

## RULE ANALYSIS

**Introduction:** THE AMENDMENTS ARE SUBMITTED TO THE BOARD FOR CONSIDERATION AS A PROPOSED RULE

**Short Title:** Personnel

**Rule Numbers:** §§291.32, 291.53, 291.73

**Statutory Authority:** Texas Pharmacy Act, Chapter 551-569, Occupations Code:

- (1) Section 551.002 specifies that the purpose of the Act is to protect the public through the effective control and regulation of the practice of pharmacy; and
- (2) Section 554.051 gives the Board the authority to adopt rules for the proper administration and enforcement of the Act.

**Purpose:** The amendments, if adopted, clarify that pharmacists may not serve as the pharmacist-in-charge of other pharmacies if the pharmacist is required to be a full time pharmacist; eliminate references to sterile compounding; add transferring or receiving a prescription to the list of pharmacist duties; and correct grammar.

1 TITLE 22 EXAMINING BOARDS  
2 PART 15 TEXAS STATE BOARD OF PHARMACY  
3 CHAPTER 291 PHARMACIES  
4 SUBCHAPTER B COMMUNITY PHARMACY (CLASS A)

5  
6 **§291.32 Personnel**

7  
8 (a) Pharmacist-in-charge.

9  
10 (1) General.

11  
12 (A) Each Class A pharmacy shall have one pharmacist-in-charge who is employed on a full-  
13 time basis, who may be the pharmacist-in-charge for only one such pharmacy; provided,  
14 however, such pharmacist-in-charge may be the pharmacist-in-charge of:

15  
16 (i) more than one Class A pharmacy, if the additional Class A pharmacies are not open to  
17 provide pharmacy services simultaneously; or

18  
19 (ii) during an emergency, up to two Class A pharmacies open simultaneously if the  
20 pharmacist-in-charge works at least 10 hours per week in each pharmacy for no more than a  
21 period of 30 consecutive days.

22  
23 (B) The pharmacist-in-charge shall comply with the provisions of §291.17 of this title (relating  
24 to Inventory Requirements).

25  
26 **(C) The pharmacist-in-charge of a Class A pharmacy may not serve as the pharmacist-**  
27 **in-charge of a Class B pharmacy or a Class C pharmacy with 101 beds or more.**

28  
29 (2) Responsibilities. The pharmacist-in-charge shall have responsibility for the practice of  
30 pharmacy at the pharmacy for which he or she is the pharmacist-in-charge. The pharmacist-in-  
31 charge may advise the owner on administrative or operational concerns. The pharmacist-in-  
32 charge shall have responsibility for, at a minimum, the following:

33  
34 (A) educating and training of pharmacy technicians and pharmacy technician trainees;

35  
36 (B) supervising a system to assure appropriate procurement of prescription drugs and  
37 devices and other products dispensed from the Class A pharmacy;

38  
39 (C) disposing of and distributing drugs from the Class A pharmacy;

40  
41 (D) storing all materials, including drugs, chemicals, and biologicals;

42  
43 (E) maintaining records of all transactions of the Class A pharmacy necessary to maintain  
44 accurate control over and accountability for all pharmaceutical materials required by applicable  
45 state and federal laws and sections;

46  
47 (F) supervising a system to assure maintenance of effective controls against the theft or  
48 diversion of prescription drugs, and records for such drugs;

50 (G) adhering to policies and procedures regarding the maintenance of records in a data  
51 processing system such that the data processing system is in compliance with Class A  
52 (community) pharmacy requirements;

53  
54 (H) legally operating the pharmacy, including meeting all inspection and other requirements of  
55 all state and federal laws or sections governing the practice of pharmacy; and

56  
57 (I) if the pharmacy uses an automated pharmacy dispensing system, shall be responsible for  
58 the following:

59  
60 (i) consulting with the owner concerning and adherence to the policies and procedures for  
61 system operation, safety, security, accuracy and access, patient confidentiality, prevention of  
62 unauthorized access, and malfunction;

63  
64 (ii) inspecting medications in the automated pharmacy dispensing system, at least monthly,  
65 for expiration date, misbranding, physical integrity, security, and accountability;

66  
67 (iii) assigning, discontinuing, or changing personnel access to the automated pharmacy  
68 dispensing system;

69  
70 (iv) ensuring that pharmacy technicians, pharmacy technician trainees, and licensed  
71 healthcare professionals performing any services in connection with an automated pharmacy  
72 dispensing system have been properly trained on the use of the system and can demonstrate  
73 comprehensive knowledge of the written policies and procedures for operation of the system;  
74 and

75  
76 (v) ensuring that the automated pharmacy dispensing system is stocked accurately and an  
77 accountability record is maintained in accordance with the written policies and procedures of  
78 operation.

