

Maryland Board of Pharmacy news

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The Mission of the Maryland Board of Pharmacy is to protect Maryland consumers and to promote quality healthcare in the field of pharmacy through licensing pharmacists and registering pharmacy technicians, issuing permits to pharmacies and distributors, setting pharmacy practice standards and through developing and enforcing regulations and legislation, resolving complaints, and educating the public.

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From The Executive Director's Desk

LaVerne Naesea, Executive Director

Notice of Acceptance of Nominations for Board Commissioners - Long Term Care and Chain Drug Store Representatives

The Maryland Board of Pharmacy is comprised of ten (10) pharmacist members and two (2) consumer members. A member may serve a total of two consecutive four-year terms. Members' terms are staggered and Maryland law requires the Board of Pharmacy to notify all licensed pharmacists and other interested parties when four-year terms are scheduled to end. In addition, the Board must provide contact information for groups to which letters of interest may be submitted if an eligible individual is interested in being considered for nomination to the Board. The full text of the

statute is found in Health Occupations §12-202.

Maryland law designates specific categories of representation for the 12 Board seats. The second four-year term for the member serving in the Long Term Care seat will expire April 30, 2012. The second four-year term for the member serving in the Chain Drug Store seat will also expire April 30, 2012.

Two (2) non-pharmacist consumer members are appointed by the Governor to the Board with the advice of the Secretary and the consent of the Senate. Pharmacist members are appointed by the Governor with the advice of the Secretary of the Department of Health and Mental Hygiene, from lists submitted by the appropriate association.

The requirements for appointment to the Board are as follows:

PHARMACIST APPOINTEES (10)

Maryland Resident
 Licensed Maryland pharmacist
 In good standing with the Board
 Skilled and competent pharmacist
 Possesses at least five years of professional experience

CONSUMER APPOINTEES (2)

Maryland Resident
 May not have been a pharmacist
 May not have a pharmacist in the household
 May not have participated in pharmacy field
 May not have had a substantial financial interest in a person regulated by the Board within two years prior to the appointment.

Long Term Care: The Maryland Chapter-American Society of Consultant Pharmacists submits three (3) pharmacists' names, who at the time of appointment, practice primarily in long term care pharmacy for each open seat;

sion of chain drug store services for each open seat;

Chain Drug Store: The Maryland Association of Chain Drug Stores submits three (3) pharmacists' names, who at the time of appointment, practice primarily in a pharmacy that specializes in the provi-

Eligible licensed pharmacists who wish to be considered for nomination to either of the two upcoming pharmacist seats should provide a letter of interest along with a biographical form (available on the Board's web site <http://www.dhmh.maryland.gov/pharmacy> or through the association) to the appropriate association noted below.

Continued on page 2

From The Executive Director's Desk continued from page 1

Long Term Care Representative

Maryland Chapter -
American Society of Consultant Pharmacists
10222 Maple Glen Ct.
Ellicott City, MD 21042
Phone: 410-465-7011
Fax: 410-465-7073
E-mail: mdascp@rxassociationmgt.com

Interest Letter and Biographical form must be submitted on or before March 2, 2012

Chain Drug Store Representative

Stanton G. Ades, Chair
MD Assoc. of Chain Drug Stores
Senior Vice President
NeighborCare Professional Pharmacies
1800 Washington Boulevard, Suite 420
Baltimore, MD 21230
Phone: 410 385 4394
Mobile: 410 925 1848
Fax: 877 374 8016

Interest Letter and Biographical form must be submitted on or before March 9, 2012.

Learn About and Sign-up for CPE Monitor!!!

The American Council on Pharmaceutical Education (ACPE) and the National Association of Boards of Pharmacy (NABP) are developing a continuing pharmacy education (CPE) tracking service that will verify and store data for completed CPE credits/units received by pharmacists and pharmacy technicians from ACPE-accredited providers. This service, CPE Monitor, will save pharmacists, pharmacy technicians, CPE providers, and the state boards of pharmacy time and costs by streamlining the process of verifying that licensees and registrants meet CPE requirements by providing an online, centralized repository for pharmacists' and pharmacy technicians' continuing education details. ACPE-accredited providers will no longer need to provide electronic or printed statements of credit to their pharmacist and pharmacy technician participants. Instead, once information is received by NABP, the tracking system will make CPE data for each participant available to the state boards of pharmacy where the participant is licensed or registered.

