INDEX OF EXHIBITS Board of Pharmacy v. CVS Pharmacy #8804, et al. Case No. 19-131

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| Ex. | Description | Bates Range | # of Pages |
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| | | | |

COMPLAINT RECEIVED JULY 26, 2019, FROM TC

Shirley Hunting

From: Sent: To: Subject: Pharmacy Board Monday, July 29, 2019 11:34 AM Shirley Hunting Fw: Given the wrong medication

Candy Nally Licensing Specialist Newada State Board of Pharmacy

Hi my name is **Table 1** just underwent an IVF=In Vitro fertilization on July 23rd 2019. 2 Embryo's were transferred into my Uterus for me to have a baby. On July 17th My medication for my IVF Transfer procedure were filled by Sandra J Le which were Medrol, Zithromax, Valium and Cytotec. I took the Medrol, Zithromax, and Valium prior and on the day of my procedure. I took the Cytoctec on 07/25/19 Thinking that it was my Progesterone suppositories. Ive always done the progesterone in oil injections this would be my 1st time using the suppositories. I inserted 1 in the morning then the next one was inserted at 6pm my stomach started cramping so i googled the name that was on the bottle to see if that was a side affect and come to find out Cytotec is used for ABORTIONS. I was given the WRONG medication. Now I might lose my 2 Embryos that I Transfered on July 23rd.

PRESCRIPTION DATED JULY 3, 2019, ISSUED BY DR. DREW MOFFITT FOR TC

| | | Rx Details | | |
|----------------------|---|--|--|----------------------------------|
| Request No : 4140264 | Store No : 8804 | Rx No : 1000766 | Fill No : 0 | Fill Date : 07/17/2019 |
| 1 | | Rx Image | Orig. I | Rv Reed. D1: 07/17/2019 12:36:00 |
| | 07/17/2019 09:30 | | (FAX;6173332786 | P:001/001 |
| | Asizona Reproductive N Drew V. Motfin, M.D., FACO 1701 E. Thomas Rd. Bidg 1 S: Phone: (602) 343-2767 | G, Linda Nelson, MD., PhD. FACOG | · · | |
| | PATIENT: T Cd Cheycane Gatelens Way North Las Vegas, NV 89032 D.O.B. | | DATE: 7/3/2019 | |
| | Rx 1 | Insert Plans and but | | |
| | Z. Estrace 2 my tablet 1mk Allow Senerius ree Hedrol 16 mg tablet Take Historized Propesterone 1 Allow Generic: Tee Moles | incert Place one tab veginely a 1 tab FO BID and titrate to TT a 3 tabs FO dis as directed Disp froches 200 mg Eroches Take one to plasmacy: Do not allow genet; O 30 minutes prior to the proces | D as directed Disp: 50 Refilia : 12 Refilia: 0 Alies Generic SL TID is directed Disp: 93 s | H 3 |
| | E Plater and | Take 2 Labs 30 with dismar the y of the procedure Disp: 2 . zefs X | | 2 taha |
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CVS PHARMACY RECORD OF PRESCRIPTION NO. 1000766

| Request No : 4140264 | Store No : 8804 | Rv No : 1000766 | Fill No : 0 | Fill Date : 07/17/2019 |
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| atient | | Quantity & Fill | Contraction of the second second | and the second |
| atient | 7 | Decimal Quantity | | |
| Gender | Female | Refills | 5 | |
| XOB | a wetandere | Quantity Dispense | | |
| Age | 34 | Days Supply | 14 | |
| -Be | 34 | Fill No | and the second se | |
| | | | 0 | |
| Drug | | Store | | |
| Drug | MISOPROSTOL 100 MCG TABLE | | 880- | 1 |
| irength | 100 | NCPDP Id | | 9690 |
| | and the second | NPI Number | the second reaction in the second | 4567424 |
| Dispensed NDC | 59762500701 | Store Address | | |
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| Script Rx No | 1000745 | Prescriber | in the second state of the | |
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| AW | 0 | | PHC | DENIX AZ 85037 |
| Compound Code | 1 | Phone | | and the second |
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| nig. Rx Reed. Dt | 07/17/2019 12:36:00 | NPI | and the second | |
| ill Date | 07/17/2019 | LIC | G67 | 115 |
| a Transfer Code | | Electronic Tran | isaction ID | |
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| ransfer From Store Number | | Sender Message II | | |
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| Provide and the second | | | | |
| Verification | | Med B Docume | nts | etroites |
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| Script Verify Date | 07/17/2019 | Attestation Quantit | ty on Hand | |
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DIGITAL TIME STAMP FOR PRESCRIPTION NO. 1000766

