



MISSISSIPPI

State Board of Pharmacy

Address:
 6360 J - 55 North
 Suite 400
 Jackson, MS 39211
 Office: 601-899-8880 Fax: 601-899-8851

APPLICATION FOR PHARMACY PERMIT

January 1, 2020 - December 31, 2021
FEE - \$300.00

Business Name: _____ e-mail address: _____
 Street Address: _____ Web Address: _____
 Mailing Address _____ Fax: _____
 City, State, Zip: _____ Telephone: _____
 County: _____

Classification of Permit Applied for:

- 1.COMMUNITY ----- [] INDEPENDENT [] CHAIN (4 OR MORE) [] PIC Change/Permit Number _____
- 2.SPECIALTY COMMUNITY - [] INFUSION [] COMPOUNDING [] NURSING HOME [] NUCLEAR [] RESPIRATORY [] OTHER
- 3.INSTITUTIONAL I ----- [] HOSPITAL
- 4.INST. II (LOCATED INSIDE OF) - [] MENTAL HEALTH [] LTCF [] HOSPICE INPATIENT [] CORRECTIONAL [] OTHER
- 5.LIMITED CLOSED DOOR -- [] GOVERNMENT OWNED [] NON-PROFIT COMMUNITY CLINICS [] CHARITY

Principle Pharmacy Owner(s) or officers if Corporation: (Attach list if necessary)

_____	_____
(Name)	(Address)
_____	_____
(Name)	(Address)

Briefly describe Pharmacy Services: _____

I hereby certify that I am a registered pharmacist in the State of Mississippi, holding Certificate of Registration Number _____. Application for and acceptance of this pharmacy permit by me assumes knowledge of and compliance with all federal and state laws and regulations governing the practice of pharmacy and the dispensing of drugs.

Pharmacist's signature _____ e-mail address: _____
 Name typed or printed _____ Web Address: _____
 Telephone: _____
 Fax: _____

OFFICE USE ONLY	
PHARMACY PERMIT NUMBER: _____	FILE NUMBER: _____
DATE ISSUED: _____	RECEIPT NUMBER: _____



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APPLICATION FOR REGISTRATION TO HANDLE CONTROLLED SUBSTANCES

January 1, 2020 - December 31, 2020

FEE - \$50.00

Business Name: _____

Street Address: _____

City, State Zip: _____

County: _____

DEA #: _____ Federal Tax ID #: _____
(If you do not have a DEA # Please submit your number once it is received).

Principle Business Owner(s) or officers if Corporation: (Attach list if necessary)

(Name) (Address)

(Name) (Address)

Please check proper blank:

Pharmacy Nursing Home Wholesaler Other (specify) _____

Drug Schedules Which Will Be Handled: (check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Schedule II Narcotic | <input type="checkbox"/> Schedule II Non-Narcotic |
| <input type="checkbox"/> Schedule III Narcotic | <input type="checkbox"/> Schedule III Non-Narcotic |
| <input type="checkbox"/> Schedule IV (all) | <input type="checkbox"/> Schedule V (all) |

Applicant's signature: _____

Telephone: _____

Name typed or printed: _____

Fax: _____

E-mail address: _____

OFFICE USE ONLY

REGISTRATION NO.: _____

FILE NUMBER: _____

DATE ISSUED: _____

RECEIPT NUMBER: _____

NEW PIC MUST COMPLETE AND RETURN WITH APPLICATION

1. LIST TWO (2) REQUIREMENTS THAT THE CURRENT PIC MUST COMPLETE IF HIS/HER EMPLOYMENT IS TERMINATED OR FOR ANY OTHER REASON HE/SHE WISHES TO BE RELIEVED OF THE RESPONSIBILITIES OF PIC:

(1) _____

(2) _____

2. LIST THREE (3) REQUIREMENTS THAT THE PIC MUST COMPLY WITH WHEN THE PHARMACY, IN WHICH HE/SHE IS SERVING AS PIC, HAS A LOSS OF CONTROLLED SUBSTANCES:

(1) _____

(2) _____

(3) _____

3. LIST FIVE (5) REQUIREMENTS THAT EACH FACILITY THAT HAS BEEN ISSUED A PHARMACY PERMIT BY THE BOARD SHALL MAINTAIN AS OUTLINED IN ARTICLE VII, PARAGRAPH 6. OF THE REGULATIONS:

