Standard Operation Procedures Request

Please provide the following:

1. Copies of all SOPs that are utilized by your location to administer the dispensing of controlled substances.

2. Please describe the manner in which all of your applicable personnel are trained and monitored to ensure that they fill prescriptions for products that will be utilized only for legitimate medical purposes in accordance with 21 CFR 1306.04.

3. Please describe the processes that are utilized to ensure that your pharmacy is filling prescriptions submitted only by physicians in good standing who are not engaged in suspicious practices and have not been recently disciplined, including your receipt and verification of the physicians’ DEA registrations, schedules and state board licenses.

4. Please describe the manner in which you maintain the information listed in Paragraph 3 above in your computer system and/or hard copy files.