

Georgia Drugs and Narcotics Agency
 254 Washington Street SW - G2000
 Atlanta, Georgia 30334

OPIOID TREATMENT PROGRAM CLINIC

Pharmacy Inspection Report

Board Office: 404-651-8000
 Board Fax: 470-386-6137
 GDNA Office: 404-656-5100
 GDNA Fax: 404-651-8210
 GDNA Toll Free: 800-656-6568

Pharmacy Information			
Inspection Type	Routine		
Name: Lanier Treatment Center			County: Hall
DCH Narcotic Treatment Programs Permit #: NTP001029			Date: 4/4/2024
Permit #: PHOP000030	Exp: 6/30/2025	DEA Registration #: RL/ZL0320820	Exp: 3/31/2025
Street Address: 592 Medical Park Drive Ste A			
City: Gainesville	State: GA	ZIP Code: 30501	Website: laniertreatmentcenter.com
Phone: 770-503-7721	Fax: 770-503-7066	Administrator: Deborah Brock	
Pharmacy Hours: Tuesday/Thursday: 6:30AM-12PM		Clinic Hours: m-f:6-11 sat:6:30-9:30	
Director of Pharmacy: Cleveland W Brown		License #: RPH012105	Exp: 12/31/2024 Full Time <input type="checkbox"/> Part Time <input checked="" type="checkbox"/>
PIC Email: corner-drugs@charter.net		PIC Cell: 678-617-4366	PIC Alternate Phone 770-536-6889
Medical Director: Bradwell Rustin Mcalister, II		GA License #: 40480	Exp Date: 3/31/2025
Medical Director's DEA Registration# BM/XM1987316		Exp Date: 1/31/2025	
Pharmacists, Interns, Technicians, Nurses:			
Name: Meredith K Harrison		License/Registration #: RPH021269	Exp: 12/31/2024
Name: Susan Kay Hoffman		License/Registration #: PHTC058008	Exp: 6/30/2025
Name: Susan Kay Hoffman		License/Registration #: LPN075800	Exp: 3/31/2025
Name:		License/Registration #:	Exp:
Name:		License/Registration #:	Exp:
Name:		License/Registration #:	Exp:
Name:		License/Registration #:	Exp:
Name:		License/Registration #:	Exp:
Last GDNA Inspection Date: 8/25/2021		Inspected by: Poblet/Acoff	
DEA Biennial Inventory Date: 12/29/2023		DEA Biennial Inv conducted at the: <input type="checkbox"/> Beginning of Business <input checked="" type="checkbox"/> Close of Business	
List of drug suppliers and reverse distributors:			
480-18-.03 Personnel			Satisfactory
The pharmacy has a sufficient number of trained supportive personnel (b)			1. Yes
Supportive personnel are properly supervised (c)			2. Yes

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480-18-.04 Absence of a Pharmacist		Satisfactory
3. Only specifically authorized, licensed medical personnel, have access to drugs in the absence of the pharmacist (1)		3. Yes
4. Emergency Kits / Crash Carts (3):		4a. Yes
a. Sealed and stored in a limited access area		4b. Yes
b. Properly labeled for both interior and exterior		4c. Yes
c. Removed pursuant to a valid physician's order or by a pharmacist		4d. Yes
d. The pharmacy is properly notified when an emergency kit is used		4e. Yes
e. Emergency kits are inspected at least once every ninety (90) days		
5. After-hours access to the pharmacy (4)		5a. Yes
a. Only licensed healthcare professionals have after-hours access to the pharmacy		5b. Yes
b. The licensed healthcare professionals have been trained		5c. Yes
c. Required documentation is performed for drugs removed from the pharmacy		5d. Yes
d. A pharmacist promptly reviews drugs removed from the pharmacy		
480-18-.05 Physical Requirements and Equipment		Satisfactory
6. The pharmacy has sufficient space - a minimum of 150 ft ² (1)		6. Yes
7. The pharmacy has access to current reference materials related to OTP (2)(a)		7. No
8. Current antidote information and the poison control phone number are readily available(2)(b)		8. Yes
9. The pharmacy has access to O.C.G.A. 26-4; 26-3; 16-3; and the official rules of the GA Georgia State Board of Pharmacy (2)(c)		9. Yes
10. The pharmacy has the minimum equipment required (2)(d-e)		10. Yes
11. Approved variances are posted (if applicable) (3)		11. N/A
480-18-.06 Drug Distribution and Control		Satisfactory
12. No drugs are dispensed or administered without a physician's written medication drug order (1)		12. Yes
13. Drugs are identified up to the point of administration (2)(a)(1)		13. Yes
14. The pharmacy receives a valid drug order prior to dispensing the first dose (2)(a)(2)		14. Yes
15. The pharmacy maintains a patient profile for each OTP clinic patient (2)(a)(3)		15. Yes
16. All drug invoices are attached to their accompanying DEA form 222 order form and filed separately from all other drug records - computerized records may meet these requirements (2)(a)(5-6)		16. Yes
17. The pharmacy participates in the patient care evaluation program (2)(d)		17. Yes
18. Records of all transactions of the OTP clinic are maintained for two (2) years (2)(b)		18. Yes
19. For use inside the clinic, all drugs dispensed by an OTP clinic pharmacy, including those for use in an after-hours safe or emergency kit are labeled with the following at a minimum (3)(a):		19a. Yes
a. Brand name or generic name of the drug		19b. Yes
b. Drug strength		19c. Yes
c. Lot number		19d. Yes
d. Expiration date		
20. Any drug dispensed by the pharmacy for take-home use by an OTP clinic patient is labeled the following at a minimum (3)(b):		20a. Yes
a. Patient name		20b. Yes
b. Name of physician		20c. Yes
c. Name, address, and telephone number of the OTP clinic pharmacy		20d. Yes
d. Drug name		20e. Yes
e. Drug strength		20f. Yes
f. Date of dispensing		20g. Comments
g. Expiration date		20h. Yes
h. "Federal Caution" for controlled substances		20i. Yes
i. Clinic pharmacy serial number		

