

California State Board of Pharmacy 2720 Gateway Oaks Drive, Ste. 100 Sacramento, CA 95833

Phone: (916) 518-3100 Fax: (916) 574-8618

www.pharmacy.ca.gov

Business, Consumer Services and Housing Agency Department of Consumer Affairs Gavin Newsom, Governor



AUTOMATED DRUG DELIVERY SYSTEM SELF-ASSESSMENT

Business and Professions Code (BPC) section 4427.7(a) requires that the pharmacy holding an automated drug delivery system (ADDS) license complete a self-assessment, performed pursuant to section 1715.1 of Title 16 of the California Code of Regulations, evaluating the pharmacy's compliance with pharmacy law relating to the use of the ADDS. The assessment shall be performed **before July 1 of every odd-numbered year** by the pharmacist-in-charge of each pharmacy under BPC section 4029 (Hospital Pharmacy) or 4037 (Pharmacy). The pharmacist-in-charge (PIC) must also complete a self-assessment within 30 days whenever; (1) a new automated drug delivery system permit has been issued, (2) there is a change in the pharmacist-in-charge, or (3) there is a change in the licensed location of an automated drug delivery system to a new address. The primary purpose of the self-assessment is to promote compliance through self-examination and education. All information regarding operation, maintenance, compliance, error, omissions, or complaints pertaining to the ADDS shall be included in this Self-Assessment.

All references to Business and Professions Code (BPC) are to Division 2, Chapter 9; California Code of Regulations (CCR) are to Title 16; and Code of Federal Regulations (21 CFR) to Title 21 unless otherwise noted.

The self-assessment must be completed, and the signed original must be readily available and retained in the pharmacy, for three (3) years after performed.

Note: **For a hospital pharmacy** operating an AUDS pursuant to BPC 4427.2(i), the exemption only applies to the licensure requirements for the ADDS. The hospital pharmacy is required to comply with all other requirements including completing the ADDS Self-Assessment pursuant to BPC 4427.7(a). Attach a list of all unlicensed AUDS, their locations and hours of operation. [CCR 1715.1(f)]

Note: **For a correctional pharmacy** operating more than one licensed automated drug delivery system at a single institution, the PIC may complete a single consolidated self-assessment for all licensed ADDS, if the mechanical devices used are the same manufacturer, are controlled by the same software system on a single server and use the same policies and procedures. Attach a list of all licensed ADDS and include the ADDS license number, manufacturer and model number. [CCR 1715.1(g)]

Please mark the appropriate box for each item. If "NO", enter an explanation and timeframe when the deficiency will be completed on the "CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE" lines at the end of the section. If more space is needed, you may add additional sheets.

Pharmacy Name: Address:	
	Zip Code:
Phone:	Fax number:
Website:	
Pharmacy License #:	Expiration Date:
DEA Registration #:	
DEA Inventory Date:	

	Controlled Sul	bstance (CS) invent	tory Reconciliation Date (CCR 1715.65(c)):
Phai	rmacy Hours: I	VI-F:	Saturday Sunday RPH#
	Email:		
_	S License #:		ADDS Expiration Date:
(Atta	ach additional	sheets if necessary	
ADD	S Address:		
City			Zip Code:
	S Hours:		Saturday Sunday
		——————————————————————————————————————	different than the pharmacy:
Reas	son for comple	ting self-assessmen	nt:
	Performing self .715.1(a)]	f-assessment before	e July 1 of every odd-numbered year. [BPC 4427.7, CCR
		elf-assessment with CR 1715.1(b)(1)]	hin 30 days when a new ADDS license was issued.
		elf-assessment with CR 1715.1(b)(2)]	hin 30 days when there was a change in PIC.
	Completing a se	elf-assessment with	hin 30 days when there was a change in the licensed
lo	ocation of an A	DDS to a new addr	ress. [BPC 4427.7, CCR 1715.1(b)(3)]
	FOR ALL TYPI	ES OF ADDS: COM	PLETE SECTIONS 1, 2 AND 3
	SECTION 1: [DEFINITIONS/TYPE	OF ADDS DEVICE USED
	An ADDS – "	Automated drug de	elivery system," a mechanical system that performs operation
		•	nding or administration, relative to storage, dispensing, or
		•	shall collect, control, and maintain all transaction information
	-	ock the movement (y. [BPC 4119.11(b)(of drugs into and out of the system for security, accuracy, and
	accountabilit	y. [BFC 4113.11(b)([1], 4017.3(a)]
o N/A	IDENTIFY THE	E TYPE OF ADDS DE	EVICE USED
	storage and o	dispensing of prescr	- "Automated PATIENT dispensing system," an ADDS for ribed drugs directly to the patients pursuant to prior BPC 4119.11(b)(2), 4017.3(c)]
	1.2 The pharm	nacy uses an AUDS ·	- "Automated UNIT DOSE system," an ADDS for the storage

Page 2 of 33

PIC Initials _____

17M-112 (Rev. 4/2025)

Yes No N/A	
	1.3 The pharmacy uses an AUDS – "Automated UNIT DOSE system," an ADDS for the storage and retrieval of unit dose drugs for administration and dispensing to patients by a physician in a drug room or hospital emergency room when the pharmacy is closed. [BPC 4427.2(i), 4427.65, 4056, 4068]
Yes No N/A	SECTION 2: LOCATION OF DEVICES
	2.1 Provides pharmacy services to the patient of <u>covered entities</u> , as defined that are eligible for discount drug programs under federal law as specified through the use of an APDS as defined. The APDS need not be at the same location as the underlying operating pharmacy if all the specific conditions are met. "Covered entity" as defined by section 256b of Title 42 of United Sates Code. [BPC 4119.11(a)]
	2.2 Provides pharmacy services through an APDS <u>adjacent to the secured pharmacy area</u> of the pharmacy holding the ADDS license. [BPC 4427.3(b)(1)]
	2.3 Provides pharmacy services through an AUDS in <u>a health facility</u> licensed pursuant to section 1250 of the Health and Safety Code (HSC) that complies with section 1261.6 of the Health and Safety Code. [BPC 4427.3(b)(2), HSC 1250, HSC 1261.6]
	2.4 Provides pharmacy services through an AUDS in <u>a clinic</u> licensed pursuant to section 1204 or 1204.1 of the Health and Safety Code, or section 4180 or 4190 of Business and Professions Code. [BPC 4427.3(b)3)]
	2.5 Provides pharmacy services through a <u>correctional clinic</u> . [BPC 4187.1, 4427.3(b)(4)]
	2.6 Provides pharmacy services through a <u>medical office</u> or other location where patients are regularly seen for purposes of diagnosis and treatment, and the APDS is only used to dispense dangerous drugs and dangerous devices to patients of the practice. [BPC 4427.3(b)(5), 4427.6(j)]
	2.7 <u>AUDS operated by a licensed hospital pharmacy</u> , as defined in section 4029 of the Business and Professions Code, and is used solely to provide doses administered to patients while in a licensed general acute care hospital facility or a licensed acute psychiatric hospital facility, as defined in subdivision (a) and (b) of section 1250 of the Health and Safety Code, shall be exempt from the requirement of obtaining an ADDS license, if the licensed hospital pharmacy owns or leases the AUDS and owns the dangerous drugs and dangerous devices in the AUDS. The AUDS shall comply with all other requirements for an ADDS in Article 25 of the Business and Professions Code. The licensed hospital pharmacy shall maintain a list of the locations of each AUDS it operates and shall make the list available to the board upon request. [BPC 4427.2(i)]
	 2.8 AUDS operated by a licensed hospital that contains 100 beds or fewer (Drug Room), as defined in section 4056 of the Business and Professions Code, and is used to provide doses administered to patients while in a licensed general acute care hospital and to dispense drugs to outpatients: [BPC 4056, 4427.2(i)] 2.8.1. Only if the physician determines that it is in the best interest of the patient that a particular drug regimen be immediately commenced or continued,

res No N/A	 2.8.2. The physician reasonably believes that a pharmacy located outside the hospital is not available and accessible at the time of dispensation to the patient within 30 minutes of the hospital pharmaceutical services or within a 30-mile radius from the hospital pharmaceutical services by means of the method of transportation the patient states that they intend to use, and 2.8.3. The quantity dispensed to any outpatient is limited to an amount necessary to maintain uninterrupted therapy during the period when the pharmaceutical services outside the hospital are not readily available or accessible and does not exceed a 72-hour supply.
	 2.9 AUDS located in the emergency room operated by a licensed hospital pharmacy, as defined in subdivisions (a) and (b) of section 4029 of the Business and Professions Code, and is used solely to provide doses administered to patients while in a licensed general acute care hospital facility or a licensed acute psychiatric hospital facility, as defined in subdivisions (a) and (b) of section 1250 of the Health and Safety Code, and to dispense to an emergency room patient if: [BPC 4068, 4427.2(i)] 2.9.1. The hospital pharmacy is closed and there is no pharmacist available in the hospital. 2.9.2. The drug is acquired by the hospital pharmacy. 2.9.3. The dispensing information is recorded and provided to the pharmacy when the pharmacy reopens. 2.9.4. The hospital pharmacy retains the dispensing information and, if the drug is a schedule II, schedule III, or schedule IV-controlled substance, dispensing information is reported to the Department of Justice pursuant to section 11165 of the Health and Safety Code. 2.9.5. The prescriber determines it is in the best interest of the patient that a particular drug regimen be immediately commenced or continued and the prescriber reasonably believes a pharmacy located outside the hospital is not available and accessible at the time of dispensing to the patient. 2.9.6. The quantity of drugs dispensed to any patient pursuant to this section is limited to an amount necessary to maintain uninterrupted therapy during the period when pharmacy services outside the hospital are not readily available or accessible, but shall not exceed a 72-hour supply. Note: Licensure of AUDS operated under these provisions is required.
	2.10. An AUDS located and operated in a facility licensed in CA with the statutory authority to provide pharmaceutical services. [BPC 4427.65(a)(1)] Type of Facility: Statutory authority to provide pharmaceutical services (List code section):
	2.11. An AUDS located and operated in a jail, youth detention facility, or other correctional facility where drugs are administered within the facility under the authority of the medical director. [BPC 4427.3(b)(6), BPC 4427.65(a)(2)] Type of Facility: Statutory authority for type of Facility (List code section):