Store 8804

Rx1000766

| LAST_NAME | FIRST_NAME | ACTIVITY | TIMESTAMP | USER_CREDENTIALS |
|-----------|------------|-------------------------|-----------------|------------------|
| Martinez | Haydee | DATAENTRY | 7/17/2019 12:58 | HMart |
| Le | Sandra | DATA_ENTRY_VERIFICATION | 7/17/2019 13:02 | SLe |
| Le | Sandra | DUR_OVERRIDE | 7/17/2019 13:02 | SLe |
| Le | Sandra | WARNING_VERIFICATION | 7/17/2019 13:02 | SLe |
| Martinez | Haydee | PRINTREADY | 7/17/2019 13:10 | HMart |
| Martinez | Haydee | MULTI_PACKAGE_SCAN | 7/17/2019 13:52 | HMart |
| te | Sandra | VERIFICATION | 7/17/2019 15:36 | SLe |
| Le | Sandra | INACTIVATE | 7/26/2019 11:18 | SLe |

| TXN_TYPE | REGISTER_NUM RE | EGISTER_TXN | REGISTER_TXN_ | POS_USERID | AMOUNT | POS_DATETIME |
|----------|-----------------|-------------|---------------|------------|--------|-----------------|
| S | 19 34 | 481 | 2 | 1039951 | 0 | 7/20/2019 15:20 |

Rx1000768

| LAST_NAME | FIRST_NAME | ACTIVITY | TIMESTAMP | USER_CREDENTIALS |
|-----------|------------|--------------------------|-----------------|------------------|
| Cardozo | Vanessa | DATAENTRY | 7/17/2019 13:01 | VCard |
| Le | Sandra | DATA_ENTRY_VERIFICATION | 7/17/2019 13:02 | SLe |
| Le | Sandra | WARNING_VERIFICATION | 7/17/2019 13:02 | SLe |
| Le | Sandra | WARNING_VERIFICATION | 7/17/2019 13:02 | SLe |
| Le | Sandra | DATA_ENTRY_VERIFICATION | 7/17/2019 13:02 | SLe |
| Martinez | Haydee | PRINTREADY | 7/17/2019 13:10 | HMart |
| Martinez | Haydee | DATAENTRY | 7/17/2019 13:40 | HMart |
| Denton | Tarah | ACTIVITY_QI_BATCH_INSERT | 7/18/2019 11:31 | TDent |
| Le | Sandra | DATA_ENTRY_VERIFICATION | 7/18/2019 11:34 | SLe |
| le | Sandra | WARNING_VERIFICATION | 7/18/2019 11:34 | SLe |
| Denton | Tarah | PRINTREADY | 7/18/2019 11:55 | TDent |
| Chavarria | Nancy | MULTI_PACKAGE_SCAN | 7/18/2019 12:31 | NChav |
| Le | Sandra | VERIFICATION | 7/18/2019 16:44 | SLe |

RECORD OF DUR WARNINGS FOR PRESCRIPTION NO. 1000766

Rx1000766

×.

| ł | HARD STOP WARNINGS (1) | Low Dose | | | Rx: 1000/66 Fb 0 | 6 |
|----------|--|--|--|--|--|----------|
| 1 | Low Dose | | | | | |
| | COFT STOP WARNINGS (1) | drug being filled M | ISOPROSTOL 100 MCG TABLET | | 34 years,2 months female | patient |
| 2 | Preg Cat X-Absolute Contraind | DISPERSED total daily dose | 300 mcg | 25% under | | |
| | | RECOMMENDED min daily dose | 400 mcg | | misoprestol 100 mcg tablet | Π |
| | | | Ned dosing for this drug, select RD RG STOL last filled da | | dispensed 42 EA days supply 14 total daily dose 300 mcg Place 1 tablet yaginally 3 times a day | seally |
| | row spidown to view warnings | Add/New DUR Common | - 4000 | *Retail Ru's only | Moffitt, Drew (602) 343-2767 | pression |
| | | The supervision of the local division in the local division of the | anged since this prescription wa | and the second | ctples, conditions) | 190 |
| | La function and press <enter> Review Data Entry (V) Recommende</enter> | Id Dosing (BD) View Interv | ention Details (<u>VI) </u> Vertiled By Det | alls (<u>VB</u>) Print: PrintWa | amings (P) Actions : Continue (Enter) | |
| lato ; F | Call (MC) Ent (8) | | Mo | re Options (M) | | |