79  
80 (b) Owner. The owner of a Class A pharmacy shall have responsibility for all administrative and  
81 operational functions of the pharmacy. The pharmacist-in-charge may advise the owner on  
82 administrative and operational concerns. The owner shall have responsibility for, at a minimum,  
83 the following, and if the owner is not a Texas licensed pharmacist, the owner shall consult with  
84 the pharmacist-in-charge or another Texas licensed pharmacist:

85  
86 (1) **establishing** ~~establishment of~~ policies for procurement of prescription drugs and devices  
87 and other products dispensed from the Class A pharmacy;

88  
89 (2) **establishing** ~~establishment of~~ policies and procedures for the security of the prescription  
90 department including the maintenance of effective controls against the theft or diversion of  
91 prescription drugs;

92  
93 (3) if the pharmacy uses an automated pharmacy dispensing system, reviewing and approving  
94 all policies and procedures for system operation, safety, security, accuracy and access, patient  
95 confidentiality, prevention of unauthorized access, and malfunction;

96  
97 (4) providing the pharmacy with the necessary equipment and resources commensurate with  
98 its level and type of practice; and

100 (5) **establishing** ~~establishment of~~ policies and procedures regarding maintenance, storage,  
101 and retrieval of records in a data processing system such that the system is in compliance with  
102 state and federal requirements.

103

104 (c) Pharmacists.

105

106 (1) General.

107

108 (A) The pharmacist-in-charge shall be assisted by sufficient number of additional licensed  
109 pharmacists as may be required to operate the Class A pharmacy competently, safely, and  
110 adequately to meet the needs of the patients of the pharmacy.

111

112 (B) All pharmacists shall assist the pharmacist-in-charge in meeting his or her responsibilities  
113 in ordering, dispensing, and accounting for prescription drugs.

114

115 (C) Pharmacists are solely responsible for the direct supervision of pharmacy technicians and  
116 pharmacy technician trainees and for designating and delegating duties, other than those listed  
117 in paragraph (2) of this subsection, to pharmacy technicians and pharmacy technician trainees.  
118 Each pharmacist shall be responsible for any delegated act performed by pharmacy technicians  
119 and pharmacy technician trainees under his or her supervision.

120

121 (D) Pharmacists shall directly supervise pharmacy technicians and pharmacy technician  
122 trainees who are entering prescription data into the pharmacy's data processing system by one  
123 of the following methods.

124

125 (i) Physically present supervision. A pharmacist shall be physically present to directly  
126 supervise a pharmacy technician or pharmacy technician trainee who is entering prescription  
127 data into the data processing system. Each prescription entered into the data processing  
128 system shall be verified at the time of data entry. If the pharmacist is not physically present due  
129 to a temporary absence as specified in §291.33(b)(3) of this title (relating to Operational  
130 Standards), on return the pharmacist must:

131

132 (I) conduct a drug regimen review for the prescriptions data entered during this time period  
133 as specified in §291.33(c)(2) of this title; and

134

135 (II) verify that prescription data entered during this time period was entered accurately.

136

137 (ii) Electronic supervision. A pharmacist may electronically supervise a pharmacy technician  
138 or pharmacy technician trainee who is entering prescription data into the data processing  
139 system provided the pharmacist:

140

141 (I) is on-site, in the pharmacy where the technician/trainee is located;

142

143 (II) has immediate access to any original document containing prescription information or  
144 other information related to the dispensing of the prescription. Such access may be through  
145 imaging technology provided the pharmacist has the ability to review the original, hardcopy  
146 documents if needed for clarification; and

147

148 (III) verifies the accuracy of the data entered information prior to the release of the  
149 information to the system for storage and/or generation of the prescription label.