Please Note: An ADDS license is not required for technology, installed <u>within the secured</u> <u>licensed premises area of a pharmacy,</u> used in the selecting, counting, packaging, and labeling of dangerous drugs and dangerous devices. [BPC 4427.2(j)]

SECTION 3: GENERAL REQUIREMENTS FOR ALL TYPES OF ADDS

(For 3.1 through 3.12, answer N/A if licensure not required)

Yes No N/A 3.1 The ADDS is installed, leased, owned, or operated in California and is licensed by the board. [BPC 4427.2(a), 4427.4(a)]
□□□ 3.2 The ADDS license was issued to a holder of a current, valid, and active pharmacy license of a pharmacy located and licensed in California. [BPC 4427.2(b)]
□□□ 3.3 Each ADDS has a separate license. [BPC 4427.2(c)]
 □□□□ 3.4 The licensed ADDS meets the following conditions: [BPC 4427.2(d)] □ 3.4.1. Use of the ADDS is consistent with legal requirements. □ 3.4.2. The proposed location for installation of the ADDS meets the requirements of section 4427.3, and the ADDS is secure from access and removal by unauthorized individuals. □ 3.4.3. The pharmacy's policies and procedures related to the ADDS include appropriate security measures and monitoring of the inventory to prevent theft and diversion. □ 3.4.4. The pharmacy's policy and procedures include provisions for reporting to the board drug losses from the ADDS inventory, as required by law.
□□□ 3.5 A prelicensure inspection was conducted within 30 days of a completed application for the ADDS license at the proposed location(s). [BPC 4427.2(e)] List date of pre-license inspection:
□□□ 3.6 The pharmacy is aware a relocation of an ADDS shall require a new application for licensure. [BPC 4427.2(e), BPC 4119.11(a)(9)]
□□□ 3.7. The pharmacy is aware a replacement of an ADDS shall require notification to the board within 30 days. [BPC 4427.2(e), BPC 4119.11(a)(9)]
3.8 The pharmacy is aware the ADDS license will be canceled by operation of law if the underlying pharmacy license is not current, valid, and active. Upon reissuance or reinstatement of the underlying pharmacy license, a new application for an ADDS license is submitted to the board. [BPC 4427.2(f), BPC 4119.11(a)(10)]
3.9 The pharmacy is aware the holder of an ADDS license will advise the board in writing within days if use of an ADDS is discontinued. [BPC 4427.2(g), BPC 4119.11(a)(11)]
□□□ 3.10 The ADDS license is renewed annually, and the renewal date is the same as the underlying pharmacy license. [BPC 4427.2(h)]
□□□ 3.11 The ADDS is placed and operated inside an enclosed building, with a premises address, at a location approved by the board. [BPC 4427.3(a)]

Yes No N/A	3.12 Prior to installation, the pharmacy holding the ADDS license and the location where the ADDS is placed pursuant to subdivision (b) of Business and Professions Code section 4427.3, jointly developed and implemented written policies and procedures to ensure safety, accuracy, accountability, security, patient confidentiality, and maintenance of the ADDS, as well as quality, potency, and purity of the drugs and devices. The policies and procedures are maintained at the location of the ADDS and at the pharmacy holding the ADDS license. [BPC 4427.3(c)]
	3.13 Each ADDS is operated under the supervision of the pharmacy holding the ADDS license. [BPC 4427.4(b)]
	3.14 The ADDS is considered an extension and part of the pharmacy holding the ADDS license, regardless of the ADDS location, and is subject to inspection pursuant to BPC section 4008. [BPC 4427.4(c)]
	3.15 Drugs and devices stored in an ADDS will be deemed part of the inventory and the responsibility of the pharmacy holding the ADDS license, and the drugs and devices dispensed from the ADDS shall be considered to have been dispensed by the pharmacy. [BPC 4427.4(d)]
	3.16 The stocking and restocking of an ADDS is performed by a pharmacist, or by a pharmacy technician or intern pharmacist under the supervision of a pharmacist, except for an ADDS located in a health facility pursuant to HSC 1250, where the stocking and restocking of the ADDS may be performed in compliance with HSC 1261.6. [BPC 4427.4(e)(1)]
	3.17 Access to the ADDS is controlled and tracked using an identification or password system or biosensor. [BPC 4427.4(e)(2), 4427.65(c)(5)(D), HSC 1261.6(f)(4)]
	3.18 The ADDS makes a complete and accurate record of all transactions including all users accessing the system and all drugs added to, or removed from, the system. [BPC 4427.4(e)(3), BPC 4427.65(c)(5)(E), BPC 4119.11(f)]
	3.19 Are drugs or devices not immediately transferred into an ADDS upon arrival at the ADDS location, stored for no longer than 48 hours in a secured room within the ADDS location approved by the board under section 4427.3 of the Business and Professions Code, and, upon retrieval of the dangerous drugs and dangerous devices from the secured storage, is an inventory taken to detect any losses or overages? [BPC 4427.4(f)]
	3.20 Prior to installation, and annually thereafter, the pharmacy holding the ADDS license provides training on the operation and use of the ADDS to the pharmacy personnel and to personnel using the ADDS at the location where the ADDS is placed pursuant to BPC 4427.3(b). [BPC 4427.5]
	3.21 The pharmacy complies with all recordkeeping and quality assurance requirements established in pharmacy law and regulations, and maintains records within the licensed pharmacy holding the ADDS license and separate from other pharmacy records. [BPC 4427.7(b), BPC 4427.7(b)]

Yes No N/A	
	3.22 The record of quality assurance review, as provided in California Code of Regulation section 1711(e), is immediately retrievable in the pharmacy for at least one year from the date the record was created. [CCR 1711(f)]
	3.23 An investigation of each medication error shall commence as soon as is reasonably possible, but no later than 2 business days from the date the medication error is discovered. The pharmacy will submit to the board any quality assurance record related to the use of a licensed ADDS within 30 days of completion of the quality assurance review. Any facility with an unlicensed ADDS must report the quality assurance review to the board at the time of annual renewal of the pharmacy's license. [CCR 1711 (d), CCR 1711(f)]
	3.24 The pharmacy's inventory reconciliation report prepared at least once every three months for federal Schedule II controlled substances, includes the federal Schedule II controlled substances stocked in the ADDS. [CCR 1715.65(a)(1), BPC 4427.4(c),(d)]
	3.25 The pharmacy's inventory reconciliation report is prepared at least once every 12 months for alprazolam 1mg/unit, alprazolam 2mg/unit, Tramadol 50mg/unit and promethazine/codeine 6.25mg/10mg/5ml. This report includes these controlled substances stocked in the ADDS. [CCR 1715.65(a)(2)]
	3.26 Inventory activities are performed at least once every two years from the performance of the last inventory activities for each controlled substance that is not listed as a federal Schedule II controlled substance, alprazolam 1mg/unit, alprazolam 2mg/unit, tramadol 50mg/unit and promethazine/codeine 6.25mg/10mg/5ml. These inventory activities include the controlled substances stocked in the ADDS. [CCR 1715.65(a)(3)(B)]
	3.27 For any controlled substance stocked in the ADDS that is not a federal Schedule II controlled substance, alprazolam 1mg/unit, alprazolam 2mg/unit, tramadol 50mg/unit and promethazine/codeine 6.25mg/10mg/5ml, the pharmacy prepares an inventory reconciliation report for the identified loss of that controlled substance in the ADDS no later than three months after the discovery of the reportable loss and is completed if the loss is discovered either by the inventory activities as identified in Section 3.26 above or any other manner. [CCR 1715.65(a)(3)(A)]
	3.28 A physical count, not an estimate, of the federal controlled substances in the ADDS is taken for the inventory reconciliation reports, except for an inpatient hospital pharmacy or licensed correctional pharmacy where the inventory in the ADDS may be accounted for using means other than a physical count. [CCR 1715.65(c)(1), 1715.65(h)]
	3.29 The PIC or the consulting pharmacist for a licensed clinic (as included/defined in BPC 4180 or 4190) reviews all inventory activities performed and inventory reconciliation reports prepared in accordance with CCR 1715.65 and has established and maintained secure methods to prevent losses of federal controlled substances. [CCR 1715.65(b)]

res No N/A	3.30 The pharmacy has written policies and procedures developed for performing the inventory activities and preparing the inventory reconciliation reports in accordance with CCR 1715.65. These should include the inventory of federal controlled substances stored in the ADDS. [CCR 1715.65(b)]				
	3.31 The original board-issued ADDS permit and current renewal are posted at the ADDS premise, where they may be clearly read by the public. [BPC 4058]				
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE				
	CHECK OFF THE TYPE OF ADDS USED BY THE PHARMACY AND COMPLETE THE FOLLOWING SECTION(S) AS IT APPLIES TO THE TYPE OF ADDS THE PHARMACY IS USING.				
	Please Note: The Pharmacist-in-Charge of the pharmacy and the pharmacy owner or hospital administrator of the ADDS shall sign the Certification Acknowledgment on page 33 after completing the assessment.				
	 SECTION 4: APDS used to provide pharmacy service to covered entities and medical professionals contracted with a covered entity. SECTION 5: APDS adjacent to the secured pharmacy area (or) APDS located in a Medical Offices (or) APDS located where patients are regularly seen for purposes of diagnosis and treatment to only be used for patients of the practice (or) APDS located at a clinic pursuant to HSC 1204, HSC 1204.1, BPC 4180, or BPC 4190. SECTION 6: AUDS in a health facility pursuant to HSC 1250 that complies with HSC 1261.6. SECTION 7: AUDS operated by a correctional clinic pursuant to BPC 4187.1, 4427.3(b)(6), or 4427.65(a)(2). SECTION 8:				
	 (Please note: Hospital pharmacies and drug rooms must also complete Section 6 for AUDS used for administration. Section 8 addresses additional requirements for hospital pharmacies and drug rooms operating an AUDS used for dispensing. SECTION 9: AUDS through a facility licensed in California with statutory authority to provide pharmaceutical services (or) 				

 AUDS through a jail, youth detention facility, or other correctional facility where drugs are administered within the facility under the authority of the medical director pursuant to BPC 4187.1, 4427.3(b)(6), or 4427.65(a)(2).

