjudicatory Session** **TIME: 10:28 AM**

By: President S. Dinno request a motion to enter Adjudicatory Session.

ACTION: At 10:28 AM K. THORNELL seconded by T. FENSKY and voted unanimously by all those present to enter the Adjudicatory Session by roll call vote.

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**Topic XIII:** **65C Sessions MGL c. 112 section 65C** **TIME: 10:47 AM**

By: President S. Ahmed request a motion to enter M.G.L 65 c Session.

ACTION: Motion by M. SCIARAFFA, seconded by K. THORNELL and voted unanimously by all those present to enter M.G.L. chapter 65 C Session by roll call vote.

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**ACTION:** Motion by R. MORELLI seconded by T. FENSKY and voted unanimously by those present, to adjourn the meeting by roll call vote.

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**EXHIBITS USED DURING THE OPEN SESSION OF THE MEETING**

1. January 8, 2026, Agenda
2. December 4, 2025, Board Minutes
3. Licensure Policy 13-01 Report
4. Monthly Probation Report
5. BDR Licensure Report pursuant Policy 14-02
6. Research Drug Study report pursuant to Staff Action Policy 18-02
7. Revised Controlled Substance Loss Protocol Memorandum
8. Policy 13-01 Licensure Applications and Notices
9. Policy 14-02 Board Delegated Review (BDR)
10. Policy 2023-09 Action Level Environmental Monitoring Results
11. Vital Care of Springfield– New Retail Pharmacy
12. Holyoke Medical Center Specialty Pharmacy- New Retail Pharmacy
13. Family Health Center of Worcester Pharmacy-New Retail Pharmacy
14. Promise Pharmacy – Non-Resident Sterile Compounding License
15. Review of Compliance: CVS 166 PHA-2023-0256
16. PHA-2025-0096 American Life Pharmacy
17. PHA-2025-0034 Aequita Pharmacy
18. PHA-2025-0121 Partners of CT
19. PHA-2025-0111 Walgreens #3469