



**2025  
ADDITIONAL SERVICES  
SELF-INSPECTION FORM**

**ATTENTION: PHARMACIST-IN-CHARGE (PIC)**

**Please note:** This is not a stand-alone self-inspection form. It is to be completed and filed in conjunction with the appropriate Drug Outlet Self-Inspection Form (i.e., Retail, Institutional, etc.).

**Instructions:** Mark each box below to indicate which additional services are provided by the drug outlet at this location. Once complete, attach to the primary self-inspection form.

**Yes      No**

- ☐ ☐ **Collaborative Drug Therapy Management (CDTM)**
- ☐ ☐ **Long Term Care (LTC) / Community Based Care (CBC) Services**
- ☐ ☐ **Telework**
- ☐ ☐ **Final Verification per ORS 689.703**

**Collaborative Drug Therapy Management (CDTM)**

**Yes      No**

**Rule Reference**

<input type="checkbox"/>	<input type="checkbox"/>	1.	Do pharmacists participate in Collaborative Drug Therapy Management (CDTM)?  <b>Examples:</b> Diabetes management, anticoagulation, hypertension	<a href="#">OAR 855-115-0315(1)</a>
<input type="checkbox"/>	<input type="checkbox"/>	2.	Does the written CDTM agreement contain all of the following? <ul style="list-style-type: none"><li>• Identification of the participating pharmacist(s) and practitioner(s)</li><li>• The name of the principal pharmacist and practitioner who are responsible for development, training, administration, and quality assurance of the arrangement</li><li>• The types of decisions that the pharmacist is allowed to make and when the pharmacist should initiate communications with the practitioner</li></ul>	<a href="#">OAR 855-115-0315(2)(a-g) and (3)</a>
<input type="checkbox"/>	<input type="checkbox"/>	3.	Are CDTM agreements being reviewed and <b>updated at least every two years?</b>	<a href="#">OAR 855-115-0315(2)(h)</a>
<input type="checkbox"/>	<input type="checkbox"/>	4.	Is the pharmacist ensuring that the prescription order includes all required information, including the name of the prescribing practitioner that authorized the prescription?	<a href="#">OAR 855-041-1105</a>

**Long Term Care (LTC) / Community Based Care (CBC) Services**

**Yes      No**

**Rule Reference**

<input type="checkbox"/>	<input type="checkbox"/>	5.	Are the pharmacy or pharmacists assisting in the establishment and supervision of the policies & procedures for the safe storage, distribution, administration, & disposal of drugs and for professional advice/medication counseling of patients and/or caregivers?	<a href="#">OAR 855-041-7060(1)</a>
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Yes	No	Rule Reference		
<input type="checkbox"/>	<input type="checkbox"/>	6.	<p>Are emergency drug kits provided to any facilities?</p> <p>Does each facility's license allow them to have an emergency drug kit?</p> <p>If yes, how does a pharmacist verify the kit and how/where is this documented?</p>	<a href="#">OAR 855-041-7060(2)</a>
<input type="checkbox"/>	<input type="checkbox"/>	7.	<p>Is the pharmacy ensuring that access to the emergency drug kit and/or on-site pharmacy occurs ONLY:</p> <ul style="list-style-type: none"><li>• By a designated licensed nurse?</li><li>• When there is a practitioner's order authorizing the removal of medications?</li><li>• Pursuant to <a href="#">OAR-855-041-6310</a>?</li></ul> <p>How is this being ensured?</p>	<a href="#">OAR 855-041-7060(2)(b)</a> <a href="#">OAR 855-041-7060(5)</a>
<input type="checkbox"/>	<input type="checkbox"/>	8.	<p>If the pharmacy accepts the return of previously dispensed prescriptions, is it in compliance with OAR 855-041-1045?</p>	<a href="#">OAR 855-041-1045</a>
		9.	<p>Under what circumstances does the pharmacy dispense medications that have been previously dispensed and returned?</p>	<a href="#">OAR 855-041-1045(3)</a>
<input type="checkbox"/>	<input type="checkbox"/>	10.	<p>If prescriptions are provided to patients in a Skilled Nursing Facility (SNF) and/or Immediate Care Facility (ICF), please list the pharmacy's Institutional Drug Outlet Registration #.</p> <p>Registration #:</p>	<a href="#">OAR 855-041-5005</a> <a href="#">OAR 855-041-5015</a> <a href="#">OAR 855-041-7050</a>
<input type="checkbox"/>	<input type="checkbox"/>	11.	<p>Are all <b>partially dispensed CII prescriptions</b> documented with the following?</p> <ul style="list-style-type: none"><li>• "LTCF patient" or "terminally ill"</li><li>• Date of partial fill</li><li>• Quantity dispensed</li><li>• Remaining quantity authorized to be dispensed</li><li>• Identification of the dispensing pharmacist for each partial fill</li></ul> <p><b>Note:</b> Valid for up to a maximum of 60 days from the date written.</p>	<a href="#">21 CFR 1306.13</a>
<input type="checkbox"/>	<input type="checkbox"/>	12.	<p>Is the PIC ensuring that a controlled substance inventory with discrepancy reconciliation is accurately completed and documented for all Schedule II controlled drugs:</p> <ul style="list-style-type: none"><li>• at least every 93 days in a Retail Drug Outlet Pharmacy; and</li><li>• at least every 31 days in an Institutional Drug Outlet Pharmacy.</li></ul>	<a href="#">OAR 855-115-0210(1)(i)</a>