SECTION 4: APDS USED TO PROVIDE PHARMACY SERVICES TO COVERED ENTITIES AND MEDICAL PROFESSIONALS CONTRACTED WITH A COVERED ENTITY

A. GENERAL REQUIREMENTS Yes No N/A □□□ 4.1 A Covered Entity May Contract with Pharmacy to Provide Services. The operating pharmacy providing pharmacy services to the patients of the covered entity, including, unless prohibited by any other law, patients enrolled in the Medi-Cal program, shall be under contract with the covered entity as described in BPC section 4126 to provide those pharmacy services through the use of the APDS. [BPC 4119.11(a)(2)] $\Box\Box\Box$ 4.2 Contracts between the covered entities and the pharmacy shall comply with the guidelines published by the Health Resources and Services Administration and are available for inspection by Board during normal business hours. [BPC 4126(a)] □□□ 4.3 Drugs purchased and received pursuant to section 256b of Title 42 of the United States Code (USC) shall be segregated from the pharmacy's other drug stock by physical or electronic means. [BPC 4126(b)] □□□ 4.4 All records of acquisition and disposition of these drugs shall be readily retrievable in a form separate from the pharmacy's other records. [BPC 4126(b)] $\Box\Box\Box$ 4.5 The drugs shall be returned to the distributor from which the drugs were obtained if drugs to be dispensed to patient of a covered entity pursuant to section 256b of Title 42 USC cannot be distributed because of a change in circumstances of the covered entity or the pharmacy. [BPC 4126(c)] $\Box\Box\Box$ 4.6 A licensee that participates in a contract to dispense preferentially priced drugs pursuant to this section shall not have both a pharmacy and a wholesaler license. [BPC 4126(d)] CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE_____ **B. UNDERLYING OPERATING PHARMACY** Yes No N/A $\Box\Box\Box$ 4.7 The operating pharmacy has obtained a license from the Board to operate the APDS which includes the address of the APDS location and the identity of the covered entity or affiliated site. [BPC 4119.11(a)(1)]

Yes No N/A	4.8 A separate license was obtained for each APDS I concurrent with the pharmacy license. (Note: The APDS at an address for which the Board has issued 4119.11(a)(8), 4107]	Board my issue a license for operation of an
	4.9 A prelicensure inspection of the proposed APDS 30 days after Board receipt of the APDS application Date of Inspection:	n before Board approval. [BPC 4119.11(a)(9)]
	4.10 The pharmacy will submit a new APDS licensure APDS is relocated. [BPC 4119.11(a)(9)]	e application for Board approval if the current
	4.11 The pharmacy will notify the Board within 30 d discontinuing an APDS. [BPC 4119.11(a)(9), 4119.1	•
	4.12 A new APDS licensure application will be submunderlying operating pharmacy's permit being can (Once cancelled, a new APDS license can only be is reissued or reinstated.) [BPC 4119.11(a)(10)]	celled, not current, not valid, or inactive.
	4.13 The pharmacy does not have more than 15 API pharmacy under this section. [BPC 4119.11(d)(10),	
	1	2
	3	4
	5	6
	7	8
	9	10
	11	_ 12
	13	14
	15	
Yes No N/A	4.14 The operating pharmacy will maintain the write after the last date of use for that APDS. [BPC 4119]	
	4.15 The operating pharmacy of an APDS has completed a biennial Self-Assessment pursuant to CCR 1715.1 or BPC 4427.7(a) evaluating the pharmacy's compliance with pharmacy law relating to the use of the APDS. [BPC 4119.11(i)] Date of Last Self-Assessment:	
	 4.16 The underlying operating pharmacy is solely re □ 4.16.1. The security of the APDS. [BPC 4119.11 □ 4.16.2. The operation of the APDS. [BPC 4119.32 □ 4.16.3. The maintenance of the APDS. [BPC 413.32 	(a)(5)] l1(a)(5)]

	ECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE:
C.	PHARMACIST RESPONSIBILITIES
of the	ne operation of the APDS is under the supervision of a licensed pharmacist acting on behalf operating pharmacy. [BPC 4119.11(a)(7)]. Note: The pharmacist need not be physically nt at the site of the APDS and may supervise the system electronically.
cards, stocki	e pharmacist performs the stocking of the APDS or if the APDS utilizes removable pockets drawers, similar technology, or unit of use or single dose containers are used, the ng of the APDS may be done outside of the facility if the following conditions are met: 4119.11(g)]
su sir 4.: of ev 4.: dr	18.1. A pharmacist, intern pharmacist or pharmacy technician working under the pervision of the pharmacist may place drugs into the removeable pockets, cards, drawers, milar technology, or unit of use or single dose containers. [BPC 4119.11(g)(1)] 18.2. Transportation of removeable pockets, cards, drawers or similar technology or unit use or single dose container between the pharmacy and the facility are in a tamper-rident container. [BPC 4119.11(g)(2] 18.3. There are policies and procedures to ensure the removeable pockets, cards, awers, similar technology, or unit of use or single dose containers are properly placed into e APDS. [BPC 4119.11(g)(3)]
drugs all tra [BPC 4	pharmacist conducts a monthly review of the APDS including a physical inspection of the contained within, operation, maintenance, and cleanliness of the APDS, and a review of nsaction records in order to verify the security and accountability of the APDS. 4119.11(h)] of Last Review:
[CCR 1 □ 4.: □ 4.: □ 4.:	The Pharmacist-in-charge of the offsite ADDS/APDS has ensured the following: 1715.65(h)] 20.1. All controlled substances added to the ADDS/APDS are accounted for; 20.2. Access to ADDS/APDS is limited to authorized facility personnel; 20.3. An ongoing evaluation of discrepancies or unusual access associated with controlled bstance is performed; and 20.4. Confirmed losses of controlled substances are reported to the Board.

DEVICE REQUIREMENTS

Yes No N/A			
	bio	senso lividu	ss to the APDS is controlled and tracked using an identification or password system or or. Systems tracked via password shall include a camera that records a picture of the al accessing the APDS and the picture must be maintained for a minimum of 180 days. 19.11(e)]
			APDS will collect, control, and maintain all transaction information to accurately track ement of drugs into and out of APDS. [BPC 4119.11(c)(1)]
	for	mat f	APDS will maintain transaction information in a readily available in downloadable or review and inspection by authorized individuals for a minimum of 3 years.
	[BF	PC 411 4.24 proc	APDS may dispense medications DIRECTLY to the patient if all the following are met: 19.11(d)] 1.1. The pharmacy has developed, implemented, and maintained written policies and edures with respect to all the following and the policies are reviewed annually: [BPC 0.11(d)(1)]
			4.24.1.1. Maintaining the security of the APDS and dangerous drug and devices within the APDS.
			4.24.1.2. Determining and applying inclusion criteria regarding which drugs and devices are appropriate for placement in the APDS and for which patients, including when consultation is needed.
			4.24.1.3. Ensuring patients are aware that consultation with a pharmacist is available for any prescription medication, including those delivered via APDS.
			4.24.1.4. Describing assignment of responsibilities and training of pharmacy personnel, and other personnel using the APDS at that location, regarding maintenance and filling procedures for the APDS.
			4.24.1.5. Orienting patients on the use of APDS and notifying patients when expected prescription medications are not available in the APDS. The pharmacy must ensure the use of the APDS does not interfere with the delivery of drugs and devices.
			4.24.1.6. Ensuring the delivery of drugs and devices to patients expecting medications from the APDS in the event that the APDS is disabled or malfunctions. te of Last Policy Review:
		dem APD:	.2 The APDS may only be used for patients who have signed a written consent onstrating their informed consent to receive prescribed drugs and devices from the S. Attach a copy of the consent form to the back of the self-assessment. 4119.11(d)(2)]
			.3 The APDS shall have a means to identify each patient and only release the identified ent's drugs and devices to the patient or the patient's agent. [BPC 4119.11(d)(3)]

