

**BOARD MEETING MINUTES**  
**Oregon Board of Pharmacy**  
**Portland State Office Building**  
**800 NE Oregon Street**  
**Portland, OR 97232**  
**December 4 – 5, 2007**

<b>Tuesday, December 4, 2007 @ 8:30 AM, Conference Room 1A</b> <b>Wednesday, December 5, 2007 @ 8:30 AM, Conference Room 1A</b>
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**TUESDAY, DECEMBER 4, 2007**

**8:30AM OPEN SESSION, Cathy Lew R.Ph. Presiding**

Meeting was called to order at 8:30 by Cathy Lew

Roll Call

The following Board Members were present for all or part of the meeting:

Cathy Lew, Vice President

Dianna Pimlott (by phone due to weather)

Lee Howard

Marc Watt

Linda Howrey

Board President Ann Zweber and Board Member Bernie Foster were absent.

The following staff was present for all or part of the meeting:

Gary Schnabel, Executive Director

Gary Miner, Compliance Director

Karen MacLean, Administrative Director

Tony Burt, Project Manager

Paige Clark, Pharmacist Consultant

Joe Ball, Chief Inspector

Michele Cale, Pharmacy Inspector

Gregg Hyman, Pharmacy Inspector

Jennifer Zanon, Pharmacy Inspector

Meg Aulerich, Pharmacy Inspector

Annette Gearhart, Compliance Secretary

Kathy Jackson, Compliance Assistant

Ed Schneider, PRN Director

Pam Aldersebaes, PRN Assistant

Jennifer Hess, Management Secretary

Tom Cowan, Board Counsel

**MOTION**

**Motion to approve the agenda was made and unanimously carried. (Motion by Watt, second by Howrey)**

### Consent Agenda Approval

Board reviewed consent agenda items and approved August, September and November 2007 Board Meeting Minutes. August and October 2007 Board Meeting Minutes were removed for minor revisions.

### **MOTION**

**Motion to approve consent agenda as revised was made and unanimously carried. (Motion by Howrey, second by Watt)**

### **MOTION**

**Motion to move into Executive Session at 8:40 AM was made and unanimously approved. (Motion by Watt, second by Howard)**

### **MOTION**

**Motion to exit Executive Session at 2:35 PM and into Open Session was made and unanimously carried. (Motion by Howrey, second by Howard)**

Compliance Director, Gary Miner, read compliance cases for Motions. Please refer to Compliance Minutes for Motions.

The following topics were discussed on Tuesday to best accommodate the Board's schedule.

Pharmacy Practice Roundtable update: Pharmacist Consultant, Paige Clark reported that nineteen people will attend the next meeting at OSPA later in the month. Agenda Topics include:

- PIC Training classes
- Updating practice models – (Division 41)
- Drug distribution - "Rx misuse/abuse/diversion in the absence of PDMP".
- Sale of Rx files or patient notification
- Technology related to drug distribution
- Drug Take Back Programs
- Emerging role of the Technicians in pharmacy
- DEA letter regarding transmission of schedule III-IV controlled substance prescriptions

Paige added that there will be a Technician track along with the Pharmacist track at the OSPA Spring CE. Additionally, Tom Cowan will present at the Portland program.

### TOPOFF 4 Emergency Preparedness –

Paige Clark reported that the number one thing identified from this exercise, was that Oregon needs legislation to get a better Emergency Communication System.

Research Councils:

### Medication Therapy Management Service

Linda Howrey reported that she has a well-rounded committee, but lost a couple of unresponsive members. They are deciding how to get the research done. There is a need for institution and clinical representation. She will get back to the Board on this committee.

### Medication Error / Patient Safety

Paige Clark, Cathy Lew, Ann Zweber and Dianna Pimlott reported that they have been working to establish the Medication Error and Patient Safety Research Council. The following people have agreed to participate: Gay Ryan from OHSU, Rick Sahli – Providence Hospital,

Joe Schnabel – Salem Hospital, Jim Dameron – Oregon Patient Safety Commission and Dave Widen – Safeway. A meeting will be held in January prior to the Board Meeting in Corvallis.

Board Member, Marc Watt, commented and asked what the goals are and should the Board determine them, and where are we going or are there barriers? There is a need to balance goals with long term care representation. The group will follow up on these questions after their first meeting and will definitely these issues into consideration.