# Telework

Yes	No			Rule Reference
<input type="checkbox"/>	<input type="checkbox"/>	13.	Do intern(s) or technician(s) work on behalf of the drug outlet pharmacy from a location physically outside of the pharmacy (i.e. their home)?  <b>Note:</b> This is considered telework at a telework site by the board.	<a href="#">OAR 855-041-3205</a>
<input type="checkbox"/>	<input type="checkbox"/>	14.	Does the pharmacy ensure that: <ul style="list-style-type: none"> <li>Only an Oregon licensed pharmacist, intern, and technician are providing pharmacy services to Oregon patients?</li> <li>All licensees comply with applicable federal and state laws and rules?</li> <li>NO DRUGS or DEVICES are permitted at a telework site?</li> </ul>	<a href="#">OAR 855-041-3215</a> <a href="#">OAR 855-041-3235</a>
<input type="checkbox"/>	<input type="checkbox"/>	15.	How does the PIC and the supervising pharmacist ensure the supervision, direction, and control of each technician and supervision of each intern?	<a href="#">OAR 855-041-3215</a> <a href="#">OAR 855-041-3220</a>
<input type="checkbox"/>	<input type="checkbox"/>	16.	Does the pharmacy have a written agreement that includes all conditions, duties and policies governing the licensee engaged in telework activities?	<a href="#">OAR 855-041-3215</a> <a href="#">OAR 855-041-3245</a>
<input type="checkbox"/>	<input type="checkbox"/>	17.	Does the pharmacy maintain a continuously updated list of all of the following for <b>each</b> Telework Site? <ul style="list-style-type: none"> <li>Address and phone number (for each site)</li> <li>Licensees engaged in telework</li> <li>Functions being performed by licensees engaged in telework</li> <li>The pharmacist providing supervision, direction, and control for each non-pharmacist licensee</li> </ul>	<a href="#">OAR 855-041-3215</a> <a href="#">OAR 855-041-3250</a>
<input type="checkbox"/>	<input type="checkbox"/>	18.	Are all of the following supervision requirements met? <ul style="list-style-type: none"> <li>Utilize technology that enables real-time audio and visual connections and interface to allow access to information required to complete assigned duties</li> <li>Ensure telephone audio is recorded and stored, for all patient interactions completed by each intern and technician</li> <li>Ensure that the pharmacist observes or reviews a minimum of 5% of patient interactions completed by each intern and technician</li> <li>Ensure a pharmacist is supervising, directing, and controlling each intern and technician and that the continuous audio/visual connection is fully operational</li> <li>Ensure that a pharmacist using professional judgment determines the frequency of "check-ins" for each licensee being supervised via the real-time audio and visual connection with a minimum of at least once per work shift, and documents the interaction</li> <li>Ensure a pharmacist is readily available to answer questions and is fully responsible for the practice and accuracy of the licensee; and</li> <li>Ensure the intern or technician knows the identity of the Oregon licensed Pharmacist who is providing supervision, direction, and control at all times</li> </ul>	<a href="#">OAR 855-041-3220</a>