| rchive | g being til d DUR Co | A CONTRACTOR OF | | 100 MCG TABLET for up to 5 Years | Prescriber Na | une: MOF | FITT, DREW | Faller: 00 |
|---|-------------------------|---|--------|-------------------------------------|---------------|----------|--------------|---|
| ta No | | REF | Filler | Drug Name | Prescriber | RPh | Date Entered | Comments |
| 1 | 08804 | 1014741 | 00 | ENSKYCE 28 TABLET | MOFFITT, DREW | S.Le | 09/06/2019 | NOT TRUE HIGH DOSE, PATIENT IS SKIPPING |
| 2 | 08804 | E1013552 | 00 | PROGESTERONE SOO MGPID ML | MOFFITT, DREW | C Pate | 09/02/2019 | IS USING FOR MF |
| 3 | 08804 | 1001220 | 00 | DIAZEPAN SING TABLET | MOFFITT, DREW | SLe | 07/18/2019 | NO DUR EXISTS |
| 4 | 08804 | 1000765 | 00 | MISOPROSTOL 100 NCG TABLET | MOFFITT, DREW | S.Le | 07/17/2019 | NO DUR EXISTS |
| 5 | 08804 | DE0983904 | 00 | ENSKYCE 28 TABLET | MOFFITT, DREW | SLe | 05/17/2019 | NO DUR EXIST |
| 6 | 08304 | 0980317 | 00 | DIAZEPAN 5 NG TABLET | MOFFITT, DREW | SLe | 05/01/2019 | NO DUR EXISTS |
| 7 | 08804 | E0979100 | D1 | PROGESTERONE OIL SO MGAIL | MOFFITT, DREW | KPham | 05/03/2019 | REVIEWED |
| 8 | 08804 | 0979097 | 00 | ESTRADIOL 2 NG TABLET | NOFFITT, DREW | KPham | 04/25/2019 | REVIEWED |
| 10 A | 1 of 2 ge(Enter) | | | | | | | Prescriber Consult Request Comments |

| | DOB | Ť | A | e 34 Years Gender | Female Addres | S NOR | HEAR WERE SH | DENS WAY | fix Number 1000765 |
|--------------|----------------------|---------------------------------|----------------------------|--|-------------------|--------------------|---------------|--------------------------|-----------------------|
| Dn | ug being M | led: MISOPI | tosto | L 100 NCG TABLET | Prescriber Na | me: MO | FITT, DREW | | Filler: DO |
| nchiv how | AR Active | mments are a | valabb | e for up to 5 Years | | | | | |
| n. No | a Store | fian - | f die | Urug Name | Prescriber | RPh | Liale Entered | Commen | 8 |
| 1 | 08804 | E0979100 | 02 | PROGESTERONE OIL 50 MGAIL | MOFFITT, DREW | SL | 05/17/2019 | NO DUR EXISTS | |
| 2 | 08804 | E0979100 | 03 | PROGESTERONE 500 MG/10 ML | MOFFITT DREW | 3.60 | 07/26/2019 | NO DUR EDISTE | |
| 3 | 08804 | 0979100 | 02 | PROGESTERONE 500 MG/10 ML | MOFFITT, DREW | KPham | 06/26/2019 | REVIEWED | |
| 4 | 08804 | E0979100 | 00 | PROCESTERONE OIL 50 MGAAL | MOFFITT DREW | SLa | 04/30/2019 | NO DUR EXIST | |
| 5 | 08804 | 0979097 | 01 | ESTRADIOL 2 MG TABLET | MOFFITT, DREW | SLe | 05/23/2019 | NO DUR EXISTS | |
| 5 | 08804 | 0966483 | 00 | ENSKYCE 28 TABLET | MOFFITT DREW | SLa | 03/14/2019 | PATIENT IS SKIPPING PLAC | EBOS |
| 7 | 08804 | 0906036 | 00 | CEFDING 300 MG CAPSULE | HODAPP, HEATH | KPham | 07/30/2018 | REVIEWED | |
| | 2 of 2 us Page (3 | icace) | + | | Arrest Creation | k | | Prescriber Consult Rec | pest Comments |
| Vie | - Machine | function and p 1) Add DUR Co | Canad and produced and and | (ster> t (AC), Filter DUR Comments (E), Vier | w Archived Common | 5 (<u>V</u>), Es | l QU | | |
| - | | | 31 | | | | | | |