150

151 (iii) Electronic verification of data entry by pharmacy technicians or pharmacy technician  
152 trainees. A pharmacist may electronically verify the data entry of prescription information into a  
153 data processing system provided:

154  
155 (I) a pharmacist is on-site in the pharmacy where the pharmacy technicians/trainees are  
156 located;

157  
158 (II) the pharmacist electronically conducting the verification is either a:

159  
160 (-a-) Texas licensed pharmacist; or

161  
162 (-b-) pharmacist employed by a Class E pharmacy that:

163  
164 (-1-) has the same owner as the Class A pharmacy where the pharmacy  
165 technicians/trainees are located; or

166  
167 (-2-) has entered into a written contract or agreement with the Class A pharmacy, which  
168 outlines the services to be provided and the responsibilities and accountabilities of each  
169 pharmacy in compliance with federal and state laws and regulations;

170  
171 (III) the pharmacy establishes controls to protect the privacy and security of confidential  
172 records; and

173  
174 (IV) the pharmacy keeps permanent records of prescriptions electronically verified for a  
175 period of two years.

176  
177 (E) All pharmacists, while on duty, shall be responsible for the legal operation of the  
178 pharmacy and for complying with all state and federal laws or rules governing the practice of  
179 pharmacy.

180  
181 (F) A dispensing pharmacist shall be responsible for and ensure that the drug is dispensed  
182 and delivered safely, and accurately as prescribed, unless the pharmacy's data processing  
183 system can record the identity of each pharmacist involved in a specific portion of the  
184 dispensing processing. If the system can track the identity of each pharmacist involved in the  
185 dispensing process, each pharmacist involved in the dispensing process shall be responsible for  
186 and ensure that the portion of the process the pharmacist is performing results in the safe and  
187 accurate dispensing and delivery of the drug as prescribed. The dispensing process shall  
188 include, but not be limited to, drug regimen review and verification of accurate prescription data  
189 entry, including data entry of prescriptions placed on hold, packaging, preparation,  
190 compounding, transferring, [and] labeling, and performance of the final check of the dispensed  
191 prescription. An intern has the same responsibilities described in this subparagraph as a  
192 pharmacist but must perform his or her duties under the supervision of a pharmacist.

193  
194 (2) Duties. Duties which may only be performed by a pharmacist are as follows:

195  
196 (A) receiving oral prescription drug orders and reducing these orders to writing, either  
197 manually or electronically;

198  
199 (B) interpreting prescription drug orders;

200  
201 (C) selecting drug products;

- 202  
203 (D) performing the final check of the dispensed prescription before delivery to the patient to  
204 ensure that the prescription has been dispensed accurately as prescribed;  
205  
206 (E) communicating to the patient or patient's agent information about the prescription drug or  
207 device which in the exercise of the pharmacist's professional judgment, the pharmacist deems  
208 significant, as specified in §291.33(c) of this title;  
209  
210 (F) communicating to the patient or the patient's agent on his or her request information  
211 concerning any prescription drugs dispensed to the patient by the pharmacy;  
212  
213 (G) assuring that a reasonable effort is made to obtain, record, and maintain patient  
214 medication records;  
215  
216 (H) interpreting patient medication records and performing drug regimen reviews;  
217  
218 (I) performing a specific act of drug therapy management for a patient delegated to a  
219 pharmacist by a written protocol from a physician licensed in this state in compliance with the  
220 Medical Practice Act; [~~and~~]  
221  
222 (J) verifying that controlled substances listed on invoices are received by clearly recording  
223 his/her initials and date of receipt of the controlled substances; and  
224  
225 (K) transferring or receiving a transfer of original prescription information on behalf of  
226 a patient.  
227  
228 (d) – (e) (No change.)

1 **TITLE 22 EXAMINING BOARDS**  
2 **PART 15 TEXAS STATE BOARD OF PHARMACY**  
3 **CHAPTER 291 PHARMACIES**  
4 **SUBCHAPTER C NUCLEAR PHARMACY (CLASS B)**

5  
6 **§291.53 Personnel**  
7

8  
9 (a) Pharmacists-in-Charge.