#### Prescription Drug Monitoring Program (PDMP) Update

Paige Clark, Pharmacist Consultant, and Executive Director, Gary Schnabel, reported on the critical review of the programs language from DHS. The program will be considered again in the 2009 Legislative Session. Paige Clark and Kathy Hahn will attend the NAMSDL meeting in Washington DC and bring back information on national activities.

Marc Watt suggested this topic should be discussed at the Strategic Planning Meeting. Specifically, how much time and energy has been spent on PDMP and what should be done next?

#### Reports: Board President/Members

Cathy Lew reported that she attended the NABP Executive Committee meeting by phone. Information of interest to the Board included: the NAPLEX exam that was discontinued due to a security breach earlier in the fall, had been resumed and passing rates are appropriate. In addition, in February 2008, there will be a change in the testing company to Pearson VUE.

Marcus Watt - none.

Dianna Pimlott reported that she and Paige Clark met with Chief Saunders regarding drug take back in Florence; specifically, is it legal to have family members' pickup and take back prescription drugs? There was a lengthy discussion about State/Federal Laws and Rules. Legally, only a legitimate patient can possess their prescription medications and dispose of them. There is a need to reduce barriers and get the drugs off of the street. The Chief is interested in having a secure lockbox for non-controlled substance Rx at Police Stations where two officers can take them for destruction. The Board concluded this was a community take back program and not a Board of Pharmacy project.

Board Counsel - No News

Compliance Director, Gary Miner, reported that the CE audit evaluated 396 licensees - 12 were lapsed; 10 were late, but correct and 8 will be required to take the MPJE for failure to comply with the CE requirement. 43% of the inspections had been completed. The low percentage is a result of Inspector vacancies this year, fortunately, all positions are filled and we expect to do better in 2008.

In regards to the DEA letter that was recently received about fax transmissions being signed; the header on a fax does not mean it is a legally signed prescription. What should be done? This is a Board of Medical Examiner's (BME) issue for prescribers. According to the DEA you have to have a signed prescription for controlled substances. The DEA advises both pharmacists and prescribers to comply with 21 CFR 1306.05(a).

Vice President, Cathy Lew, suggested talking to the NABP about this issue.

Board Counsel, Tom Cowan, recommends forwarding this issue to the BME Executive Director, Kathleen Haley, and their Assistant Attorney General, Warren Foote to ask for a response.

Gary Schnabel will also speak with the Governor's Health Care Policy Advisor, Ree Sailors to apprise them of this issue that affects multiple agencies licensees. We need a comprehensive way to approach this issue and Gary will facilitate.

Gary also reported that the Drug Enforcement Administration has issued a final rule regarding issuance of 90-day controlled substances. Final rule text may be found on the DEA website.

Administrative Director, Karen MacLean, reported that she and Chrisy Hennigan attended the Systems Automation Users conference for our licensing and compliance database. The primary focus of this meeting was to learn more about online solutions. They will be evaluating online renewal options. Karen also reported that she will hold a licensing retreat to review licensing workload, policies and procedures and to discuss the upcoming pharmacy technician and wholesaler renewal issues.

As requested, Karen continues to gather national certification information from ICPT and PTCB. ICPT currently has 259 certified pharmacy technicians in Oregon and PTCB currently has 2,228.

#### Board Meeting Dates 2008

No changes were made to upcoming Board meeting dates.

- January 29 – 30, 2008            Corvallis
- April 15 – 16, 2008            Portland / Hillsboro
- June 10 – 11, 2008            Portland
- August 12 – 13, 2008          Portland
- October 14 – 15, 2008          Eugene
- December 9 – 10, 2008        Portland
- January 20-21, 2009            Corvallis

#### Strategic Planning Meeting

- March 18 - 19, 2008            Welches

#### Committees/Meetings

##### National Association of Boards of Pharmacy (NABP) Meetings

Gary Schnabel reported that he had completed his NABP Treasurers' report and would report it at the next meeting which is scheduled for February 7-9 in Scottsdale. Cathy Lew will also attend as an Executive Committee member. All travel expenses will be covered by NABP.

##### National Alliance for Model State Drug Laws

Gary Schnabel was invited by Rob Bovett to attend this meeting in October on behalf of the Meth Task Force. The group is looking at a Meth Demand Reduction Project; they have a grant and are considering putting together a pseudoephedrine reporting program.