To learn more about the program and to sign-up for CPE Monitor, please visit the information page on the NABP website at <http://www.nabp.net/programs/cpe-monitor/cpe-monitor-service/>. The anticipated date of activation of the CPE Monitor system is Fall 2012.

PRACTICE CORNER: FAQs

Anna Jeffers, Legislations/Regulations Manager

1) May a pharmacist administer an influenza vaccination to children age 9 and above?

As of October 1, 2011, pharmacists may administer influenza vaccines to children age 9 and older in accordance with SB 845 Pharmacists – Administration of Vaccinations – Children, and the regulations below:

.03 Requirements to Administer Vaccinations.

- A. (text unchanged)
- B. A licensed pharmacist may not administer:
 - (1) An influenza vaccination to an individual who is younger than 9 years old; and
 - (2) Vaccinations, other than influenza, to any individual younger than 18 years old.
- C. A pharmacist shall report to the Maryland Immunization Registry an influenza vaccination administered by the pharmacist to individuals who are from 9 to 18 years old.
- D. A pharmacist shall:
 - (1) Provide the patient with a vaccine information statement issued by the Centers for Disease Control and Prevention;
 - (2) Obtain a signed consent form from the patient or custodial parent; and
 - (3) Observe the patient for a period of 15 minutes after administration of the vaccine for adverse effects including syncope.
- [C.] E. (text unchanged)

Please see last month's Newsletter for information concerning the Immunization Registry.

2) How are Durable Medical Equipment (DME) providers licensed in Maryland?

If the DME items are non-prescription items as determined by the FDA and an entity is providing DME to individuals in Maryland, then the entity would not be required to be licensed by the Board. It would, however, be regulated by the Office of Health Care Quality (OHCQ) as a Residential Service Agenda (RSA). Please refer to OHCQ website: <http://www.dhmf.state.md.us/ohcq/>

3) Is a pharmacist required to obtain an additional license from the Board to act as a consulting pharmacist in an assisted living facility?

A pharmacist license is all that is required from the Board to be a consultant pharmacist in an assisted living facility. You may want to review COMAR 10.07.14.29 Medication Management and Administration, Assisted Living Programs, as well as contacting the American Society of Consultant Pharmacists (ASCP) for educational opportunities for the consultant pharmacist. <https://www.ascp.com/>

You may access COMAR on the Board's website at: www.dhmf.maryland.gov/pharmacy Click on Laws, Regulations, Legislation and Reports on the left menu. Scroll down and click on "Search the Code of Maryland Regulations." Select Option 1. Please be advised to enter all eight numbers in the box provided: 10.07.14.29.

The Maryland Board of Pharmacy recently encountered many pharmacy technicians who are practicing without a Maryland registration or with an expired registration. Unless exempted, practicing without a valid state pharmacy technician registration is illegal and may subject the unlicensed pharmacy technician, as well as the permit holder, to disciplinary action. Actions taken by the Board may include, but are not limited to, monetary fines and/or denial of a registration. Both the pharmacy technician and the permit holder are responsible to ensure that the pharmacy technician is working with an active registration.

The permit holder is to conspicuously post the current (that is, the non-expired) permits, licenses, and registrations of the pharmacy and the entire licensed pharmacy staff. The posted permits, licenses, and registrations must be the original ones that were issued by the Board unless the staff only works part time, for which a photocopy may be posted instead. Cashiers or clerks may not perform pharmacy technician duties unless these personnel are in a board-approved training program (for not longer than 6 months) to become pharmacy technicians. Registration requirements for pharmacy technicians are in COMAR 10.34.34.04 and for pharmacy students in COMAR 10.34.34.05. The requirements are as follows:

Registration Requirements for Pharmacy Technicians

.04 Registration Requirements.