10  
11 (1) General.

12  
13 (A) Every nuclear pharmacy shall have an authorized nuclear pharmacist designated on the  
14 nuclear pharmacy license as the pharmacist-in-charge who shall be responsible for a nuclear  
15 pharmacy's compliance with laws and regulations, both state and federal, pertaining to the  
16 practice of nuclear pharmacy.

17  
18 (B) The nuclear pharmacy pharmacist-in-charge shall see that directives from the board are  
19 communicated to the owner(s), management, other pharmacists, and interns of the nuclear  
20 pharmacy.

21  
22 (C) Each Class B pharmacy shall have one pharmacist-in-charge who is employed on a full-  
23 time basis, who may be the pharmacist-in-charge for only one such pharmacy; provided,  
24 however, such pharmacist-in-charge may be the pharmacist-in-charge of:

25  
26 (i) more than one Class B pharmacy, if the additional Class B pharmacies are not open to  
27 provide pharmacy services simultaneously; or

28  
29 (ii) during an emergency, up to two Class B pharmacies open simultaneously if the  
30 pharmacist-in-charge works at least 10 hours per week in each pharmacy for no more than a  
31 period of 30 consecutive days.

32  
33 **(D) The pharmacist-in-charge of a Class B pharmacy may not serve as the pharmacist-**  
34 **in-charge of a Class A pharmacy or a Class C pharmacy with 101 beds or more.**

35  
36 (2) Responsibilities. The pharmacist-in-charge shall have the responsibility for, at a minimum,  
37 the following:

38  
39 (A) ensuring that radiopharmaceuticals are dispensed and delivered safely and accurately as  
40 prescribed;

41  
42 (B) developing a system to assure that all pharmacy personnel responsible for compounding  
43 and/or supervising the compounding of radiopharmaceuticals within the pharmacy receive  
44 appropriate education and training and competency evaluation;

45  
46 (C) determining that all pharmacists involved in compounding sterile radiopharmaceuticals  
47 obtain continuing education appropriate for the type of compounding done by the pharmacist;

48  
49 (D) supervising a system to assure appropriate procurement of drugs and devices and  
50 storage of all pharmaceutical materials including radiopharmaceuticals, components used in the  
51 compounding of radiopharmaceuticals, and drug delivery devices;

- 52  
53 (E) assuring that the equipment used in compounding is properly maintained;  
54  
55 (F) developing a system for the disposal and distribution of drugs from the Class B pharmacy;  
56  
57 (G) developing a system for bulk compounding or batch preparation of radiopharmaceuticals;  
58  
59 (H) developing a system for the compounding, sterility assurance, and quality control of  
60 sterile radiopharmaceuticals;  
61  
62 (I) maintaining records of all transactions of the Class B pharmacy necessary to maintain  
63 accurate control over and accountability for all pharmaceutical materials including  
64 radiopharmaceuticals, required by applicable state and federal laws and rules;  
65  
66 (J) developing a system to assure the maintenance of effective controls against the theft or  
67 diversion of prescription drugs, and records for such drugs;  
68  
69 (K) assuring that the pharmacy has a system to dispose of radioactive and cytotoxic waste in  
70 a manner so as not to endanger the public health; and  
71  
72 (L) legally operating the pharmacy, including meeting all inspection and other requirements of  
73 all state and federal laws or rules governing the practice of pharmacy.  
74  
75 (b) – (e) (No change.)

1 **TITLE 22 EXAMINING BOARDS**  
2 **PART 15 TEXAS STATE BOARD OF PHARMACY**  
3 **CHAPTER 291 PHARMACIES**  
4 **SUBCHAPTER D INSTITUTIONAL PHARMACY (CLASS C)**

5  
6 **§291.73 Personnel**  
7

8 (a) Requirements for pharmacist services.  
9

10 (1) A Class C pharmacy in a facility with 101 beds or more shall be under the continuous on-  
11 site supervision of a pharmacist during the time it is open for pharmacy services; provided,  
12 however, that pharmacy technicians and pharmacy technician trainees may distribute  
13 prepackaged and prelabeled drugs from a drug storage area of the facility e.g., a surgery suite,  
14 in the absence of physical supervision of a pharmacist, under the following conditions:  
15