##### OSHP

Gary Miner reported that the Inspectors attended the fall meeting and were provided an exhibit table free of charge to see if attendees could "Stump the Inspectors". It went well and the format may be modified.

Gary also reported that they will have a session and table at the Lane County meeting. They plan to bring the display board with current meth statistics.

Fred Meek

Gary Miner reported that there was good feedback from the presentation that Gregg made.

**MOTION**

**Motion to move into Executive Session at 4:35 PM was made and unanimously approved (Motion by Howard, second by Howrey).**

**MOTION**

**Motion to exit Executive Session and adjourn at 5:00 PM unanimously carried (Motion by Howard, second by Howrey).**

**WEDNESDAY, DECEMBER 5, 2007**

**8:30 AM OPEN SESSION, Cathy Lew, R.Ph. Presiding**

Roll Call

The following Board Members were present for all or part of the meeting:

Cathy Lew, Vice President  
Dianna Pimlott (by phone due to weather)  
Lee Howard  
Marc Watt  
Linda Howrey

Board President Ann Zweber and Board Member Bernie Foster were absent.

The following staff was present for all or part of the meeting:

Gary Schnabel, Executive Director  
Gary Miner, Compliance Director  
Karen MacLean, Administrative Director  
Tony Burt, Project Manager  
Paige Clark, Pharmacist Consultant  
Joe Ball, Chief Inspector  
Michele Cale, Pharmacy Inspector  
Gregg Hyman, Pharmacy Inspector  
Jennifer Zanon, Pharmacy Inspector  
Meg Aulerich, Pharmacy Inspector  
Annette Gearhart, Compliance Secretary  
Kathy Jackson, Compliance Assistant  
Ed Schneider, PRN Director  
Pam Aldersebaes, PRN Assistant  
Jennifer Hess, Management Secretary

Tom Cowan, Board Counsel

Compliance Director, Gary Miner, discussed the following staff policy questions:

1) Would the repackaging of base compounds fall into the need for a manufacturing license or shared service agreement? i.e. Plastibase

Compounding bases such a Plastibase may be repackaged by a pharmacy and sold to another pharmacy or practitioner and this would not be considered manufacturing. If the product is repackaged for sale to consumers it must be sold as a prescription or meet FDA labeling guidelines.

2) What is the Board's expectation for documentation of practitioner notification regarding immunizations? Note date administered and fax to practitioners?

The pharmacist may use the patient consent form if it contains date of administration, immunizing pharmacist, site of injection and the date of the practitioners was notified of the immunization.

3) What is the Board's position on licensure of clinics that dispensing mixed IV to their patients and other practitioner's patients?

The practitioner may administer mixed IVs to their patients which are regulated by their licensing Board. The practitioner may dispense mixed IVs to their patients if they have dispensing privileges granted by their licensing Board. If the practitioner is dispensing mixed IVs base on an order from a practitioner the practitioner would have to obtain a retail pharmacy license. The exception to this case would be if the practitioner establishes a valid patient-practitioner relationship with the patient as determined by their licensing Board the practitioner would not have to license with the Board of Pharmacy

4) Sunscreens are classified as drugs by the FDA. Should we be licensing outlets who sell sunscreens? The Board determined that these outlets do not need to be registered with the Board based on their sale of sunscreens.

#### Rules – Board Discussion.

The Board discussed input received at the November Rulemaking Hearing and proceeded to approve the following rules for permanent Rulemaking.

Division 06 / Division 41 relating to Tamper Resistant Prescription Pads:

#### **MOTION**

**Motion to approve revisions to Division 06 (OAR 855-006-0015) was made and unanimously carried (Motion by Watt, second by Howrey).**

#### **MOTION**

**Motion to approve revisions to Division 41 (OAR 855-041-0081) was made and unanimously carried (Motion by Watt, second by Howrey).**

Division 06 relating to Definitions

The Board discussed the comments from Medco concerning pharmacists working in an out-of-state pharmacy. As there were comments both from Medco and NACDS on this same issue regarding proposed rules in Divisions 19, 41 and 45, the Board's Counsel explained the Board's statutory authority, and how this could be interpreted. Counsel deemed that the fact that there were differing requirements between states did not create a conflict and it was appropriate for

the Board to require that pharmacists, wherever located, should follow Oregon laws and rules with respect to pharmaceutical services being provided to Oregon residents. The Board adopted the proposed amendment to OAR 855-006-0005 with minor changes suggested by staff.