(1) _____

(2) _____

(3) _____

(4) _____

(5) _____

1. DEFINE THE AUTHORITY OF THE PIC AS IT IS EXPLAINED IN ARTICLE VII, PARAGRAPH 1., A. OF THE PHARMACY PRACTICE REGULATIONS:

FILL IN THE BLANKS:

2. WHEN A PHARMACY PERMIT IS RETURNED TO THE BOARD, APPLICATION MUST BE MADE FOR A NEW PERMIT WITHIN _____ DAYS.

3. THE PIC SHALL VALIDATE ALL PHARMACY TECHNICIAN REGISTRATIONS ON OR BEFORE (DATE) _____ OF EACH YEAR, ASSURING THAT ALL SUCH REGISTRATIONS ARE CURRENT AND IN GOOD STANDING.

4. A PHARMACIST SHALL NOT SUPERVISE MORE THAN _____ PHARMACY TECHNICIANS.

5. EVERY PERSON ACTING OR SERVING AS A PHARMACY TECHNICIAN SHALL WEAR A _____ WHILE ON DUTY, IDENTIFYING HIM OR HER AS SUCH.

6. EACH PHARMACY TECHNICIAN REGISTERED BY THE BOARD SHALL NOTIFY THE BOARD IN WRITING WITHIN _____ DAYS OF CHANGE OF EMPLOYMENT OR ADDRESS.

TRUE OR FALSE

7. _____ A PHARMACY TECHNICIAN MAY ACCEPT AN ORAL NEW PRESCRIPTION ORDER/PRESCRIPTION.

8. _____ A PHARMACY TECHNICIAN MAY AFFIX ALL REQUIRED LABELS UPON ANY PRESCRIPTION MEDICATION CONTAINER DISPENSED BY A PHARMACIST WHILE THE SUPERVISING PHARMACIST IS GONE TO LUNCH.

ARTICLE VI PHARMACY PERMITS

1. Every business or location in this state where prescription drugs are maintained and/or pharmacy services are provided shall obtain a permit as a pharmacy from the Mississippi Board of Pharmacy. Effective January 31, 2011, every pharmacy issued a permit by the Board shall renew this permit biennially. The Board shall identify written criteria and issue permits accordingly in one of the following general classifications:
 - A. Community Pharmacy; or
 - B. Institutional Pharmacy; or
 - C. Limited Closed Door Pharmacy; or
 - D. Nonresident Pharmacy.

2. For purposes of this ARTICLE, definitions are as follows:

- A. A Community Pharmacy shall mean any place, other than an Institutional Pharmacy or a Limited Closed Door Pharmacy, which is accessible to the general public and where pharmacy services are offered. These pharmacies may include, but are not limited to, independent retail or chain retail pharmacies.

A Specialty Community Pharmacy shall mean any place other than an Institutional Pharmacy, Limited Closed Door Pharmacy or a Community Pharmacy where the practice of pharmacy occurs and pharmacy services are provided to patients. These services may include, but are not limited to the following: dispensing sterile pharmaceuticals for home infusion, nuclear pharmacy services, compounding, consulting pharmacist services, disease state management, respiratory services, and dispensing of nursing home medications. These pharmacies may be open on a full or part time basis.

- B. An Institutional Pharmacy shall mean that portion of an institutional facility where the practice of pharmacy occurs and where medications, devices, and other materials are dispensed to their patients.

- (1) An Institutional I Pharmacy shall mean that portion of a hospital where the practice of pharmacy occurs and which is engaged in the compounding, production, and dispensing of drugs, medications, devices and other materials which are used in the diagnosis and treatment of injury, illness, and disease. For purposes of these regulations a hospital shall mean any institution for the care and treatment of the sick and injured which is licensed and approved by the Mississippi State Department of Health, Health Facilities, Licensure and Certification.

- (2) An Institutional II Pharmacy shall mean that portion of an institution, other than a hospital, where the practice of pharmacy occurs, and which is engaged in the compounding, production, and dispensing of drugs, medications, devices, and other materials used in the diagnosis and treatment of injury, illness and disease.