| | HARD STOP WARHINGS (1) | | | | Rx: 1000766 Fill | 00 |
|-----|--|--|------------------------|-----------------|---|-------------|
| 1 | Low Dote CHECKPOINT | Hard Stop Warnings Reviewed a | 71 | | | 2 |
| - | SOFT STOP WARNINGS (1) | Intervention Codo RPh Appro | wed - Intervention Not | Needed | 34 years,2 months | FLOM |
| 2 | Child bearing Age Prog Call X: Absolute Contraindi | | | | lemaig | |
| | | fecent Sistery* MISOPROSTOL | | | misoprostol 100 mcg tablet zirength 100 MCG dispensed 42 EA Gays supply 14 total dally dese 300 mcg Place 1 tablet veglaally 3 times a | settes |
| | Arrow polytown or onser warping | Store # Greg seme | last lilled d. | ite disp qty | dey | |
| | nunger to view warnings | AddWaw DUR Comments (AC/DC) | | "Retail Ra's o | Moffitt, Orew (602) 343-2767 | Incarant |
| | ect a function and press <enter></enter> | er Information may have changed since id Dasing (RD) View intervention Detail | | | , nBergies, conditions) Il Wamings (P) Actions : Continue (Ente | טו |
| nto | :Review Data Entry (V) Recommends e Call (MC) Est (V) | | Line Line | ure Options (M) | | |

RECORD OF COUNSELING FOR PRESCRIPTION NO. 1000766

| Prescri DEA | BH4034360 KPt | W NPI 1215916580 | Phone No. (602) 343 Fax (602) 343 | Status Date 07/20/2019 | |
|----------------|---|--------------------|--------------------------------------|--|-------------|
| myras | ny ANTHEN BOBS NO. M Counsel Patient A | | Card Holder ID 713803515 | Promised Date 07/17/2019 Promised Time 11:58 AM | |
| n No. | Date Jime | Fia No. | Counsel Type | Contase) Disposition | Credentials |
| 1 | 07/20/2019 12:22 PM | 00 | State Mandalory | Patient/Caregiver Counseled | K.Pham |
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| 203 | | | þ | R USA SUBARAN | |
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CVS PHARMACY RECORD OF PRESCRIPTION NO. 1000769

| Request No : 4140264 | Store No : 8804 | RA No ; 1000769 | Fill No : 0 | Fill Date : 07/17/2019 |
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DIGITAL TIME STAMP FOR PRESCRIPTION NO. 1000769

| TXN_TYPE | REGISTER_NUM | REGISTER_TXN | REGISTER_TXN_S | POS_USERID | AMOUNT | POS_DATETIME |
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| S | 19 | 3481 | 4 | 1039951 | 0 | 7/20/2019 15:20 |

Rx1000769

| LAST_NAME | FIRST_NAME | ACTIVITY | TIMESTAMP | USER_CREDENTIALS |
|-----------|------------|------------------------------|-----------------|------------------|
| Cardozo | Vanessa | DATAENTRY | 7/17/2019 13:02 | VCard |
| | | ACTIVITY_WAVE_BYPASS | 7/17/2019 13:02 | N/A |
| Le | Sandra | DATA_ENTRY_VERIFICATION | 7/17/2019 13:02 | Ste |
| Martinez | Haydee | PRINTREADY | 7/17/2019 13:10 | HMart |
| Martinez | Haydee | MULTI_PACKAGE_CONFIRMATION_5 | 7/17/2019 13:42 | HMart |
| Le | Sandra | VERIFICATION | 7/17/2019 15:01 | SLe |