OPIOID TREATMENT PROGRAM CLINIC

Pharmacy Inspection Report

21. The pharmacy maintains a proof of use for controlled substances and other specified drugs (5)	21. Yes
22. On-premises drug destruction is for small quantities of controlled substances that are <u>both</u> the remainder of a single-dose unit and prepared to the nearest possible size to the ordered dose (6)	22. Yes
23. The pharmacy maintains a perpetual inventory of all Schedule II medications (7)	23. Yes
24. Suspected adverse drug reactions are reported to the ordering practitioner, the pharmacy and recorded in the patient's record. (9)	24. Yes
25. Drug storage areas are locked or otherwise secured when licensed health care professionals are not present (10)	25. Yes
26. Required records & reports are maintained for 2 years and are readily available during inspection (11)	26. Yes

480-18-.07 Delivery of Drugs, General	Satisfactory
27. Drugs are dispensed or administered upon receipt of a medication drug order (1): a. A practitioner must write an initial dosing medication order for each patient prior to dispensing b. In emergency situations a 72 hour supply verbal order is permitted which is signed within 72 hours c. Any adjustment to a patient dosage regimen is considered a new medication order and shall be written and signed by the medical director within 72 hours.	27a. Yes 27b. Yes 27c. Yes
28. The pharmacist-in-charge or designee conducts and documents inspections, no less than once per month. These inspections shall, at a minimum, verify items found in 480-18-.09(2)(a-f).	28. Yes
29. The BOP and GDNA are notified of patients that improperly utilize more than one OTP at the same time (480-18-.10)	29. Yes

Required Policies and Procedures

Following items are required to be included as part of a policy and procedure manual for an Opioid Treatment Clinic Pharmacy. By signing below the pharmacist is confirming this pharmacy has a policy and procedure that addresses each item listed here, and pharmacy personnel adhere to these policies and procedures.

• Training supportive personnel 480-18-.03(d)(4)	• Access to drugs in the absence of the pharmacist 480-18-.04(2)
• Emergency Kits 480-18-.04(1)(e)	• Distribution of medications 480-18-.06(2)(a)
• Drug recalls 480-18-.08	• Drugs from outside sources 480-18-.08
• Discontinued Drugs 480-18-.06(4)	• Recalls of prescription medication 480-18-.06(8)
• After-hours access to the pharmacy 480-18-.04(e)	• Drug administration 480-18-.07

Date of last policy and procedure manual revision: _____

ADDITIONAL INFORMATION

- Licenses shall become null and void upon the sale, transfer or change of mode of operation or location of the business. (480-18-.02(5))
- Licenses are renewed for two years and expire on June 30th of each odd numbered year. (480-18-.02(3)(d))
- Any discrepancies or deficiencies noted shall be corrected within 30 days of this inspection. Written notice of such corrections shall be filed with GDNA within thirty (30) days after receipt of the inspection report. (480-18-.02(6))
- Georgia State Board of Pharmacy Website: WWW.GBP.Georgia.GOV;
- Georgia Drugs & Narcotics Agency Website: WWW.GDNA.Georgia.GOV

Recommendations / Comments

7) At the time of this inspection the RPh did not have access to reference materials.

OPIOID TREATMENT PROGRAM CLINIC

Pharmacy Inspection Report

Recommendations / Comments (continued)

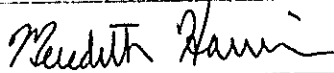
20g) The pharmacy currently labels plastic Zip-Lock style bags which is affixed with a patient/prescription label that does not contain the expiration date; however the bottle inside the labeled bag is documented with lot and expiration date.

SIGNATURE

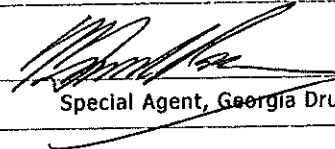
This inspection report has been read and explained to the person whose name appears below. Explanations include any observed violations, deficiencies, or comments, and such are based on state/federal laws and rules pertaining to the practice of pharmacy in the State of Georgia. I do affirm the information I have given pursuant to this inspection is true and correct to the best of my knowledge. This inspection report is not intended to be all inclusive, and there may be deficiencies, non-compliance, or violations of the laws and rules not detected and noted in this report.

Printed Name: Meredith K Harrison

Printed Name: Michael Poblet



Signature: Pharmacy Representative



Special Agent, Georgia Drugs and Narcotics Agency

Day's Date: 4/4/2024