- A. An applicant currently certified by a national pharmacy technician certification program shall:
- (1) Submit to the Board a signed completed application on a form provided by the Board;
 - (2) Submit to the Board evidence of current certification by a national pharmacy certification program;
 - (3) Pay a fee as set forth in COMAR 10.34.09; and
 - (4) Submit a request for a State Criminal History Records check.
- B. An applicant that does not qualify under §A of this regulation shall:
- 1) Submit to the Board a signed completed application on a form provided by the Board;
 - (2) Be 17 years old or older;
 - (3) Meet the following educational requirements:
 - (a) Be a high school graduate or have attained a high school equivalency diploma;
 - (b) Be enrolled and in good standing at a high school; or
 - (c) Meet the requirements of §C of this regulation;
 - (4) Provide satisfactory proof to the Board of the applicant's successful completion of a pharmacy technician training program approved by the Board that:
 - (a) Is no longer than 6 months duration; and
 - (b) Includes 160 hours of work experience;
 - (5) Pass an examination approved by the Board as set forth in Regulation .06 of this chapter;
 - (6) Pay a fee as set forth in COMAR 10.34.09; and

- (7) Submit a request for a State Criminal History Records check.

C. An applicant who does not meet the requirements of §A or B of this regulation shall:

- 1) Submit to the Board a signed application on a form provided by the Board;
- (2) Comply with the age requirements as set forth in §B of this regulation;
- (3) Provide written verification from the pharmacy permit holder that the applicant has worked in the pharmacy area of a pharmacy operated by the same pharmacy permit holder continuously since January 1, 2006;
- (4) Provide written verification from the pharmacist who has supervised the applicant for at least 6 months that the applicant has performed competently;
- (5) Pay a fee as set forth in COMAR 10.34.09; and
- (6) Submit a request for a State Criminal History Records check.

D. The Board of Pharmacy shall provide the pharmacy technician with a registration card and pocket identification card upon initial registration and renewal.

Registration Requirements for Pharmacy Students

.05 Pharmacy Students.

- A. Pharmacy students who are practicing in a pharmacy as part of a school of pharmacy sanctioned experiential learning rotation are not subject to the registration requirements of Regulation .04 of the chapter.
- B. Pharmacy students performing pharmacy technician functions and who are not in a school of pharmacy sanctioned experiential learning program shall:
- (1) Submit to the Board a signed completed application for exemption from the registration requirements of Regulation .04 of this chapter; and
 - (2) Comply with the following conditions:
 - (a) Provide verification of enrollment and good standing at an accredited school of pharmacy;
 - (b) Pay an exemption fee as set forth in COMAR 10.34.09; and
 - (c) Submit a request for a State Criminal History Records check.
- C. A pharmacy student may begin work under this exemption upon compliance with §B(1) and (2) of this regulation.
- D. Pharmacy students granted an exemption from registration requirements of Regulation .04 of this chapter:
- (1) Are not subject to renewal requirements as set forth in Regulation .08 of this chapter; and
 - (2) Shall provide to the Board proof of enrollment in good standing at an accredited school of pharmacy once a year and upon request of the Board.

DISCIPLINARY ACTIONS

Pharmacists	Lic. #	Status	Date
Ramon Juta	10535	Probation	9/21/11
Daniel Mackley	08389	Summarily Suspended	11/28/11
Stephen Yi	Applicant	Probation	12/21/11
Pharmacist Technicians	Reg. #	Status	Date
Katrice Joe	T04389	Summarily Suspended	10/19/11
Patrice McClendon	T06354	Summarily Suspended	10/19/11
Amber Coleman	T04395	Summarily Suspended	12/5/11
Larry Bailey	Applicant	Denied	12/13/11
Katie Mann	T08224	Revoked	12/21/11
Dawn Adkins	T08061	Revoked	12/21/11
Establishment	Permit #	Sanction	Date
Pikesville Pharmacy	P05360	Fine \$500	10/17/11
Pikesville Pharmacy	P04352	Fine \$500	10/17/11
Priority Healthcare	PW0275	Fine \$2000	10/19/11
Southern MD Hospital Pharmacy	P00763	Fine \$500	11/15/11
Neb24	PW0305	Fine \$1000	11/28/11
Institutional Pharmacy	PW0058	Fine \$2500	12/8/11