**MOTION**

**Motion to approve revisions to Division 06 (OAR 855-006-0005) was made and unanimously carried. (Motion by Watt, second by Howrey)**

Division 10 relating to Criminal Background Checks

Counsel discussed the comment from NACDS that the proposed rule exceeded the Board's statutory authority. Counsel deemed that this was not the case, and the Board adopted the proposed rule with changes for clarification proposed by staff and counsel.

**MOTION**

**Motion to approved adoption of rule in Division 10 (OAR 855-010-0045) with revisions proposed by staff and counsel was made and unanimously carried (Motion by Watt, second by Howard).**

Division 35 relating to Non Prescription Drug Outlets

**MOTION**

**Motion to approve revisions to Division 35 (OAR 855-035-0005 and 855-035-0020) was made and unanimously carried (Motion by Howrey, second by Howard),**

Division 42 relating to Nuclear Pharmacies

**MOTION**

**Motion to renumber OAR 855-042-0020 to 855-019-0160 and amend as proposed was made and unanimously carried (Motion by Howrey, second by Howard).**

Division 55 relating to DMSO

**MOTION**

**Motion to repeal all rules in Division 55 (OAR 855-055-0005 thru 855-055-0020) was made and unanimously carried (Motion by Howrey, second by Howard).**

Division 45 relating to Sterile and Non-Sterile Compounding

The Board considered the public comments regarding out-of-state pharmacies. Counsel addressed this issue and advised the Board that the issues were the same as discussed under Division 6. The Board decided to change the term "IV admixture" to "parenteral admixture" each time it occurred in the rules. With this change, the Board adopted the new rules 855-045-0200 through 0270 with changes proposed by staff.

Compliance Director, Gary Miner, thanked Vice President, Cathy Lew for her leadership on this project as well as the rest of the group for their efforts and hard work. This has been a huge undertaking and has taken a lot of time. Other Board Members thanked Cathy too.

**MOTION**

**Motion to adopt OAR 855-045-0200 as proposed and with changes proposed by staff was made and unanimously carried (Motion by Howard, second by Watt).**

**MOTION**

**Motion to adopt OAR 855-045-0210 as proposed and with changes proposed by staff was made and unanimously carried (Motion by Howard, second by Watt).**

**MOTION**

**Motion to adopt OAR 855-045-0220 as proposed and with changes proposed by staff was made and unanimously carried (Motion by Howard, second by Watt).**

**MOTION**

**Motion to adopt OAR 855-045-0230 with changes proposed by staff and as revised was made and unanimously carried (Motion by Howrey, second by Watt).**

**MOTION**

**Motion to adopt OAR 855-045-0240 as proposed and with changes proposed by staff was made and unanimously carried (Motion by Howrey, second by Watt).**

**MOTION**

**Motion to adopt OAR 855-045-0250 as proposed and with changes proposed by staff was made and unanimously carried (Motion by Howard, second by Pimlott).**

**MOTION**

**Motion to adopt OAR 855-045-0260 as proposed and with changes proposed by staff was made and unanimously carried (Motion by Watt, second by Howard).**

**MOTION**

**Motion to adopt OAR 855-045-0270 as proposed and with changes proposed by staff was made and unanimously carried (Motion by Howrey, second by Howard).**

Division 019 regarding Pharmacists

The Board had a lengthy discussion about the Division 019 proposed rules including topics that were subject of public comment.

With regard to the counseling issue, at the Board's request, Jennifer Williams from Walgreens commented that they are implementing a fingerprint system for pharmacists to use after a sale which is not yet fully implemented.

Board broke for a working lunch.

**MOTION**

**Motion to move into Executive Session for the purpose of case deliberation at 12:05 PM was made and unanimously approved (Motion by Watt, second by Howard).**

**MOTION**

**Motion to exit Executive Session at 12:30 PM was made and unanimously carried (Motion by Watt, second by Howard).**

## **MOTION**

**Motion to resume Open into Executive Session at 12:40 PM was made and unanimously approved (Motion by Watt, second by Howard).**

### **Case 2007-0078**

**Motion to withdraw December 4, 2007 Notice of Intent was unanimously accepted with Linda Howrey abstaining due to conflict of interest (Motion by: Watt; Seconded by: Howard).**

Resumed Division 019 rules discussion

The Board discussed each rule in this division, and staff's suggestions for changes resulting from their discussions with stakeholders and from public comment. The Board decided to postpone rulemaking on this Division until January 30, 2008 as there was a need for further discussion, particularly on the subjects of:

- Reporting losses;
- Reporting arrests and citations;
- Electronic signatures for controlled substances;
- Counseling;
- Medication Therapy Management;
- Monthly audits of CII drugs.