		4.24.4 The pharmacist has performed all clinical services as part of the dispensing process including, but not limited to, drug utilization review and consultation. [BPC 4119.11(d)(4)]
		4.24.5 Drugs are dispensed from the APDS only upon authorization from the pharmacist after the pharmacist has reviewed the prescription and the patient's profile for potentials contraindications and adverse drug reactions. [BPC 4119.11(d)(5)]
		4.24.6 The pharmacist shall consult patients for the first time on all prescribed drugs and devices dispensed from the APDS. The consultation shall be provided by a Board_licensed pharmacist via telecommunication link that has two-way audio and video capabilities. [BPC 4119.11(d)(6)]
		4.24.7 The APDS shall prominently post a notice that provides the name, address and telephone number of the pharmacy [BPC 4119.11(d)(7)]
		4.24.8 The prescription labels on all drugs dispensed via APDS shall comply with BPC 4076 and CCR 1707.5. [BPC 4119.11(d)(8)]
es No N/A		The federal warning label prohibiting transfer of controlled substances is on the prescription ntainer. [21 CFR 290.5]
	оре	Prescriptions are dispensed in a new and child-resistant container, or senior-adult ease-of- ening tested container, or in a non-complying package only pursuant to the prescriber or een requested by the purchaser. [15 USC 1473(b), 16 CFR 1700.15, CCR 1717]
	4.27	Patient package inserts are dispensed with all estrogen medications. [21 CFR 310.515]
		The pharmacy provides patients with Black Box Warning Information in conformance with CFR 201.57(c).
	4.29	Medication guides are provided on required medications. [21 CFR 208.1]
		The pharmacy uses the APDS to deliver prescription medications to patients provided: [CCR 13(d)]
		4.30.1 The pharmacist has determined that each patient using the APDS met the inclusion criteria for use of the APDS established by the pharmacy prior to the delivery of the prescription medication to the patient.
		4.30.2 The APDS has a means to identify each patient and only release the patient's
		prescription medications to the patient or patient's agent. 4.30.3 The pharmacy provides an immediate consultation with a pharmacist, either inperson or via telephone, upon the request of a patient.
		4.30.4 Any incident involving the APDS where a complaint, delivery error, or omission has occurred shall be reviewed as part of the pharmacy's quality assurance program mandated by Business and Professions Code section 4125.
	СО	RRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE

	D. RE	CORD KEEPING REQUIREMENTS
Yes No N/A	or the pha which the electronic records m	cords maintained electronically must be maintained so that the pharmacist-in-charge, rmacist on duty if the pharmacist-in-charge is not on duty, must, at all times during licensed premises are open for business, be able to produce a hardcopy and copy of all records of acquisition and disposition or other drug or dispensing-related aintained electronically. [BPC 4105(d)(1)] /E ACTION OR ACTION PLAN AND COMPLETION DATE
		ACTION ON ACTION I LAN AND COMILETION DATE
	E. PC	LICIES AND PROCEDURES
Yes No N/A	•	armacy has developed and implemented written policies and procedures with all the following and the policies are reviewed annually [BPC 4119.11(d)(1), CCR
	☐ 4.32.1 APDS.	Maintaining the security of the APDS and dangerous drugs and devices within the
		Determine and apply inclusion criteria regarding which drugs, devices are criate for placement in the APDS and for which patients, including when consultation led.
		Ensuring patients are aware that consultation with a pharmacist is available for any ption medication including those delivered via APDS.
	other	Describing assignment of responsibilities and training of pharmacy personnel and personnel using the APDS at that location regarding maintenance and filling ures for the APDS.
	medic	Orienting patients on use of the APDS and notifying patients when expected ations are not available in the APDS. The pharmacy must ensure the use of the APDS ot interfere with the delivery of drugs and devices.
	the AF	Ensuring the delivery of drugs and devices to patients expecting medications from DS if the APDS is disabled or malfunctions. st Policy Review:
	•	armacy has policies and procedures for security measures and monitoring of the to prevent theft and diversion. [BPC 4427.2(d)(3)]
	21 CFR 13	armacy reports drug losses as required by law. [BPC 4104, 4427.2(d)(4), CCR 1715.6, 01.76] ted Drug Loss:

SECTION 5: (Check the appropriate box) APDS ADJACENT TO THE SECURED PHARMACY AREA APDS LOCATED IN A MEDICAL OFFICE APDS LOCATED WHERE PATIENTS ARE REGULARLY SEEN TREATMENT TO ONLY BE USED FOR PATIENTS OF THE PE APDS LOCATED AT A CLINIC PURSUANT TO HSC 1204, H A. GENERAL REQUIREMENTS 5.1 The pharmacy maintains the APDS policies and produse for that APDS. [BPC 4427.6(I), CCR 1713(f)] 5.2 The pharmacy uses the APDS to deliver prescription 1713(d)] 5.2.1 A pharmacist has determined that each patien criteria for use of the APDS established by the pharmacist in the patient. 5.2.2 The APDS has a means of identifying each parescription medication to the patient or patient's a prescription medication to the patient or patient's a person or via telephone, upon the request of a patiency in the second occurred shall be reviewed as part of the pharmacy by Business and Professions Code section 4125. 5.3 The pharmacy does not have more than 15 APDS lice pharmacy under this section. [BPC 4427.6(k)] List of curtain the patient of the pharmacy under this section. [BPC 4427.6(k)] List of curtain the patient of the pharmacy under this section. [BPC 4427.6(k)] List of curtain the patient of the pharmacy under this section. [BPC 4427.6(k)] List of curtain the patient of the pharmacy under this section. [BPC 4427.6(k)] List of curtain the patient of the pharmacy under this section. [BPC 4427.6(k)] List of curtain the patient of the pharmacy under this section. [BPC 4427.6(k)] List of curtain the patient of the pharmacy under this section. [BPC 4427.6(k)] List of curtain the patient of the pharmacy under this section. [BPC 4427.6(k)] List of curtain the patient of the pharmacy under this section.	RACTICE C 1204.1, BPC 4180, OR BPC 4190. edures for 3 years after the last dat medications to patients provided: nt using the APDS meets inclusion hacy prior to delivery of prescription ient and only release that patient's
 □ APDS LOCATED WHERE PATIENTS ARE REGULARLY SEED TREATMENT TO ONLY BE USED FOR PATIENTS OF THE PER APDS LOCATED AT A CLINIC PURSUANT TO HSC 1204, HEAD. □ APDS LOCATED AT A CLINIC PURSUANT TO HSC 1204, HEAD. □ APDS LOCATED AT A CLINIC PURSUANT TO HSC 1204, HEAD. □ APDS LOCATED AT A CLINIC PURSUANT TO HSC 1204, HEAD. □ S.1 The pharmacy maintains the APDS policies and produce for that APDS. [BPC 4427.6(I), CCR 1713(f)] □ 5.2.1 A pharmacist has determined that each patient criteria for use of the APDS established by the pharmacy interior to the patient. □ 5.2.2 The APDS has a means of identifying each parapersoription medication to the patient or patient's and person or via telephone, upon the request of a patient of the pharmacy interior involving the APDS where a compocurred shall be reviewed as part of the pharmacy by Business and Professions Code section 4125. 5.3 The pharmacy does not have more than 15 APDS lice pharmacy under this section. [BPC 4427.6(k)] List of curt. 1	RACTICE C 1204.1, BPC 4180, OR BPC 4190. edures for 3 years after the last dat medications to patients provided: nt using the APDS meets inclusion hacy prior to delivery of prescription ient and only release that patient's
TREATMENT TO ONLY BE USED FOR PATIENTS OF THE PAPDS LOCATED AT A CLINIC PURSUANT TO HSC 1204, HA. GENERAL REQUIREMENTS 5.1 The pharmacy maintains the APDS policies and produse for that APDS. [BPC 4427.6(I), CCR 1713(f)] 5.2 The pharmacy uses the APDS to deliver prescription 1713(d)] □ 5.2.1 A pharmacist has determined that each patiencriteria for use of the APDS established by the pharmacist in the patient. □ 5.2.2 The APDS has a means of identifying each parence prescription medication to the patient or patient's appression or via telephone, upon the request of a patient involving the APDS where a compocurred shall be reviewed as part of the pharmacy by Business and Professions Code section 4125. 5.3 The pharmacy does not have more than 15 APDS lice pharmacy under this section. [BPC 4427.6(k)] List of curt. 2	RACTICE C 1204.1, BPC 4180, OR BPC 4190. edures for 3 years after the last dat medications to patients provided: nt using the APDS meets inclusion hacy prior to delivery of prescription ient and only release that patient's
 A. GENERAL REQUIREMENTS 5.1 The pharmacy maintains the APDS policies and produse for that APDS. [BPC 4427.6(I), CCR 1713(f)] 5.2 The pharmacy uses the APDS to deliver prescription 1713(d)] 5.2.1 A pharmacist has determined that each patient criteria for use of the APDS established by the pharmacist nation to the patient. 5.2.2 The APDS has a means of identifying each paraprescription medication to the patient or patient's a person or via telephone, upon the request of a patient of some coccurred shall be reviewed as part of the pharmacy by Business and Professions Code section 4125. 5.3 The pharmacy does not have more than 15 APDS lice pharmacy under this section. [BPC 4427.6(k)] List of curt. 2	edures for 3 years after the last dat medications to patients provided: nt using the APDS meets inclusion nacy prior to delivery of prescriptio ient and only release that patient's
 5.1 The pharmacy maintains the APDS policies and produse for that APDS. [BPC 4427.6(I), CCR 1713(f)] 5.2 The pharmacy uses the APDS to deliver prescription 1713(d)] 5.2.1 A pharmacist has determined that each patie criteria for use of the APDS established by the pharmacist not the patient. 5.2.2 The APDS has a means of identifying each parprescription medication to the patient or patient's a prescription medication to the patient or patient's a section or via telephone, upon the request of a patient of the pharmacy by Business and Professions Code section 4125. 5.3 The pharmacy does not have more than 15 APDS licepharmacy under this section. [BPC 4427.6(k)] List of curt. 2	medications to patients provided: it using the APDS meets inclusion hacy prior to delivery of prescriptio fent and only release that patient's
use for that APDS. [BPC 4427.6(I), CCR 1713(f)] 5.2 The pharmacy uses the APDS to deliver prescription 1713(d)] □ 5.2.1 A pharmacist has determined that each paties criteria for use of the APDS established by the pharmacist not the patient. □ 5.2.2 The APDS has a means of identifying each paraprescription medication to the patient or patient's a prescription medication to the patient or patient's a person or via telephone, upon the request of a patient of 5.2.4 Any incident involving the APDS where a compocurred shall be reviewed as part of the pharmacy by Business and Professions Code section 4125. 5.3 The pharmacy does not have more than 15 APDS lice pharmacy under this section. [BPC 4427.6(k)] List of curtain the pharmacy under this section. [BPC 4427.6(k)] List of curtain the pharmacy under this section. [BPC 4427.6(k)] List of curtain the pharmacy under this section. [BPC 4427.6(k)] List of curtain the pharmacy under this section. [BPC 4427.6(k)] List of curtain the pharmacy under this section. [BPC 4427.6(k)] List of curtain the pharmacy under this section. [BPC 4427.6(k)] List of curtain the pharmacy under this section. [BPC 4427.6(k)] List of curtain the pharmacy under this section.	medications to patients provided: it using the APDS meets inclusion hacy prior to delivery of prescriptio fent and only release that patient's
 1713(d)] □ 5.2.1 A pharmacist has determined that each patient criteria for use of the APDS established by the pharmacist not the patient. □ 5.2.2 The APDS has a means of identifying each parprescription medication to the patient or patient's at prescription medication to the patient or patient's at person or via telephone, upon the request of a patient person or via telephone, upon the request of a patient solution occurred shall be reviewed as part of the pharmacy by Business and Professions Code section 4125. 5.3 The pharmacy does not have more than 15 APDS lice pharmacy under this section. [BPC 4427.6(k)] List of curt. 1	nt using the APDS meets inclusion nacy prior to delivery of prescriptionent and only release that patient's
 5.2.1 A pharmacist has determined that each paties criteria for use of the APDS established by the pharmacist not the patient. 5.2.2 The APDS has a means of identifying each parprescription medication to the patient or patient's a prescription medication to the patient or patient's a person or via telephone, upon the request of a patient of the pharmacy by Business and Professions Code section 4125. 5.3 The pharmacy does not have more than 15 APDS lice pharmacy under this section. [BPC 4427.6(k)] List of curt. 	nacy prior to delivery of prescriptio ent and only release that patient's
prescription medication to the patient or patient's a □ 5.2.3 The pharmacy provides an immediate consul person or via telephone, upon the request of a patie □ 5.2.4 Any incident involving the APDS where a com occurred shall be reviewed as part of the pharmacy by Business and Professions Code section 4125. 5.3 The pharmacy does not have more than 15 APDS lic pharmacy under this section. [BPC 4427.6(k)] List of cur 1	
 □ 5.2.3 The pharmacy provides an immediate consul person or via telephone, upon the request of a patie □ 5.2.4 Any incident involving the APDS where a comoccurred shall be reviewed as part of the pharmacy by Business and Professions Code section 4125. 5.3 The pharmacy does not have more than 15 APDS lice pharmacy under this section. [BPC 4427.6(k)] List of cur 1. 	gent.
 5.2.4 Any incident involving the APDS where a compocurred shall be reviewed as part of the pharmacy by Business and Professions Code section 4125. 5.3 The pharmacy does not have more than 15 APDS lice pharmacy under this section. [BPC 4427.6(k)] List of curt. 2	ation with a pharmacist, either in-
pharmacy under this section. [BPC 4427.6(k)] List of cur 1 2	olaint, delivery error, or omission h
12	nses for one underlying operating
56	
7 8	
910	
11 12	
1314	

CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE
B. PHARMACIST RESPONSIBILITIES:
5.4 A pharmacist licensed by the board performs all clinical services conducted as part of the dispensing process, including, but not limited to, drug utilization review and consultation. [BPC 4427.6(d)]
5.5 Drugs are dispensed from the APDS only upon authorization from the pharmacist after the pharmacist has reviewed the prescription and the patient's profile for potential contraindications and adverse drug reactions. [BPC 4427.6(e)]
5.6 All prescribed drugs and devices dispensed to the patient from the APDS for the first time are accompanied by a consultation conducted by a California licensed pharmacist. The consultation shall be provided by a Board licensed pharmacist via telecommunication link that has two-way audio and video capabilities. [BPC 4427.6(f)]
 5.7 The pharmacist-in-charge of the offsite ADDS/APDS has ensured the following: [CCR 1715.65(h)] □ 5.7.1. All controlled substances added to the ADDS/APDS are accounted for; □ 5.7.2. Access to ADDS/APDS is limited to authorized facility personnel; □ 5.7.3. An ongoing evaluation of discrepancies or unusual access associated with controlled substance is performed; and □ 5.7.4. Confirmed losses of controlled substances are reported to the Board.
CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE
C. DEVICE REQUIREMENTS:
5.8 The APDS may only be used for patients who have signed a written consent demonstrating their informed consent to receive prescribed drug and devices from the APDS. Attach a copy of the consent form to the back of the self-assessment. [BPC 4427.6(b)]
5.9 The APDS has a means to identify each patient and only release the identified patient's drugs and devices to the patient or the patient's agent. [BPC 4427.6(c)]
5.10 The APDS has a notice, prominently posted on the APDS, which provides the name, address, and phone number of the pharmacy. [BPC 4427.6(g)]
5.11 Any incident involving the APDS where a complaint, error, or omission occurred is reviewe as part of the pharmacy's quality assurance program pursuant to BPC 4125. [BPC 4427.6(i)]

Yes No N/A	
	5.13 The labels on all drugs and devices dispensed by the APDS comply with section 4076 and with section 1707.5 of Title 16 of the California Code of Regulations. [BPC 4427.6(h)]
	5.14 The federal warning label prohibiting transfer of controlled substances is on the prescription container. [21 CFR 290.5]
	5.15 Prescriptions are dispensed in a new and child-resistant container, or senior-adult ease-of-opening tested container, or in a non-complying package only pursuant to the prescriber or when requested by the purchaser. [15 USC 1473[b], 16 CFR 1700.15, CCR 1717]
	5.16 Patient package inserts are dispensed with all estrogen medications. [21 CFR 310.515]
	5.17 The pharmacy provides patients with Black Box Warning Information in conformance with 21 CFR 201.57(c).
	5.18 Medication guides are provided on required medications. [21 CFR 208.1]
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE
	D. RECORD KEEPING REQUIREMENTS
Yes No N/A	
	drugs stored in the APDS separate from other pharmacy records. [BPC 4119.11(a)(4)]
	5.20 Any records maintained electronically must be maintained so that the pharmacist-in-charge, or the pharmacist on duty if the pharmacist-in-charge is not on duty, must, at all times during which the licensed premises are open for business, be able to produce a hardcopy and
	electronic copy of all records of acquisition and disposition or other drug or dispensing-related records maintained electronically. [BPC 4105(d)(1)]
	records maintained electronically. [BPC 4105(d)(1)]

Vaa Na N/A	E.	POLICIES AND PROCEDURES
Yes No N/A	res	The pharmacy has developed and implemented written policies and procedures with pect to all the following and the policies are maintained and reviewed annually: [BPC 27.6(a), CCR 1713(e)]
		5.21.1. Maintaining the security of the APDS and dangerous drug and devices within the APDS.
		5.21.2. Determining and applying inclusion criteria regarding which drugs and devices are appropriate for placement in the APDS and for which patients.
		5.21.3. Ensuring patients are aware that consultation with a pharmacist is available for any prescription medication including those delivered via APDS.
		5.21.4. Describing assignment of responsibilities and training of pharmacy personnel and other personnel using the APDS at that location regarding maintenance and filling procedures for the APDS.
		5.21.5. Orienting patients on use of APDS and notifying patients when expected medications are not available in the APDS. The pharmacy must ensure the use of the APDS does not interfere with the delivery of drugs and devices.
		5.21.6. Ensuring the delivery of drugs and devices to patients expecting medications from the APDS in the event the APDS is disabled or malfunctions. te of Last Policy Review:
	21	The pharmacy reports drug losses as required by law. [BPC 4104, 4427.2(d)(4), CCR 1715.6, CFR 1301.76] t Reported Drug Loss:
	СО	RRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE
		CTION 6: AUDS IN A HEALTH FACILITY PURSUANT TO HSC 1250 THAT COMPLIES WITH HSC 51.6
	A.	GENERAL REQUIREMENTS
	125	purposes of this section, "FACILITY" means any health facility licensed pursuant to section 50 of the Health and Safety Code that has an ADDS provided by a pharmacy. [HSC 51.6(a)(2), 1250]
	For	purposes of this section, "PHARMACY SERVICES" means the provision of both routine and

17M-112 (Rev. 4/2025)

[HSC 1261.6(a)(3)]

Page 18 of 33

emergency drugs and biologicals to meet the needs of the patient, as prescribed by a physician.