LEGISLATION/REGULATIONS UNIT

Anna Jeffers, Legislation/Regulations Unit Manager

COMAR 10.34.35.01 - .10 Infusion Pharmacy Services in an Alternate Site Care Environment

The Board recently proposed regulations to establish uniform standards for pharmacies that provide infusion therapy to patients in alternate site care environments in Maryland. See the Maryland Register, Volume 38, Issue 17, August 12, 2011. The regulations set forth responsibilities for the permit holder, supervising pharmacist, pharmacist, and support personnel. It requires policies and procedures that address personnel, security, standards of patient care, infection control, initial and ongoing home safety assessments, patient education, patient care operations, delivery arrangements, patient confidentiality, and pharmacist availability after hours. Training requirements for all staff is required to address patient care, universal precautions, warehouse and equipment orientation, waste management, hazardous substances, customer service, patient confidentiality, policies and procedures, and other activities. Specific training requirements are broken down by pharmacist, pharmacy technician and unlicensed personnel and specific reference materials are required. A performance improvement program will also be required to address medication errors, adverse drug reactions and equipment malfunctions. The chapter specifically addresses discontinuation of infusion therapy and end of therapy orders. The effective date of this chapter, as corrected in the December 2, 2011 Maryland Register, is March 1, 2012 to allow infusion pharmacies time to prepare for the new requirements.

Script Your Future

Janet Seeds, Public Information Officer

RAISING AWARENESS ABOUT MEDICATION ADHERENCE – A Campaign of the National Consumers League

According to www.scriptyourfuture.org, “nearly 3 out of 4 Americans don’t take their medications as directed, resulting in serious health consequences.” There may be many reasons for non-adherence, but the fact remains that the health and futures of patients are being put at risk.

Script Your Future, launched by the National Consumers League (NCL), is a national campaign to raise awareness about medication adherence. Along with nearly 100 public and private stakeholder organizations, the campaign will promote resources to help patients adhere and offer tips for the health care professionals who care for them. This national campaign launched its Baltimore coalition on Wednesday, November 2, 2011 at the Maryland Science Center at the Inner Harbor in downtown Baltimore.

You are in a critical position, as a health care professional, to help patients understand the vital role medication plays in managing illnesses. Also, chronic conditions such as high cholesterol, hypertension, COPD, asthma and diabetes require strict adherence to medications. It simply starts with a conversation.

U.S. Department of Justice, Drug Enforcement Administration

John Partridge, Section Chief / Liaison, Office of Diversion Control

Carisoprodol

The following information is provided so that you are aware of an important scheduling action. Please share it with your colleagues who may need to know the following information.

The final rule placing Carisoprodol into schedule IV of the Controlled Substances Act (CSA) is scheduled to publish on Monday, December 12, 2011, in the Federal Register, effective 30 days after publication or January 11, 2012. Regulatory requirements are effective on a staggered time line as outlined below. The final rule will be available for public inspection on Friday, December 9, 2011 at www.archives.gov/federal-register/public-inspection/. Upon publication the final rule will be posted on the DEA website DEAdiversion@usdoj.gov and it will also be available on www.regulations.gov.

Soma, a trade name for Carisoprodol, is a muscle relaxant prescribed to relieve pain from muscle injuries and spasms. When taken in dosages exceeding those recommended by physicians, Soma causes drowsiness, giddiness, and relaxation. Soma is metabolized into meprobamate, a Schedule IV controlled substance with a potential for abuse. Abusers typically ingest Soma orally. Many abusers take it in combination with other drugs to enhance the effects of those substances.