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| LAST_NAME | FIRST_NAME | ACTIVITY | TIMESTAMP | USER_CREDENTIALS |
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| Le | Sandra | PREDATAENTRY_SCAN | 7/18/2019 16:45 | SLe |
| le | Sandra | DATAENTRY | 7/18/2019 17:04 | Ste |
| Le | Sandra | DUR_OVERRIDE | 7/18/2019 17:05 | SLe |
| Le | Sandra | DATA_ENTRY_VERIFICATION | 7/18/2019 17:05 | SLe |
| Le | Sandra | WARNING_VERIFICATION | 7/18/2019 17:05 | SLe |
| Gabriel | Audia | PRINTREADY | 7/18/2019 17:08 | AGabr |
| Martinez | Haydee | MULTI_PACKAGE_SCAN | 7/18/2019 17:42 | HMart |
| Le | Sandra | VERIFICATION | 7/18/2019 17:44 | SLe |
| Petersen | Christopher | LABEL_REPRINT | 8/7/2019 23:48 | CPete |

| TXN_TYPE | REGISTER_NUM | REGISTER_TXN | REGISTER_TXN_S | | AMOUNT | POS_DATETIME |
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STATEMENT OF SANDRA LE, PHARMACY MANAGER, DATED SEPTEMBER 24, 2019

September 24, 2019

Dena McClish Investigator Nevada State Board of Pharmacy 1050 🛱 Flamingo Rd, Ste E217 Las Vegas, NV 89119

RE: Pharmacy License: PH01093 CVS Pharmacy #8804 1408 West Craig Road Las Vegas, NV 89032 Case No: 19-131

Dear Ms. McClish,

Please accept this response in regards to the aforementioned case dated September 4, 2019.

I was the verification pharmacist for Rx1000766 for T.C. on July 17, 2019, for the prescription filled as misoprostol for endometrin. Upon data verification of the incorrectly entered misoprostol, I remember knowing about the patient and being aware of her treatment at a facility in Arizona. Upon seeing the misoprostol, the recollection in my mind was that perhaps a fertility treatment had failed and it was being used in conjunction with a D and C procedure. When she picked up these prescriptions on July 20, 2019, the pharmacist on duty was Khanh Pham who is no longer with the company. Upon deviewing the cameras, it showed that Pharmacist Pham did not have contact with the patient/caregiver who was picking up the prescriptions through drive thru.

I was alerted to the prescription incident by Chris Petersen on Thursday, July 25th at 9:40pm via text message and texted back to Chris for clarification on the incident and to ensure that he had contacted our supervisor as well. I spoke with Jody the following morning, Friday, July 26th regarding the incident and next steps to follow. Upon arriving at CVS# 8804. I checked the patient's profile to see if there were any additional refills on her injectable progesterone and if we had the medication in stock. I also called the physician's office to see if I would be able to speak to a physician in order to follow through on next steps to take care of the patient. I was unable to speak to a physician or nurse as they were all in surgery and were due to come out of surgery later. I left a message for them to call me back.

Around 8:05 am I left a message on T.C.'s cellphone stating that I had the injectable progesterone prescribed in stock and that I had filled the injectable progesterone prescription but I was waiting to hear back from the physician's office to see what they wanted to do to proceed. I later called the physician's office at 9:10a to follow up and see if I would be able to speak with the physician or nurse, but again was not able to speak to anyone as they were still in surgery. I then spoke to my supervisor who advised that we needed to get the injectable progesterone to the patient as soon as we were able to contact her. Around 10am I called T.C. again and was able to speak to her. She stated that she had spoken with the physician the prior night and wanted her to start the progesterone injection as soon as possible. I confirmed T.C.'s address and stated that I was sending a technician to deliver the injections to her at no charge. I asked if she needed any additional supplies such as alcohol swabs or syringes to inject the medication with. She stated she did not need anything except for the progesterone injection.

I had my technician Tarah Denton leave the store and deliver the medication to the patient around 10:05am. Tarah returned after delivering the medication and I later spoke with Sarah from the physician's office who stated that she was going to contact the patient to see when the misoprostol had been used. Sarah stated that she would follow up with our pharmacy if there was anything further that we needed to do for the patient.

I am truly sorry for what happened to T.C. I will remain dedicated to maintaining high safety standards with each prescription I verify and be diligent in providing quality healthcare while focusing on patient safety.