Yes	No		Rule Reference
		<ul style="list-style-type: none"> <li>Provide adequate staff to allow the pharmacist to complete required technician reviews</li> </ul>	
<input type="checkbox"/>	<input type="checkbox"/>	<p>19. Are all of the following supervision requirements met by the pharmacist?</p> <ul style="list-style-type: none"> <li>Using professional judgment, determining the percentage of patient interactions for each licensee that must be reviewed to ensure public health and safety with a minimum of 5% of patient interactions observed or reviewed;</li> <li>Reviewing patient interactions within 48 hours of the patient interaction to ensure that each licensee is acting within the authority permitted under their license and patients are connected with a pharmacist upon request;</li> <li>Documenting the following within 24 hours of the review: <ul style="list-style-type: none"> <li>Number of each licensee's patient interactions;</li> <li>Number of each licensee's patient interactions pharmacist is reviewing;</li> <li>Date and time of licensee patient interaction pharmacist is reviewing;</li> <li>Date and time of pharmacist review of licensee's patient interaction; and</li> <li>Pharmacist notes of each interaction reviewed; and</li> </ul> </li> <li>Reporting any violation of OAR 855 to the Oregon registered Drug Outlet Pharmacy within 48 hours of discovery and to the board within 10 days</li> </ul>	<a href="#">OAR 855-041-3220</a>
		<p>20. How does the pharmacy ensure patient confidentiality?</p> <p><b>Note:</b> All computer equipment used at the Telework Site must:</p> <ul style="list-style-type: none"> <li>Establish and maintain a secure connection to the pharmacy and patient information;</li> <li>Utilize equipment that prevents unauthorized access to the pharmacy and patient information;</li> <li>Be configured so that the pharmacy and patient information is not accessible when: <ul style="list-style-type: none"> <li>there is no pharmacist actively supervising.</li> <li>there is no licensee at the telework site.</li> <li>any component of the real-time audio-visual connection is not functioning;</li> </ul> </li> <li>Comply with security and confidentiality requirements.</li> </ul>	<a href="#">OAR 855-041-3225</a> <a href="#">OAR 855-041-3240</a>
<input type="checkbox"/>	<input type="checkbox"/>	<p>21. Is an intern or technician able to access the pharmacy and patient information when a pharmacist is not actively supervising?</p>	<a href="#">OAR 855-041-3240</a>
<input type="checkbox"/>	<input type="checkbox"/>	<p>22. Are the following technology requirements met?</p> <ul style="list-style-type: none"> <li>Testing the continuous audio and visual connection and document that it operates properly before engaging in telework.</li> <li>Developing, implementing, and enforcing a plan for responding to and recovering from an interruption of service which prevents a pharmacist from supervising, directing, and controlling the Intern and technician at the Telework Site</li> <li>Ensures access to: <ul style="list-style-type: none"> <li>Appropriate and current pharmaceutical references based on the services offered; and</li> </ul> </li> </ul>	<a href="#">OAR 855-041-3230</a>