Various categories of Institutional Pharmacies are recognized as follows:
"Institutional Facility" or "Organized Health Care Setting" is a:

- (1) Hospital;
- (2) Convalescent Home;
- (3) Nursing Home;
- (4) Extended Care Facility;
- (5) Mental Institution;
- (6) Rehabilitation Center;
- (3) Retardation Center;
- (8) Correctional Facility;
- (9) Hospice;
- (10) Out-patient surgery facilities;
- (11) Any other such organization whose primary purpose is to provide a residential environment for patients to obtain health care services, and shall not include those places where physicians, dentists, veterinarians or other practitioners of the healing arts, who are duly licensed, engage in private practice.

- C. Limited Closed Door Pharmacy shall mean any place where pharmacy services are provided and where preferentially priced prescription drugs are purchased for the pharmacy's own use to dispense only to their own patients. These pharmacies are not accessible to the general public and may or may not provide full time pharmacy services.

A Limited Closed Door Pharmacy may include, but is not limited to, pharmacies owned by any city, county, or state government and federally, state, or privately funded non-profit community health clinics.

- D. A Nonresident Pharmacy shall mean any pharmacy that is located outside the State of Mississippi which ships, mails, or delivers prescription or legend drugs or devices to patients residing in this state.

3. To obtain a pharmacy permit or renew a pharmacy permit, the applicant shall have:
 - A. Submitted a written application on a form(s) prescribed by the Board;
 - B. Submitted the required fees as follows:
Three hundred dollars (\$300.00) for the registration period January 1, 2012 through December 31, 2013, and each biennial registration period thereafter.
 - C. Any Pharmacy permit renewal application postmarked after December 31 of the renewal period shall be returned and a fifty dollars (\$50.00) late renewal fee shall be assessed prior to renewal.
4. Newly issued permits which do not coincide with the registration period shall be valid for the following periods of time: If the permit is issued in the first half of the registration period, it must be renewed at the end of the registration period. If the permit is issued in the second half of the registration period, it must be renewed at the end of the next registration period.
5. Permits issued to any type facility become null and void sixty (60) days from the date of issuance if inspection reveals a lack of legitimate business activity.

6. A permit for a pharmacy shall not be issued or renewed on the application of any person unless such person be a pharmacist licensed in this state.
7. Original permits, once issued for a new facility, may be returned to the Board and a new permit issued without being assessed an additional permit fee provided:
 - A. The change is on a one-time basis and is within sixty (60) days of original issuance; and
 - B. Controlled substance inventory requirements are met; and
 - C. A twenty-five dollar (\$25.00) processing fee is paid to the Board.

ARTICLE VII RESPONSIBILITY OF PHARMACIST-IN-CHARGE (PIC)

1. The person who signs the application for a pharmacy permit or the renewal of a pharmacy permit shall be the pharmacist-in-charge (PIC) for that facility.
 - A. Authority. The PIC of the pharmacy shall be responsible for complete supervision, management and compliance with all federal and state pharmacy laws and regulations pertaining to the practice of pharmacy in the entire prescription department. He/She shall have the cooperation and support of all pharmacy staff in carrying out these responsibilities. The pharmacist-in-charge is responsible for assuring that all personnel are properly registered or licensed with the Board and, that all pharmacy permits are current and appropriate for the type of pharmacy operation being conducted.

A pharmacist shall not be the PIC at more than one Community Pharmacy or Institutional I Pharmacy and shall not be the pharmacist-in-charge or have personal supervision of more than one facility which is open to the general public on a full time basis.
 - B. Recommended Guidelines:
 - (1) That each individual work space is designed to provide space and a work flow design that will accommodate the workload in an organized fashion;
 - (2) That the computer's software should be of a design so that drug interactions and contraindications must be reviewed by the pharmacist. Further, the computer system should support counseling and drug utilization review documentation;
 - (3) That trained supportive staff should be maintained to meet the demands of the practice site, workload, and the clientele served;
 - (4) That all staff should have the opportunity to take periodic breaks and/or meal periods to relieve fatigue and mental and physical stress. Nothing in this paragraph suggests closing the pharmacy;
 - (5) That all staff should be afforded and encouraged to participate in training and continuing education in order to keep them abreast of new information and changes in the field;
 - (6) That if quotas or formulas such as prescription volume are used to set staffing, conditions such as peak workload periods, workplace design, and the training of staff must be taken into consideration.
 - C. Circumvention. It is a violation of this section for any person to subvert the authority of the pharmacist-in-charge by impeding the management of the prescription department for the compliance with federal and state drug or pharmacy laws and regulations. Any such circumvention may result in charges being filed against the pharmacy permit.
2. A permit for a pharmacy located within the state shall not be issued or renewed unless such person be a pharmacist-licensed in this state.