P.003

One CVS Drive Woonsocket, RI 02895

FAX:

Sincerely,

Sandra Le Pharmacy Manager CVS 8804 Phone P.004

STATEMENT OF CHRIS PETERSEN, PHARMACIST, DATED SEPTEMBER 24, 2019

OCT-01-2019 TUE 04:57 PM

♦ GVSHealth

September 24, 2019

Dena McClish Investigator Nevada State Board of Pharmacy 1050 E Flamingo Rd, Ste E217 Las Vegas, NV 89119

RE: Pharmacy License: PH01093 CVS Pharmacy #8804 1408 West Craig Road Las Vegas, NV 89032 Case No. 19-131

Dear Ms. McClish,

Please accept this response in regards to the aforementioned case dated September 4, 2019.

On Thuisday, July 25, 2019 a technician informed me that a patient T.C. was on the phone and handed me a printout of the hard copy prescription in question. When speaking with T.C., she was concerned that we filled misoprostol instead of her progesterone vaginal suppositories. She said that she has inserted 2 misoprostol tablets vaginally in the past day and was now experiencing cramping and had read online that misoprostol can be used for an abortion. I apologized profusely about the situation and listened to her concerns. She told me that she just had an IVF treatment 2 days ago and was deeply concerned that misoprostol is used for abortions. At this time she was audibly upset and sounded as if she was crying. I continued to apologize, stated how sorry I was, and did my best to console her. After speaking with her for a while I asked her if she would like my district manager to treach out to her. She replied yes. I told her that if nobody reached out to her that evening, I would immediately follow up first thing Friday morning with my pharmacy manager to make sure her care was a priority for our pharmacy. She also asked how this issue could have occurred and wanted to make sure the verifying filling pharmacist was aware so that it wouldn't happen again. I told her that I was not sure how it happened but that the verifying pharmacist would be notified and any errors in the pharmacy that may occur are reviewed by store leadership and pharmacy staff to reeducate pharmacy staff and ensure the error does not occur again.

After the call I immediately reached out to my district leader to inform her of the serious situation and to reach out as soon as possible. I then completed the incident report. After approximately I hour passed, I called T.C. back to let her know that I hadn't heard back from my supervisor but reassured her that we would handle this the first thing in the moming. Before leaving work that night, I left a note for my pharmacy manager to make her aware of the situation and to make sure the patient was taken care of immediately. When I texted the pharmacy manager the following moming, she said that both our district leader and herself had been in contact with the patient and are giving her their full attention.

The following evening I called T.C. to see how she was doing. She said the cramping had lessened and was feeling a little better. I asked her if my supervisors had adequately responded to her to which she said that she was pleased with their fast response and they both showed genuine compassion about her. I asked if there was anything at all we could do for her and she said no but to keep her in our thorghts and prayers. I said I would and told her I work 5:30 pm to midnight on Monday through Friday and to call me if there is anything I could do.

If you need anything else concerning this matter, please do not hesitate to contact me.

Sincere

Chris Petersen Pharmacist CVS 8804 Phone:

FAX:

One CVS Drive Woonsocket, RI 02895

STATEMENT OF HAYDEE MARTINEZ, PHARMACY TECHNICIAN, DATED SEPTEMBER 24, 2019

| OCT-01-2019 TUE 0 | 4:58 PM | FAX: | P.005 |
|---|---|--|-----------------------|
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| ♥CVS He | alth | One CVS Drive Woonsocker, RI 02895 | |
| September 24, 201 | 9 | | |
| Dena McClish | | | |
| Investigator Nevada State Boar | | | |
| 1050 E Flamingo I Las Vegas, NV 89 | | | |
| CVS Phar | License: PH01093 macy #8804 t Craig Road Las Ve 19-131 | gas, NV 89032 | |
| Dear Ms. McClish | • ₃₁ | | |
| Please accept this | response in regards | o the afotementioned case dated September 4, 2019. | |
| In regards to the fi generic for the end | ll of Rx1000766, I v lometrin 100mg vag | as the technician who data entered the incorrect medication. I nal inserts. | believed it to be the |
| If you need anythi | ng else concerning (| is matter, please do not hesitate to contact me. | |
| Sincerely, | | | |
| haydeen | | | |
| Haydee Martinez Technician | | | |
| CVS 8804 Phone: | | | |
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STATEMENT OF JODY LEWIS, CVS HEALTH DISTRICT LEADER, DATED SEPTEMBER 24, 2019

One CVS Drive

Woonsocket, RI 02895

♥CVSHealth

September 24, 2019

Dena McClish Investigator Nevada State Board of Pharmacy 1050 E Flamingo Rd, Ste E217 Las Vegas, NV 89119

RE: Pharmacy License: PH01093 CVS Pharmacy #8804 1408 West Craig Road Las Vegas, NV 89032 Case No. 19-131

Dear Ms. McClish,

Please accept this response in regards to the aforementioned case dated September 4, 2019.