PIC Initials _____

Yes No N/A	6.1 The ADDS policies and procedures define access to the ADDS and limits to access to equipment and drugs. [HSC 1261.6(d)(1)]
	6.2 The pharmacy is responsible for review of drugs contained within the ADDS and the operation and maintenance of the ADDS. [HSC 1261.6(h)]
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE
Yes No N/A	B. PHARMACIST RESPONSIBILITIES:
	6.3 The stocking and restocking of an ADDS shall be performed by a pharmacist, or by a pharmacy technician or intern pharmacist under the supervision of a pharmacist, except for an ADDS located in a health facility licensed pursuant to Section 1250 of the Health and Safety Code, where the stocking and restocking of the ADDS may be performed in compliance with Section 1261.6 of the Health and Safety Code: [BPC 4427.4(e)(1)]
	For pharmacies operating ADDS in Skilled Nursing Facilities, Intermediate Care Facilities and Nursing Facilities.
	6.4 The stocking of the ADDS shall be performed by a pharmacist. If the ADDS utilizes removable pockets, cards, drawers, similar technology, or unit of us or single dose containers as defined by the United States Pharmacopeia, the stocking system may be done outside of the facility and be delivered to the facility if all conditions listed in HSC 1261.6(g) are met. [HSC 1261.6(g)].
	6.5 Individualized and specific access to the ADDS is limited to facility and contract personnel authorized by law to administer drugs. [HSC 1261.6(c)]
	6.6 A pharmacist reviews and approves all orders prior to a drug being removed from the ADDS for administration to a patient. The pharmacist reviews the prescriber's orders and the patient's profile for potential contraindications and adverse drug reactions. [HSC 1261.6(f)(2)]
	6.7 A Schedule II controlled substance for a patient in a licensed skilled nursing facility or licensed intermediate care facility is dispensed only after the pharmacist has received:
	☐ 6.7.1 An orally transmitted prescription for a Schedule II controlled substance from the prescriber and only after the pharmacist reduced the prescription to writing in ink in the handwriting of the pharmacist on a form developed by the pharmacy. The prescription must contain: [HSC 11167.5(a)]
	 6.7.1.1. The date the prescription was orally transmitted by the prescriber. 6.7.1.2. The name of the person for whom the prescription was authorized. 6.7.1.3. The name and address of the licensed skilled nursing facility or licensed intermediate care facility in which the person is the patient. 6.7.1.4. The name and quantity of the controlled substance prescribed.
	□ 0.7.1.4. The hame and quantity of the controlled substance prescribed.

	☐ 6.7.1.5. The directions for use, and the name, address, category of the professional licensure, license number, and federal controlled substance registration number of the prescriber.
	☐ 6.7.1.6. The prescription is endorsed by the pharmacist with the pharmacy's name, license number, and address.
	 6.7.2 Prior to filling a prescription for a Schedule II controlled substance that has been electronically transmitted, the pharmacist has produced, signed, and dated a hard copy prescription. The prescription must contain: [HSC 11167.5(a)] 6.7.2.1. The date the prescription was electronically transmitted by the prescriber; 6.7.2.2. The name of the person for whom the prescription was authorized; 6.7.2.3. The name and address of the licensed skilled nursing facility or licensed intermediate care facility in which the person is the patient; 6.7.2.4. The name and quantity of the controlled substance prescribed; 6.7.2.5. The directions for use, and the name, address, category of the professional licensure, license number, and federal controlled substance registration number of the prescriber. 6.7.2.6. The prescription is endorsed by the pharmacist with the pharmacy's name, license number, and address. 6.7.2.7. The prescription contains the signature of the person who received the controlled substance for the licensed skilled nursing facility or licensed intermediate care facility.
	6.7.3 An original Schedule II prescription is written on a form that complies with Health and Safety Code section 11162.1. [HSC 11164(a)]
	6.7.4 An original Schedule II prescription is written with the "11159.2 exemption" for the terminally ill. [HSC 11159.2]
	 6.7.5 In an emergency where failure to issue the prescription may result in loss of life or intense suffering, a Schedule II controlled substance may be dispensed from a prescription transmitted orally or electronically by a prescriber or written on a form not as specified in HSC 11162.1, subject to the following: [HSC 11167(a)-(c)] 6.7.5.1. The order contains all information required by subdivision (a) of Section 11164. 6.7.5.2. The written order is signed and dated by the prescriber in ink, and the pharmacy reduces any oral or electronic data transmission order to hard copy form prior to dispensing the controlled substance. 6.7.5.3. The prescriber provides a written prescription on a controlled substance prescription form that meets the requirements of HSC 11162.1 by the seventh day following the transmission of the initial order.
	6.7.6 An electronic prescription (e-script) for controlled substances that is received from the prescriber and meets federal requirements. [21 CFR 1306.08, 21 CFR 1311]
Yes No N/A	The review of the drugs contained within the ADDS and the operation and maintenance of ADDS is conducted, on a monthly basis, by a pharmacist. The review includes a physical

'es No N/A	the security and accountability of the system. [HSC 1261.6(h)] Date of Last Review:
	6.9 The pharmacy operating the ADDS has completed a biennial Self-Assessment pursuant to BPC 4427.7(a) evaluating the pharmacy's compliance with pharmacy law relating to the use of the AUDS. [BPC 4427.7(a)] Date of Last Self-Assessment:
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE
'es No N/A	C. DEVICE REQUIREMENTS:
	6.10 The stocking and restocking of the ADDS is performed in compliance with section 1261.6 of the Health and Safety Code. [BPC 4427.4(e)(1), HSC 1261.6(g)]
	6.11 Transaction information from the ADDS will be made readily available in a written format for review and inspection by individuals authorized by law and maintained in the facility for a minimum of three years. [HSC 1261.6(b)]
	6.12 The information required by BPC section 4076 and HSC 111480 is readily available at the time of drug administration if unit dose packaging or unit of use packaging is used. Unit dose packaging, for purposes of this section, includes blister pack cards. [HSC 1261.6(i)]
'es No N/A	When the ADDS is used as an emergency pharmaceutical supplies container, drugs removed from the ADDS are limited to the following [HSC 1261.6(e)]:
	6.13 A new drug order given by a prescriber for a patient of the facility for administration prior to the next scheduled delivery from the pharmacy, or 72 hours, whichever is less. The drug is retrieved only upon the authorization of a pharmacist and after the pharmacist has reviewed the prescriber's order and the patient's profile for potential contraindications and adverse drug reactions. [HSC 1261.6(e)(1)]
	6.14 Drugs that a prescriber has ordered for a patient on an as-needed basis, if the utilization and retrieval of those drugs are subject to ongoing review by a pharmacist. [HSC 1261.6(e)(2)]
	6.15 Drugs designed by the patient care policy committee or pharmaceutical service committee of the facility as emergency drugs or acute onset drugs. These drugs are retrieved from the ADDS pursuant to the order of a prescriber for emergency or immediate administration to a patient of the facility and reviewed by a pharmacist within 48 hours. [HSC 1261.6(e)(3)]

	When the ADDS is used to provide pharmacy services pursuant to BPC 4017.3, the ADDS is subject to the following requirements [HSC 1261.6(f)]:
Yes No N/A	5.16 Drugs removed from the ADDS for administration to a patient are in properly labeled units of administration containers or packages. [HSC 1261.6(f)(1)]
	6.17 A pharmacist reviews and approves all orders prior to a drug being removed from the ADDS for administration to a patient. The pharmacist reviews the prescriber's orders and the patient's profile for potential contraindications and adverse drug reactions. [HSC 1261.6(f)(2)]
	6.18 The pharmacy controls access to the drugs stored in the ADDS. [HSC 1261.6(f)(3)]
	6.19 After the pharmacist reviews the prescriber's order, access by licensed personnel to the ADDS is limited only to drugs ordered by the prescriber and reviewed by the pharmacist and that are specific to the patient. [HSC 1261.6(f)(6)]
	5.20 When the prescriber's order requires a dosage variation of the same drug, licensed personnel only have access to the drug ordered for that scheduled time of administration. [HSC 1261.6 (f)(6)]
	6.21 If the ADDS allows licensed personnel to have access to multiple drugs and is not patient specific in its design, the ADDS has electronic and mechanical safeguards in place to ensure that the drugs delivered to the patient are specific to that patient. [HSC 1261.6(f)(7)].
	Please Note: A skilled nursing facility or intermediate care facility using an ADDS that allows licensed personnel to have access to multiple drugs and are not patient specific in their design, is required to contact the California Department of Public Health, Licensing, and Certification in writing prior to utilizing this type of ADDS. [HSC 1261.6(f)(7)(A)]
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE
	·
	RECORD KEEPING REQUIREMENTS
Yes No N/A	6.22 Transaction information from the ADDS will be made readily available in a written format for review and inspection by individuals authorized by law and maintained in the facility for a minimum of three years. [HSC 1261.6(b)]
	6.23 Transaction information shall be made readily available in a written format for review and inspection by individuals authorized by law. These records shall be maintained in the facility for a minimum of three years. [HSC 1261.6(b)]
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE

Yes No N/A	D. POLICIES AND PROCEDURES
	6.24 The facility and the pharmacy has developed and implemented written policies and procedures to ensure safety, accuracy, accountability, security, patient confidentiality, and maintenance of the ADDS as well as quality, potency, and purity of the stored drugs and devices. [BPC 4427.3(c), HSC 1261.6(d)(1)]
	6.25 The ADDS policies and procedures define access to the ADDS and limits to access to equipment and drugs. [HSC 1261.6(d)(1)]
	6.26 All ADDS policies and procedures are maintained at the pharmacy and the location where the ADDS is being used. [HSC 1261.6(d)(2), BPC 4427.3(c)]
	6.27 The facility, in conjunction with the pharmacy, has developed policies and procedures to ensure that the removable pockets, cards, drawers, or unit of use or single dose containers are properly placed into the ADDS. [HSC 1261.6(g)(3)]
	6.28 The pharmacy's policies and procedures include provisions for reporting to the board drug losses from the ADDS inventory, as required by law. [BPC 4104, 4427.2(d)(4), CCR 1715.6, 21 CFR 1301.76] Last Reported Drug Loss:
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE
	SECTION 7: AUDS OPERATED BY A CORRECTIONAL CLINIC PURSUANT TO BPC 4187.1, 4427.3(b)(6), or 4427.65(a)(2)
Yes No N/A	•
Yes No N/A	4427.3(b)(6), or 4427.65(a)(2)