Division 41-Retail outlets. The Board postponed discussion of the proposed changes to this Division until January 30, 2008:

A topic for future discussion includes Interns and Internship.

Gary DeLander, from Oregon Science University, College of Pharmacy and Sue Stein from Pacific University, School of Pharmacy were asked to join the discussion. With the addition of a new pharmacy program and changing ACPE requirements, it's becoming more apparent that the statutes and rules will need to be looked at. As a start, Gary and Sue outlined several issues that need consideration. They include:

- Intern to Pharmacist ratio of 1 to 1
- Consideration of the environment the student is working in, that may be too restrictive as there are many opportunities where students would get more experience in a non-dispensing pharmacy setting such as: student outreaches at health fairs. ACPE has a stated preference at a traditional Pharmacy practice setting of one to one. It is about the experience. Although, some states have 2 to 1 and more are eliminating ratio. Ultimately, the key is patient safety.
- When we look at rulemaking, it would be helpful to look at years in school in order to engage in experiential activities.
- Intern hours though clerkships vs work experience.
- Who needs to supervise intern experience? A Registered Nurse may have the best skills in a particular environment.
- There is a need for freedom to develop professionalism through these opportunities.
- Question of the 2000 hour requirement. ACPE's is less, should the Board consider less?
- Question of licensure at the beginning for the students first year of a pharmacy program. Current statute definition of an Intern is out of date.
- Preceptor training

Project Manager, Tony Burt was asked to staff a Research Council with representatives from both schools and the associations to review the statutes and rules as well as identify other considerations for the programs differences that may need to be reflected in future rules. Ann Zweber will represent the Board on this Council.

The Board thanked Gary and Sue for participating in the discussion on Interns. Sue was specifically thanked for her participation on the Division 045 rule re-write. Sue noted that the USP recently released updated 797 Standards.

#### District Meeting Recap/Recognition

While Gary Delander was still present, Gary Schnabel and the Board thanked him for chairing the 2007 NABP District VII/VIII planning committee. NABP thanks the Board and Administrative Director, Karen MacLean read a Resolution from Nevada thanking Oregon for the meeting and hospitality.

Linda Howrey also acknowledged Gary Delander for his recent Bowl of Hygeia award at the recent OSPA meeting.

#### Governor's Advisory Committee on DUII, December 14 and January 4

Gary Schnabel asked the Board if anyone was interested in participating on this committee. Marc Watt has participated in the past and expressed an interest in continuing.

#### House Interim Health Care Committee Hearing, October 9

Representative Mitch Greenlick, Chair of the House Interim Health Care Committee conducted an informational hearing in October. The Committee is interested in a number of topics

1. Disciplinary actions and how they work
2. Diversion Programs
3. Make up of Boards
4. Law Enforcement referrals – requested several boards to appear interested in possible legislation.

Public member, Lee Howard commented that we are still looking into the issue of public information disclosure and the best way to share.

The Committee is interested in more disclosure, more public board members and more transparency.

Board Counsel, Tom Cowan pointed out that he has not seen a legislator in a Compliance Meeting. The Board could invite a legislator to help them be more informed.

Gary pointed out that part of the Committees desire for more public members is that it's their perception that the professionals are going to protect their own.

Board Vice President, Cathy Lew, also attended the hearing. She stated that there were valuable conversations at the end and that there is a lot of misunderstanding on the part of committee members.

Senate Interim Committee on Commerce and Labor, Subcommittee on Health Care Reform,  
December 7

Gary Schnabel reported that he was asked to appear before this Committee to report ways workforce data is collected by the Health Regulatory Board's. Karen MacLean will appear on Gary's behalf and report back in January.

FPGEC waiver approvals (3)

The Board reviewed three requests for waiver of the FPGEC.