When the final rule is published and the effective dates have been established, the criminal sanctions and regulatory controls of Schedule IV substances under the CSA will apply to the unlawful manufacture, distribution, possession, importation, and exportation of Carisoprodol and products such as Soma as follows:

30 days after publication

- Security requirements of 21 CFR 1301.71, 1301.72(d), 1301.74, 1301.75(b) and (c), and 1301.76
- Inventory requirements of 21 CFR 1304.03, 1304.04, and 1304.11
- Record requirements of 21 CFR 1304.03, 1304.04, 1304.21, 1304.22, and 1304.23
- Prescription requirements of 21 CFR 1306.03-1306.06, 1306.21, and 1306.22-1306.27
- Import / Export requirements of 21 CFR Part 1312
- Criminal Liability

120 days after publication

- Security requirements of 21 CFR 1301.72(b) and (c), 1301.73, and 1301.77
- Labeling & Packaging requirements of 21 CFR 1302.03-1302.07. All new packaging of Carisoprodol products must be in compliance with labeling and packaging requirements. Carisoprodol products packaged before the 120 day effective date and not meeting the regulatory requirements may be distributed up until the 180 day effective date.

180 days after publication

- Labeling & Packaging requirements of 21 CFR 1302.03-1302.07. All Carisoprodol labeling and packaging requirements must be in compliance.

LICENSING UNIT

Licensing Reminders

Demetrius Daniels, Licensing Unit Manager

- **Pharmacy Technicians** that plan to convert their statuses to Student Pharmacy Technicians must meet all Student Pharmacy Technician requirements, including undergoing a new State criminal background check (CJIS) and paying the initial student fee of \$45.00. This fee payment and CJIS check is required with the first student application submission only. Students will only need to submit an application and school affidavit verifying their status as an active student each October to renew thereafter.
- **Foreign Graduate Pharmacist Candidates** are required by NABP to have graduated from a five (5) year foreign school or college of pharmacy to qualify for examination through the Foreign Pharmacy Graduate Examination Committee (FPGEC).

- **Renewal Notices** are sent to licensees and permit holders at least one month prior to the expiration of the current license or permit. However, licensees, permit holders and registrants **are responsible for maintaining their license whether or not a renewal notice is received**. Maryland State law requires you to have a current license, permit or registration to perform functions under the purview of the license, permit or registration.
- **The State of Maryland only sends licenses to the current address on file.** Permit holders, licensees and registrants are responsible for updating changes to address information so licenses, permits and registrations are sent to the correct address. The fee for **failing to maintain a current address at the Board is \$25**.
- **Regarding inquiries** – The Board has experienced an increased volume of inquiries because of its many new initiatives and programs. Please allow up to five (5) business days for Board staff to respond to your inquiries.

PUBLIC RELATIONS

Janet Y. Seeds, Public Information Officer

Continuing Education Training

The Board of Pharmacy held its annual Continuing Education (CE) Breakfast at the Maritime Institute Conference Center in Linthicum Heights, Maryland on Sunday, October 2, 2011. One hundred thirty pharmacists, pharmacy technician and students attended this event entitled, "Emergency Preparedness: The Role of the Pharmacist Before, During and After a Disaster."



Michael Souranis, RPh (pictured on the left), President of the Maryland Board of Pharmacy, greeted everyone attending and introduced Dr. Joshua M. Sharfstein, Secretary of the Maryland Department of Health and Mental Hygiene (pictured below). Dr. Sharfstein cited the importance of having pharmacists

on the 'emergency response team.' Thanking everyone in attendance, Dr. Sharfstein also recognized the enthusiasm of the participants and expressed that he was quite pleased to see so many pharmacists, pharmacy technicians and students attending at such an early hour.



Debra A. Yeskey, PharmD, Director of the Regulatory and Quality Affairs Division, Biomedical Advanced Research and



Development Authority, Office of the Assistant Secretary for Preparedness and Response, U.S. Department of Health and Human Services in Washington, DC, was the first speaker. Dr. Yeskey spoke to the attendees about the 'federal government's emergency preparedness plan and the role of the pharmacist.' Dr. Yeskey explained exactly how the federal government interacts with the state and local governments with emphasis on the 'Incident Command System.' Her presentation was quite informative and resulted in questions from the audience.



The second presenter, Michael Mannozi (pictured left), Emergency Operations Manager of the Maryland Department of Health and Mental Hygiene's Office of Preparedness and Response spoke on 'Preparing Maryland Pharmacists for Emergency Preparedness.' Mr. Mannozi's detailed presentation concen-

trated mainly on the deployment of the Strategic National Stockpile (SNS) and the role of the pharmacists at the Receiving, Staging & Storing (RSS) site.