Yes No N/A			
	 7.3 The correctional clinic licensed by the pharmacy, the Department of Correction another correctional clinic licensed by administration or dispensing of drugs of facility if under either: [BPC 4187.1(a), The direction of a physician and suprescribe. An approved protocol as identified and Procedures. 	on and Rehabilitation's Central Fil the board within the same institu or devices to patients eligible for c 4187.2] rgeon, dentist, or other person la	I Pharmacy, or from tion for the tare at the correctional wfully authorized to
	7.4 The dispensing or administering of d chart order, as defined in section 4019 of the Business and Professions Code, the statewide Inmate Medical Services	, a valid prescription consistent wor pursuant to an approved proto	ith chapter 9 division 2 col as identified within
	7.5 Medications dispensed to patients t the labeling requirements of section 40 division 2 of the Business and Profession	076 and all recordkeeping require	
	7.6 The correctional clinic keeps record administered, transferred, and dispensional maintained for a minimum of three years [BPC 4187.1(c)]	sed. The records must be readily a	vailable and
	7.7 The correctional clinic has obtained	a license from the board. [BPC 41	.87.1(d)(1)]
	7.8 A separate license was obtained for located and is not to be transferrable.		vhere an APDS is
	7.9 The correctional clinic's location and building within the correctional institu	-	ctional institution and
	7.10 The correctional clinic will notify th on a form furnished by the board. [BPC	, .	in the clinic's address
	CORRECTIVE ACTION OR ACTION PLAN	AND COMPLETION DATE	
	B. POLICIES AND PROCEDURES		
Yes No N/A	7.11 The policies and procedures to improve correctional clinic was developed and a Therapeutics Committee referenced in	approved by the statewide Correc	tional Pharmacy and
	7.12 Prior to the issuance of the correct the policies and procedures was signed	•	_
17M-	112 (Rev. 4/2025)	Page 24 of 33	PIC Initials

Yes No N/A	servicing the institution, the pharmacist-in-charge for the California Department of Correction and Rehabilitation's Central Fill Pharmacy, and the correctional clinic's chief medical executive, supervising dentist, chief nurse executive, and chief executive officer. [BPC 4187.2(a)]
	7.13 The chief executive officer is responsible for the safe, orderly and lawful provision of pharmacy services. [BPC 4187.2(b)(1)]
	7.14 The pharmacist-in-charge of the correctional facility shall implement the policies and procedures developed and approved by the statewide Correctional Pharmacy and Therapeutics Committee referenced in section 5024.2 of the Penal Code and the California Correctional Health Care Services Health Care Department Operations Manual in conjunction with the chief executive officer, the chief medical executive, the supervising dentist, and the chief nurse executive. [BPC 4187.2(b)(1)]
	7.15 The licensed correctional clinic will notify the board within 30 days of any change in the chief executive officer on a form furnished by the board. [BPC 4187.2(b)(2)]
	7.16 Schedule II, III, IV or V controlled substances may be administered by health care staff of the licensed correctional clinic lawfully authorized to administer pursuant to a chart order, as defined in section 4019, a valid prescription consistent with chapter 9 division 2 of the Business and Professions Code, or pursuant to an approved protocol as identified within the statewide Inmate Medical Services Policies and Procedures. [BPC 4187.3]
	7.17 The ADDS located in a licensed correctional clinic has implemented the statewide Correctional Pharmacy and Therapeutics Committee's policies and procedures and the California Correctional Health Care Services Health Care Department Operations Manual to ensure safety, accuracy, accountability, security, patient confidentiality, and maintenance of the quality, potency, and purity of drugs. [BPC 4187.5(a)]
	7.18 All policies and procedures are maintained either in an electronic form or paper form at the location where the ADDS is being used. [BPC 4187.5(a)]
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE
	C. PHARMACIST RESPONSIBILITIES
Yes No N/A	7.19 A correctional facility pharmacist inspects the clinic at least quarterly. [BPC 4187.2(c)]
	7.20 Drugs removed from the ADDS are removed upon authorization by a pharmacist after the pharmacist has reviewed the prescription and the patient profile for potential contraindications and adverse drug reactions. Where administration of the drug is necessary before a pharmacist has reviewed the prescription and if, in the prescriber's professional judgment, a delay in therapy may cause patient harm, the medication may be removed from the ADDS and administered or furnished to the patient under the direction of the prescriber. Where the drug

Yes No N/A	patient pursuant to an approved protocol as identified within the California Correctional Health Care Services Health Care Department Operations Manual. Any removal of the medication from an ADDS is documented and provided to the correctional pharmacy when it reopens. [BPC 4187.5(b)]
	7.21 The review of drugs contained within, and the operation and maintenance of the ADDS, is conducted on a monthly basis by a pharmacist and shall include a physical inspection of the drugs in the ADDS, an inspection of the ADDS machine for cleanliness, and a review of all transaction records in order to verify the security and accountability of the system. [BPC 4187.5(e)] Date of Last Review:
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE
res No N/A	D. DEVICE REQUIREMENT
	7.22 Drugs removed from the ADDS are provided to the patient by a health professional licensed pursuant to division 2 of the Business and Professions Code who is lawfully authorized to perform the task. [BPC 4187.5(c)]
	7.23 The review of the drugs contained within, and the operation and maintenance of, the ADDS shall be the responsibility of the correctional clinic. [BPC 4187.5(e)]
	7.24 The ADDS is operated by a licensed correctional pharmacy. Any drugs within the ADDS are considered owned by the licensed correctional pharmacy until they are dispensed from the ADDS. [BPC 4187.5(f)]
	7.25 Drugs from the ADDS in the correctional clinic are removed by a person authorized to stock the ADDS, or by a person lawfully authorized to administer or dispense the drugs. [BPC 4187.5(g)]
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE
res No N/A	E. RECORD KEEPING REQUIREMENTS
	7.26 All records of manufacture and of sale, acquisition, receipt, shipment, or disposition of dangerous drugs or dangerous devices, at all times during business hours, are open for inspection by authorized officer of the law and are preserved for at least three years from the date of making. A current inventory is kept by the licensed correctional clinic. [BPC 4081(a)]

	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE					
	SEC	SECTION 8: (Check the appropriate box) HOSPITAL PHARMACY: AUDS USED FOR DISPENSING PURSUANT TO BPC 4068 (WHEN THE HOSPITAL PHARMACY IS CLOSED AND NO PHARMACIST IS AVAILABLE DRUG ROOM: AUDS USED FOR DISPENSING PURSUANT TO BPC 4056				
	use	Please Note: Hospital pharmacies and drug rooms must also complete Section 6 for ADDS used for administration. This section addresses additional requirements for hospital pharmacies and drug rooms operating an AUDS uses for dispensing.				
	A.	GENER	AL REQUIREMEN	TS		
es No N/A	8.1 The licensed drug room does not employ a full-time pharmacist and the AUDS is used for administration and dispensation by a physician to persons registered as inpatients of the hospital, to emergency cases under treatment in the hospital, or to outpatients if the physici determines that it is in the best interest of the patient that a particular drug regimen be immediately commenced or continued, and the physician reasonably believes that a pharma located outside the hospital is not available and accessible at the time of dispensation to the patient within 30 minutes of the hospital pharmaceutical services or within a 30-mile radius means of the method of transportation the patient states they intend to use. The quantity dispensed is limited to the amount necessary to maintain uninterrupted therapy, but shall no exceed a 72-hour supply. [BPC 4056(a), (f)]					
	8.2 Where the prescriber in a hospital emergency room dispenses a dangerous drug, including a controlled substance, from the AUDS to an emergency room patient, the following conditions apply [BPC 4068(a)]:					
		8.2.1	The hospital pha	armacy is closed and there is no pha	irmacist available in the	
		8.2.2	The drugs are a	cquired by the hospital pharmacy.		
		8.2.3	The dispensing in pharmacy reope	information is recorded and provide ens.	ed to the pharmacy when the	
		8.2.4	schedule II, sch	armacy retains the dispensing inforredule III, or schedule IV controlled such Department of Justice pursuant inc.	ubstance, reports the dispensing	
		8.2.5	drug regimen be reasonable belie	determines it is in the best interest on e immediately commenced or conting eves that a pharmacy located outsid at the time of dispensing to the pation	nued, and the prescriber e the hospital is not available	
		8.2.6	The quantity dis	spensed is limited to the amount ne	cessary to maintain	
17M-1	112 (Rev. 4/	2025)	Page 27 of 33	PIC Initials	

	available or accessible	when pharmacy services outside the hospital are not readily and shall not exceed a 72-hour supply. That the label on the drug contains all the information n 4076.			
Yes No N/A	$^{ m A}$ $^{ m C}$ 8.3 The operating pharmacy has o	otained a license from the Board to operate the AUDS that is ensing which includes the address of the AUDS location. [BPC			
	8.4 The prescriber ensures the label on the drug contains all the information required by BPC 4076 and CCR 1707.5.				
	8.5 The federal warning labels prohibiting transfer of controlled substances is on the prescription container. [21 CFR 290.5]				
	8.6 The prescription drug is dispensed in a new and child-resistant container, or senior-adult ease-of-opening tested container, or in a non-complying package only pursuant to the request of the prescriber or patient. [15 USC 1473(b), 16 CFR 1700.15, CCR 1717]				
	8.7 The hospital pharmacy or drug room reports the dispensing information of a Schedule II, III or IV controlled substance to the Dept of Justice pursuant to HSC 11165 as soon as reasonably possible, but not more than seven days after the date a controlled substance is dispensed. [BPC 4068(a)(4), HSC 11165(d)]				
	8.8 Patient package inserts are disp	ensed with all estrogen medications. [21 CFR 310.515]			
	1 8.9 The hospital has written policies and procedures to ensure each patient receives information regarding each drug given at the time of discharge or dispensed from a prescriber from a drug room, including the use and storage of each drug, the precautions and relevant warnings, and the importance of compliance with directions. [BPC 4074(e)]				
	8.10 Medication guides are provide	ed on required medications. [21 CFR 208.24(e)]			
	8.11 Boxed warning ("Black Box") i	nformation is in conformance with 21 CFR 201.57(c).			
	8.12 Whenever an opioid prescription drug is dispensed to a patient for outpatient use, the pharmacy or practitioner dispensing the drug prominently displays on the label or container, by means of a flag or other notification mechanism attached to the container, a notice that states, "Caution: Opioid. Risk of overdose and addiction." [BPC 4076.7]				
	CORRECTIVE ACTION OR ACTION	PLAN AND COMPLETION DATE			