If the pharmacist license of the pharmacist-in-charge becomes void or inactive due to surrender, revocation, suspension, restriction, or for any other reason, application must be made for a new pharmacy permit by another pharmacist within ten (10) days.

3. If the employment of a pharmacist-in-charge is terminated or if for any other reason he/she wishes to be relieved of the responsibilities of the PIC, he/she must:
 - A. Return the permit to the Mississippi Board of Pharmacy with written notice that he/she is no longer the pharmacist-in-charge for that facility and;
 - B. In accordance with the provision of paragraph 2 of ARTICLE XXV of the Regulations, send to the Board of Pharmacy an inventory of any controlled substances on hand at the facility at the time of his/her termination as pharmacist-in-charge.
 - C. When the relinquishing PIC cannot or does not comply with the inventory requirements of this paragraph it shall be the responsibility of the new PIC to send to the Board of Pharmacy an inventory of any controlled substances on hand at the time he/she assumes responsibility as PIC.
 - D. The relinquishing PIC is responsible for notification of appropriate supervisors or owners of the surrender of the permit.

When a permit is thus returned for a facility, application for a new permit for that facility must be made to the Mississippi Board of Pharmacy within ten (10) days.

4. If a permitted facility is permanently closed or has a change of ownership, the pharmacist-in-charge for that facility shall give notice to the Board of the effective date of closure or change in ownership and include the storage location of the businesses records and appropriate contact information. If a permitted facility has a change in name or location, application for a new permit must be made to the Board at least ten (10) days prior to the change in name or location. Once issued, a permit cannot be amended, transferred, or assigned to another person.
5. On the premises where a pharmacy is maintained in conjunction with other services or business activities, the pharmacy shall be physically secured from such other services or activities during those times a pharmacist is not present and the pharmacy is not open and other services or activities are being provided on the premises.
 - A. The Pharmacy shall be secured by a physical barrier to detect entry at a time when the Pharmacist is not present.
 - B. Each pharmacist, while on duty, shall be responsible for the security of the Pharmacy, including provisions for effective control against theft or diversion of Drugs and/or Devices.
 - C. The pharmacist-in-charge shall be responsible for adequate security being maintained on drugs in all areas of the permitted facility at all times and is responsible for reporting any loss or suspected loss of controlled substances or legend drugs directly to the Board immediately (this does not relieve any pharmacist who discovers a loss from the requirement of reporting the loss directly to the Board).

6. Each facility issued a pharmacy permit by the Mississippi Board of Pharmacy shall maintain:
 - A. An area of sufficient size to accommodate the dispensing functions of the facility and which is adequately equipped to provide for the proper storage of drugs and supplies under appropriate conditions of temperature, light, moisture, sanitation, ventilation, and security. All areas where Drugs and Devices are stored shall be dry, well lighted, well ventilated, and maintained in a clean and orderly condition. Storage areas shall be maintained at temperatures which will ensure the integrity of the Drugs prior to their dispensing as stipulated by the USP-NF and/or the Manufacturer's or Distributor's labeling;
 - B. A sink with hot and cold running water which is convenient to the dispensing area;
 - C. An inventory which shall include such drugs, chemicals, and preparations as may be necessary to fill ordinary prescriptions as indicated by experience in the area where the pharmacy is located;
 - D. Technical equipment which may include measuring graduates, mortar and pestle, spatulas, funnels, ointment slab or paper, balance, and such other items of equipment found to be necessary for the filling of prescriptions or rendering of other pharmacist services;
 - E. Current reference material adequate for professional and consumer information.
 - F. Pharmacy permits, facility controlled substance registrations, and DEA registrations must be conspicuously posted. Evidence of current pharmacist licensure and pharmacy technician registration must be provided on request by any agent of the Board;
 - G. A current and updated copy of the Mississippi Board of Pharmacy Practice Regulations and Pharmacy Practice Act.
7. It is the responsibility of the Pharmacist-in-charge to establish and implement procedures to ensure compliance with the Article entitled Prescription Monitoring Program.
8. The pharmacist-in-charge shall be responsible for written policies and procedures for maintaining the integrity and confidentiality of prescription and patient health care information. All employees of the pharmacy with access to any such information shall be required to read, sign, and comply with the established policies and procedures.