Donald Taylor (pictured right), former Board President and Chairman of the Board's Emergency Preparedness Task Force followed Mr. Mannozi with a description of the Task Force. Mr. Taylor has devoted an enormous amount of time and energy in keeping Maryland Pharmacists involved in all aspects of 'emergency



preparedness.' Mr. Taylor's presentation focused on the pharmacy contingent of the Maryland Professional Volunteer Corps (MPVC) and how pharmacists and pharmacy technicians are now a part of the MPVC. Mr. Taylor explained, in detail, how the MPVC got started and how the list of potential disasters has grown to include: Pandemics (Influenza), Bioterrorism, Chemical Incidents, Mass Casualty, Natural Disasters, and Radiation Incidents. He explained the "Just in Time" training document, DHMH Emergency Proto-



cols, SNS & RSS, Community Emergency Response Team (CERT), and Pharmacist Liaison Roles, to mention a few.

During the program, the Board honored five pharmacists with Governor's Citations for having been continuously licensed for 60+ years. The honorees were: Walter S. Rosenberg, Harry S. Lichtman, Mary Wallace Connelly, Charles J. Kokoski and Michele Y. Splinter (Mr. Kokoski and Ms. Splinter were not available for pictures). Governor's Citations were presented by the Board President, Michael Souranis, and the Executive Director, LaVerne Naesea to those that were present and the citations were mailed to those not in attendance.

Pharmacists and pharmacy technicians in attendance at this entire event, and completing the evaluation form, earned 3 LIVE continuing education units (CEUs) that may be submitted to satisfy the LIVE CEU requirements to renew Maryland licenses and registrations. The attendees appeared to greatly enjoy this training experience and many positive comments were offered. The program concluded with a panel of experts answering questions. Closing remarks were given by LaVerne Naesea, Executive Director of the Maryland Board of Pharmacy.





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Maryland Board of Pharmacy

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ADMINISTRATION • 410-764-5929	
Patricia Gaither, Administration & Public Support Manager; Janet Seeds, Public Information Officer; Anasha Page, APS Secretary	Responds to inquiries regarding Fiscal, Budget, Procurement, Travel, Personnel and Public Information
LEGISLATION AND REGULATIONS • 410-764-4794	
Anna Jeffers, Legislation and Regulations Manager	Responds to inquiries regarding Legislation and Regulations and Pharmacy Practice Issues
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LICENSING • 410-764-4756	
Demetrius Daniels, Licensing Manager; Doris James, Licensing Specialist; Keisha Wise, Licensing Clerk; LaToya Waddell, Licensing Specialist	Responds to inquiries regarding Licensing, Permits, Registrations, Reciprocity, Certifications, Scores and Verifications
MANAGEMENT INFORMATION SERVICES • 410-764-4685	
Michelle Hsu, Database Officer	Responds to inquiries regarding Computer, Database and Website and On-line Renewals

BOARD COMMISSIONERS

President: Michael Souranis
 Secretary: Rodney Taylor
 Treasurer: Lenna Israbian-Jamgochian
 Lynette Bradley-Baker
 David Chason
 Harry Finke, Jr.
 Mitra Gavgani
 Stephanie Hammonds

Mayer Handelman
 Richard W. Matens
 Zeno St. Cyr, II
 Donald Taylor

BOARD COUNSEL

Linda Bethman, AAG
 Brett Felter, Staff Attorney

BOARD MEETINGS

Public Pharmacy Board meetings begin at 9:30 a.m. on the third Wednesday of each month and are open to the public. The Board encourages all interested parties to attend the monthly Board Meetings.

2011 PUBLIC BOARD MEETINGS DATES

Third Wednesday of each month 9:30 am – 12:30 pm	January 18, 2012 February 15, 2012	March 21, 2012
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COMMITTEE MEETING DATES

Executive Committee Meetings First Wednesday of each month	Licensing Committee Meetings Second Wednesday of each month
Disciplinary Committee Meetings First Wednesday of each month	Practice Committee Meetings Fourth Wednesday of each month
Emergency Preparedness Task Force Meetings Second Wednesday of each month	Public Relations Committee Fourth Wednesday of each month