SECTION 9 – AUDS THROUGH A FACILITY LICENSED IN CALIFORNIA WITH STATUTORY AUTHORITY TO PROVIDE PHARMACEUTICAL SERVICES (OR) AUDS THROUGH A JAIL, YOUTH DETENTION FACILITY, OR OTHER CORRECTIONAL FACILITY WHERE DRUGS ARE ADMINISTERED WITH THE FACILITY UNDER THE AUTHORITY OF THE MEDICAL DIRECTOR PURSUANT TO BPC 4187.1, 4427.3(b)(6), or 4427.65(a)(2).

9.1 Review of the drugs contained within, and the operation and maintenance of, the ADDS is done in accordance with law and is the responsibility of the pharmacy. A pharmacist conducts the review on a monthly basis, which includes a physical inspection of the drugs in the ADDS, a inspection of the ADDS for cleanliness, and a review of all transaction records in order to verify the security and accountability of the ADDS. [BPC 4427.65(c)(7)] Date of Last Review:				
CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE				
B. PHARMACIST RESPONSIBILITIES:				
9.2 The stocking of an ADDS is performed by a pharmacist. If the ADDS utilizes removable pockets, cards, drawers, similar technology, or unit of use or single dose containers, as defined by the United States Pharmacopoeia, the stocking system may be done outside of the facility and be delivered to the facility, if all the following conditions are met: [BPC 4427.65(c)(6)]				
9.2.1 The task of placing drugs into the removable pockets, cards, drawers, or unit of use or single dose containers is performed by a pharmacist, or by an intern pharmacist or a pharmacy technician working under the direct supervision of a pharmacist.				
☐ 9.2.2 The removable pockets, cards, drawers, or unit of use or single dose containers are transported between the pharmacy and the facility in a secure tamper-evident container.				
9.2.3 The facility, in conjunction with the pharmacy, has developed policies and procedures to ensure that the removable pockets, cards, drawers, or unit of use or single dose containers are properly placed into the ADDS.				
CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE				
C. DEVICE REQUIREMENTS: 9.3 Individualized and specific access to the ADDS is limited to facility and contract personnel authorized by law to administer drugs. [BPC 4427.65(c)(2)]				

Yes No N/A	container, drugs removed from the ADDS are limited to the following [BPC 4427.65(c)(4)]:
	9.4 A new drug order given by a prescriber for a patient of the facility for administration prior to the next scheduled delivery from the pharmacy, or 72 hours, whichever is less. The drugs are retrieved only upon authorization by a pharmacist and after the pharmacist has reviewed the prescriber's order and the patient's profile for potential contraindications and adverse drug reactions. [BPC 4427.65(c)(4)(A)]
	9.5 Drugs that a prescriber has ordered for the patient on an as-needed basis, if the utilization and retrieval of the drugs are subject to ongoing review by the pharmacist. [BPC 4427.65(c)(4)(B)]
	9.6 Drugs designed by the patient care policy committee or pharmaceutical service committee of the facility as emergency drugs or acute onset drugs. These drugs may be retrieved from the ADDS pursuant to the order of the prescriber for emergency or immediate administration to the patient of the facility. Within 48 hours after retrieval, the case is reviewed by the pharmacist. [BPC 4427.65(c)(4)(C)]
	For Sections 9.8-9.12: When the ADDS is used to provide pharmacy services pursuant to BPC 4017.3 and Article 25 in Chapter 9, Division 2 of the BPC, the ADDS is subject to the following requirements [BPC 4427.65(c)(5)]:
	9.7 The drugs removed from the ADDS for administration to a patient are in properly labeled units of administration containers or packages. [BPC 4427.65(c)(5)(A)]
	9.8 The pharmacist reviewed and approved all orders prior to a drug being removed from the ADDS for administration to the patient. The pharmacist reviewed the prescriber's order and the patient's profile for potential contraindications and adverse drug reactions. [BPC 4427.65(c)(5)(B)]
	9.9 The pharmacy providing services to the facility, pursuant to Article 25 in Chapter 9, Division 2 of the BPC, controls the access to the drugs stored in the ADDS. [BPC 4427.65(c)(5)(C)]
	9.10 After the pharmacist reviews the prescriber's order, access by licensed personnel to the ADDS is limited only to drugs ordered by the prescriber and reviewed by the pharmacist and that are specific to the patient. When the prescriber's order requires a dosage variation of the same drug, licensed personnel has access to the drug ordered for that scheduled time of administration. [BPC 4427.65(c)(5)(F)]
	9.11 ADDS that allow licensed personnel to have access to multiple drugs and are not patient specific in their design, shall be allowed if the ADDS has electronic and mechanical safeguards in place to ensure the drugs delivered to the patient are specific to the patient. [BPC 4427.65(c)(5)(G)]
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE

Yes No N/A	D. RECORD KEEPING REQUIREMENTS 9.12 Transaction information shall be made readily available in a written format for review and inspection by individuals authorized by law and are maintained in the facility for a minimum of three years. [BPC 4427.65(c)(1)] CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE
Yes No N/A	 E. <u>POLICIES AND PROCEDURES</u> 9.13 The pharmacy operating the AUDS shall develop and implement, and review annually, the written policies and procedures pertaining to the AUDS. [BPC 4427.65(b)]
	9.14 The facility and the pharmacy have developed and implemented written policies and procedures to ensure safety, accuracy, accountability, security, patient confidentiality, and maintenance of the quality, potency, and purity of stored drugs. The policies and procedures define access to the ADDS and limits to access to equipment and drugs. [BPC 4427.5(c)(3)(A)
	9.15 All policies and procedures are maintained at the pharmacy operating the ADDS and the location where the ADDS is being used. [BPC 4427.5(c)(3)(B)] CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE

CERTIFICATION ACKNOWLEDGMENT

PHARMACIST-IN-CHARGE CERTIFICATION:			
completed the self-assessmer pharmacist-in-charge. Any de- responses are subject to verif of perjury of the laws of the S this self- assessment form is t	nt of this automated drug ficiency identified herein with ication by the Board of Ph tate of California that the rue and correct.	hereby certify that I have delivery system of which I am the will be corrected. I understand that all armacy. I further state under penalty information that I have provided in	
Signature* (Pharmacist-in-Ch	Date narge)		
ACKNOWLEDGMENT BY PHA	RMACY OWNER OR HOSP	TITAL ADMINISTRATOR OPERATING THE	
under the laws of the State of provide this certification, that Operating the ADDS and that information stated herein are correct any deficiency identifi	California that I have full t I am the Owner of the Ph I have reviewed this form true, correct, and comple ied in this self-assessment	nereby certify under penalty of perjury authority, without any limitations to narmacy or the Hospital Administrator, and acknowledge that all facts and etc. Further, I understand that failure to t could result in the revocation of the California State Board of Pharmacy.	
	or Hospital Administrator)	Date	
(indimacy owner o			

^{*} Consistent with the Board's <u>Policy Statement</u>, digital signatures are acceptable.

CERTIFICATION OF COMPLETED ACTION PLAN

PHARMACIST-IN-CHARGE CERTIFICATION:			
system of which I am the pharm verification by the Board of Pharm	ified in the self-assess nacist-in-charge. I unde rmacy. I further state (hereby certify that I have ment of this automated drug delivery erstand that all responses are subject to under penalty of perjury of the laws of e provided in this self- assessment form	
Signature* (Pharmacist-in-Char	Date rge)		
ACKNOWLEDGMENT BY PHARM ADDS:	AACY OWNER OR HOS	SPITAL ADMINISTRATOR OPERATING THE	
I, [print name and title], hereby certify under penalty of perjury <i>under</i> the laws of the State of California that I have full authority, without any limitations to provide this certification, that I am the Owner of the Pharmacy or the Hospital Administrator Operating the ADDS and that I have reviewed this form, and acknowledge that all facts and information stated herein are true, correct, and complete. Further, I understand that failure to correct any deficiency identified in this self-assessment could result in the revocation of the automated drug delivery system's license issued by the California State Board of Pharmacy.			
Signature*		Date	
	Hospital Administrato		
* Consistent with the Decarly De	alia. Chahamamh diaina	l cignoturos que acceptable	

^{*} Consistent with the Board's **Policy Statement**, digital signatures are acceptable.