**MOTION**

**Motion to approve FPGEC waivers was made and unanimously carried. (Motion by Howrey, second by Howard)**

Review Hospital Barcode Technician Check

Compliance Director, Gary Miner, reported follow-up information regarding the Providence Hospital request for Technicians to use barcode information. Gary along with Inspectors Joe Ball and Jennifer Zanon, toured the Providence facility to see their distribution systems.

There are three traditional medication distribution systems:

- 1) Unit dose – Old way example of how technicians were involved  
Registered Pharmacist (RPh) checks medication before it goes to floor
- 2) Robot – already loaded based on profile – robot fills box and box goes to the floor. The technician delivers. In the past, if they have done a 3-5% audit, that is okay.
- 3) Dispensing cabinets – technicians can take to floor but a Registered Pharmacist has to fill and check the cabinets first.

The Board discussed new issues related to profiling, RN access and bar coding using the robotic systems in the distribution system

Question – In the past within 3-5% audit, that's the end of distribution system; however, there are two different things, distribution and administration. At what point does the medication get handed to another Health Care professional, and where does the verification occur relative to giving the right drug to the right patient, etc.?

Former Board Inspector, Paul Mattson, stated that anything they package gets double checked, however since the original waiver in 1991, things have changed. There was a technical discussion regarding the way a product comes from the manufacturer verses doing on-site packaging and verifying the product. The Joint Commission requires pharmacy oversight from beginning to administration in the medication distribution system.

The Board concluded that the robotic system is in compliance if using bar coding in the distribution system.

Cathy Lew asked, "Proposing what?"

The question was posed to the Board by Gary Miner. When does the pharmacies' responsibility end when the medication is delivered to another healthcare profession for administration.

The Board discussed this issue and will revisit this at a later time.

Gary Miner noted that Board in the past has said, the technician can fill the cabinet and make medications ready and the Registered Pharmacist checks the medications. Then the technician can deliver.

At the end of the discussion, it was concluded that Gary Miner should send Providence a letter.

#### Request to Reduce Intern Hour Requirement

Gary Miner presented a request from an Intern requesting a reduction in the Intern requirement. Current rule does not allow any exception.

#### Financial Update

Administrative Director, Karen MacLean reported on the most recent expenditure report from October. The Agency has used 17% of the resources allocated for this biennium. The target for this month is 13%. Some of the variance is due to salary increases and pre-paid state expenditures.

Karen briefly discussed considerations for the 2009 – 2011 budget; after careful review of our revenue ending balance and estimated revenue, she and Gary have agreed there is no need to increase licensing fees in the upcoming biennium. Karen will follow up with the Board at a later meeting on budget plan specifics.

#### Legislative Concepts

The Board briefly reviewed possible legislative concepts for the 2009 Legislative Session. Administrative Director, Karen MacLean, reported on the specific concepts. Pharmacist Consultant, Paige Clark will make Jim Thompson aware of ideas. Gary Schnabel will follow up with Jim in January.

#### Other Topics for Future Discussion

##### PRN

The Board would like more information on statistics from the PRN program. Such as: male to female ratio, technician to pharmacist ratio, total number in program, number of years in program. PRN staff will be asked to provide this information in report early next year.

##### Sale of Pharmacy, Patient Notification

Because of a recent inquiry, the Board would like more information about what's required when a pharmacy is sold. The real issue is that the patient should be notified when there is a sale from the citizen's perspective. While the Board doesn't have specific rules about how a pharmacy notifies customers, they are curious how other health care practitioners inform their patients when a practice is "sold." Dick Glatt, a Target representative in attendance, would be glad to be on a workgroup to look into what is happening in other states within the Target chain.

#### Open Forum

Pharmacy Intern, Mike Zimel thanked the Board staff and commented that it was a good internship experience. He was able to sit in on a PIC training class and feels prepared to step into that role upon graduation.

Graduate Intern, Mark Della Paolera also thanked the Board for his special clerkship for the Pharm D program at the University of Washington. He said it was a good experience.

**MOTION**

**Motion to adjourn at 3:40 PM was made and unanimously carried (Motion by Howard, second by Howrey).**

Motions for Disciplinary Action – See Compliance Minutes

Open Forum

No Public Comment

**Meeting adjourned at 3:41.**

Minutes Accepted By:

**SIGNATURE ON FILE**

Gary A. Schnabel, R.Ph., R.N.  
Executive Director