16 (A) the distribution is under the control of a pharmacist; and  
17

18 (B) a pharmacist is on duty in the facility.  
19

20 (2) A Class C pharmacy in a facility with 100 beds or less shall have the services of a  
21 pharmacist at least on a part-time or consulting basis according to the needs of the facility  
22 except that a pharmacist shall be on-site at least once every seven days.  
23

24 (3) A pharmacist shall be accessible at all times to respond to other health professional's  
25 questions and needs. Such access may be through a telephone which is answered 24 hours a  
26 day, e.g., answering or paging service, a list of phone numbers where the pharmacist may be  
27 reached, or any other system which accomplishes this purpose.  
28

29 (b) Pharmacist-in-charge.  
30

31 (1) General.  
32

33 (A) Each institutional pharmacy in a facility with 101 beds or more shall have one full-time  
34 pharmacist-in-charge, who may be pharmacist-in-charge for only one such pharmacy except as  
35 specified in subparagraph (C) of this paragraph.  
36

37 (B) Each institutional pharmacy in a facility with 100 beds or less shall have one pharmacist-  
38 in-charge who is employed or under contract, at least on a consulting or part-time basis, but  
39 may be employed on a full-time basis, if desired, and who may be pharmacist-in-charge for no  
40 more than three facilities or 150 beds.  
41

42 (C) A pharmacist-in-charge may be in charge of one facility with 101 beds or more and one  
43 facility with 100 beds or less, including a rural hospital, provided the total number of beds does  
44 not exceed 150 beds.  
45

46 (D) The pharmacist-in-charge shall be assisted by additional pharmacists, pharmacy  
47 technicians and pharmacy technician trainees commensurate with the scope of services  
48 provided.  
49

50 (E) If the pharmacist-in-charge is employed on a part-time or consulting basis, a written  
51 agreement shall exist between the facility and the pharmacist, and a copy of the written  
52 agreement shall be made available to the board upon request.

53  
54 **(F) The pharmacist-in-charge of a Class C pharmacy with 101 beds or more, may not**  
55 **serve as the pharmacist-in-charge of a Class A pharmacy or a Class B pharmacy.**  
56

57 (2) Responsibilities. The pharmacist-in-charge shall have the responsibility for, at a minimum,  
58 the following:

59  
60 (A) providing the appropriate level of pharmaceutical care services to patients of the facility;

61  
62 (B) ensuring that drugs and/or devices are prepared for distribution safely, and accurately as  
63 prescribed;

64  
65 (C) supervising a system to assure maintenance of effective controls against the theft or  
66 diversion of prescription drugs, and records for such drugs;

67  
68 (D) providing written guidelines and approval of the procedure to assure that all  
69 pharmaceutical requirements are met when any part of preparing, sterilizing, and labeling of  
70 sterile preparations is not performed under direct pharmacy supervision;

71  
72 (E) participating in the development of a formulary for the facility, subject to approval of the  
73 appropriate committee of the facility;

74  
75 (F) developing a system to assure that drugs to be administered to patients are distributed  
76 pursuant to an original or direct copy of the practitioner's medication order;

77  
78 (G) developing a system for the filling and labeling of all containers from which drugs are to  
79 be distributed or dispensed;

80  
81 (H) assuring that the pharmacy maintains and makes available a sufficient inventory of  
82 antidotes and other emergency drugs as well as current antidote information, telephone  
83 numbers of regional poison control center and other emergency assistance organizations, and  
84 such other materials and information as may be deemed necessary by the appropriate  
85 committee of the facility;

86  
87 (I) maintaining records of all transactions of the institutional pharmacy as may be required by  
88 applicable law, state and federal, and as may be necessary to maintain accurate control over  
89 and accountability for all pharmaceutical materials including pharmaceuticals, components used  
90 in the compounding of preparations, and participate in policy decisions regarding prescription  
91 drug delivery devices;

92  
93 (J) participating in those aspects of the facility's patient care evaluation program which relate  
94 to pharmaceutical utilization and effectiveness;