I was very involved in this particular incident. I spoke with Ms. Control initially on 07/26/19 after being notified by my staff pharmacist at CVS 8804 of the incident. My first action was to ensure that my pharmacy manager contacted the patient's prescriber and that we were able to get her the medication she needed, which was done and delivered to her home that same morning.

I did a full review of the incident including discussions with all colleagues involved, as well as an assessment of workflow and policies and procedures to identify the cause of the issue. The following were areas of follow up/actions left with the pharmacy manager:

- Review of proper drug scroll at data entry with all colleagues, including assignment of 2 internal training modules for all colleagues designed to focus on minimizing risk of errors at data entry to ensure patient safety
- · Review of pharmacist steps at verification process to ensure patient history review is completed
- Review with pharmacists on clear DUR documentation indicating why the pharmacist was comfortable filling the medication
- Review of CVS policy and Nevada law requirements for counseling and documentation of such counseling with all team members. Pharmacists were assigned to complete CE program on either patient counseling or medication errors.
- Completion of full patient safety assessment at all workstations to ensure safety moving forward

If you need anything else concerning this matter, please do not hesitate to contact me.

Sincerely,

y Luis

Jody Lewis, Pharm.D CVS Health District Leader Phone:

BOARD OF PHARMACY REQUEST FOR RECORDS DATED SEPTEMBER 4, 2019



Nevada State Board of Pharmacy

1050 E FLAMINGO RD • SUITE E217 • LAS VEGAS, NEVADA 89119 1-800-364-2081 • FAX (702) 486-7903 • www.bop.nv.gov.

Case # 19-131

September 4, 2019 CVS Pharmacy #8804 Managing Pharmacist Phone Number: 702-642-2680 Fax Number: 702-642-2673

The NV Board of Pharmacy has received a complaint alleging a possible misfill and lack of counseling on a new prescription by CVS Pharmacy #8804. Specifically, patient The Counter was given the wrong medication in July 2019. To address this complaint, please provide the following:

- 1. Prescription profile for T DOB
- 2. Copy of all original prescriptions filled from 07/10/2019 to 07/25/2019 (front and back)
- 3. Copy of the duplicate prescription label for each of the above prescriptions
- 4. Workflow documents The **complete** transaction history of filling the prescriptions from drop-off and data entry to counseling and point of sale to include the initials/record of the pharmacists, techs, and clerks involved in each transaction. Please include data entry, allergy, medical conditions, and DUR screen prints (or records).
- 5. Memos, reports, or notes concerning this incident including any record of contact with the patient, care-giver, and/or practitioner.
- 6. Brief written summary of what occurred or may have occurred during this incident.
- 7. Signed statements of pharmacist and technicians involved in input, labeling, fill, verification and counseling of the prescription in question. Please include an explanation of how this error may have occurred and what changes, if applicable, may be implemented to prevent recurrence.
- 8. Counseling logs for all prescriptions above.
- 9. Pharmacy sign-in logs, work schedules, and/or timeclock records (if applicable) for technicians and pharmacists for the dates of entry, fill, and sale of the prescription(s) in question.
- 10. A report of the number of prescriptions that required counseling, the number of prescriptions that received counseling, the number of prescriptions that refused counseling, and the number of prescriptions in which counseling was not documented for the dates 07/16/2019 07/19/2019.

Please contact me at 702-486-6420 x 154 with any questions and when these documents are ready for pickup, no later than 09/25/2019.

Thank you for your cooperation in this matter,

Dena M McClish, Investigator Nevada State Board of Pharmacy 1050 E Flamingo Rd Ste E217, Las Vegas, NV 89119 Office Number: 702 486-6420 x154 Cell Number: 702-494-8672 Fax Number: 702-486-7903 E-Mail Address: dmcclish@pharmacy.nv.gov