Yes	No			Rule Reference
			<ul style="list-style-type: none"> <li>○ Appropriate and current Oregon Revised Statutes, Oregon Administrative Rules, United States Code, Code of Federal Regulations, standards adopted by reference (e.g. USP) based on services offered by the outlet and a minimum of three years of the Board of Pharmacy quarterly newsletters.</li> <li>• Training of the pharmacists, interns, and technicians in the operation of continuous audio and visual connection</li> </ul>	
<input type="checkbox"/>	<input type="checkbox"/>	23.	<p>If a pharmacist is performing verification remotely, are all of the following requirements met?</p> <ul style="list-style-type: none"> <li>• Using still image capture or storing and forwarding for verification of prescriptions with a camera that is of sufficient quality and resolution so that the pharmacist from the Oregon registered Drug Outlet Pharmacy can visually identify each <ul style="list-style-type: none"> <li>○ Source container including manufacturer, name, strength, lot, and expiration;</li> <li>○ Dispensed product including the imprint and physical characteristics;</li> <li>○ Completed prescription container including the label; and</li> <li>○ Ancillary document provided to patient at the time of dispensing.</li> </ul> </li> </ul>	<a href="#">OAR 855-041-3230(5)</a>
<input type="checkbox"/>	<input type="checkbox"/>	24.	Are all records maintained within the requirements of OAR 855-041-3250?	<a href="#">OAR 855-041-3250</a>

### Final Verification

Yes	No			Rule Reference
<input type="checkbox"/>	<input type="checkbox"/>	25.	<p>Are the pharmacy and staff aware that “final verification” means, after prescription information is entered into a pharmacy’s electronic system <b>and reviewed by a pharmacist for accuracy</b>, <u>a physical verification that the drug and drug dosage, device or product selected from a pharmacy’s inventory pursuant to the electronic system entry is the prescribed drug and drug dosage, device, or product?</u></p> <p><b>Note:</b> Final verification does not include the dosage form, quantity, or expiration date</p>	<a href="#">OAR 855-006-0005(21)</a> <a href="#">OAR 855-115-0130(3)</a> <a href="#">OAR 855-125-0105(4)</a> <a href="#">ORS 689.703</a>
<input type="checkbox"/>	<input type="checkbox"/>	26.	<p>If the pharmacist chooses to delegate “final verification” to a technician, does the pharmacist use their reasonable professional judgment in making this determination?</p> <p><b>Note:</b></p> <ul style="list-style-type: none"> <li>• Only the <b>PHARMACIST</b> may delegate “final verification”</li> <li>• “Reasonable professional judgment” means an objectively reasonable and impartial belief, opinion or conclusion held with confidence, and founded on appropriate professional knowledge, skills, abilities, qualifications, and competencies, after careful review, analysis and consideration of the relevant subject matter and all relevant facts and circumstances that were then known by, or reasonably available to, the person or party holding such belief, opinion, or conclusion.</li> </ul>	<a href="#">OAR 855-006-0005(47)</a> <a href="#">OAR 855-115-0130(3)</a> <a href="#">OAR 855-125-0105(4)</a> <a href="#">ORS 689.703</a>

Yes	No			Rule Reference
<input type="checkbox"/>	<input type="checkbox"/>	27.	Does the pharmacist supervise the technician that they have delegated "final verification" to?  How does the pharmacist supervise technicians performing "final verification"?	<a href="#">OAR 855-115-0130(3)</a> <a href="#">OAR 855-125-0105(4)</a> <a href="#">ORS 689.703</a>
		28.	How does the supervising pharmacist ensure that the technician performs a physical (i.e. in-person) "final verification"?	<a href="#">OAR 855-115-0130(3)</a> <a href="#">OAR 855-125-0105(4)</a> <a href="#">ORS 689.703</a>
<input type="checkbox"/>	<input type="checkbox"/>	29.	If a technician performs "final verification" on the drug and dosage, is a pharmacist performing verification on the remaining items such as prescription label, appropriate auxiliary labels, dosage form, expiration date, and quantity?	<a href="#">OAR 855-115-0130(3)</a> <a href="#">OAR 855-125-0105(4)</a> <a href="#">ORS 689.703</a>
		30.	How does each supervising pharmacist ensure that technicians <b><u>do not use discretion</u></b> when performing "final verification"?	<a href="#">OAR 855-115-0130(3)</a> <a href="#">OAR 855-125-0105(4)</a> <a href="#">ORS 689.005</a> <a href="#">ORS 689.703</a>

I hereby certify that to the best of my knowledge, that the answers marked on this form are true and correct.

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Printed Name of PIC: \_\_\_\_\_

Signature of PIC: \_\_\_\_\_