95  
96 (K) participating in teaching and/or research programs in the facility;

97  
98 (L) implementing the policies and decisions of the appropriate committee(s) relating to  
99 pharmaceutical services of the facility;

100

101 (M) providing effective and efficient messenger or delivery service to connect the institutional  
102 pharmacy with appropriate areas of the facility on a regular basis throughout the normal  
103 workday of the facility;

104

105 (N) developing a system for the labeling, storage, and distribution of investigational new  
106 drugs, including access to related drug information for healthcare personnel in the pharmacy  
107 and nursing station where such drugs are being administered, concerning the dosage form,  
108 route of administration, strength, actions, uses, side effects, adverse effects, interactions and  
109 symptoms of toxicity of investigational new drugs;

110

111 (O) assuring that records in a data processing system are maintained such that the data  
112 processing system is in compliance with Class C (Institutional) pharmacy requirements;

113

114 (P) assuring that a reasonable effort is made to obtain, record, and maintain patient  
115 medication records;

116

117 (Q) assuring the legal operation of the pharmacy, including meeting all inspection and other  
118 requirements of all state and federal laws or rules governing the practice of pharmacy; and

119

120 (R) if the pharmacy uses an automated medication supply system, shall be responsible for  
121 the following:

122

123 (i) reviewing and approving all policies and procedures for system operation, safety,  
124 security, accuracy and access, patient confidentiality, prevention of unauthorized access, and  
125 malfunction;

126

127 (ii) inspecting medications in the automated medication supply system, at least monthly, for  
128 expiration date, misbranding, physical integrity, security, and accountability; except that  
129 inspection of medications in the automated medication supply system may be performed  
130 quarterly if:

131

132 (I) the facility uses automated medication supply systems that monitors expiration dates of  
133 prescription drugs; and

134

135 (II) security of the system is checked at regularly defined intervals (e.g., daily or weekly);

136

137 (iii) assigning, discontinuing, or changing personnel access to the automated medication  
138 supply system;

139

140 (iv) ensuring that pharmacy technicians, pharmacy technician trainees, and licensed  
141 healthcare professionals performing any services in connection with an automated medication  
142 supply system have been properly trained on the use of the system and can demonstrate  
143 comprehensive knowledge of the written policies and procedures for operation of the system;  
144 and

145

146 (v) ensuring that the automated medication supply system is stocked accurately and an  
147 accountability record is maintained in accordance with the written policies and procedures of  
148 operation.

149

150 (c) (No change.)

151

152 (d) Pharmacists.

153

154 (1) – (2) (No change.)

155

156 (3) Special requirements for compounding.

157

158 ~~[(A) Non-Sterile Preparations.]~~ All pharmacists engaged in compounding non-sterile  
159 preparations shall meet the training requirements specified in §291.131 of this title (relating to  
160 Pharmacies Compounding Non-sterile Preparations).

161

162 ~~[(B) Sterile Preparations. All pharmacists engaged in compounding sterile preparations shall  
163 meet the training requirements specified in §291.133 of this title (relating to Pharmacies  
164 Compounding Sterile Preparations).]~~

165

166 (e) Pharmacy technicians and pharmacy technician trainees.

167

168 (1) General.

169

170 (A) All pharmacy technicians and pharmacy technician trainees shall meet the training  
171 requirements specified in §297.6 of this title (relating to Pharmacy Technician and Pharmacy  
172 Technician Trainee Training).

173

174 (B) A pharmacy technician performing the duties specified in paragraph (2)(C) of this  
175 subsection shall complete training regarding:

176

177 (i) procedures for one pharmacy technician to verify the accuracy of actions performed by  
178 another pharmacy technician including required documentation; and

179

180 (ii) the duties that may be performed by one pharmacy technician and checked by another  
181 pharmacy technician.

182

183 (C) In addition to the training requirements specified in subparagraph (A) of this paragraph,  
184 pharmacy technicians working in a rural hospital and performing the duties specified in  
185 paragraph (2)(D)(ii) of this subsection shall complete the following. Training on the:

186

187 (i) procedures for verification of the accuracy of actions performed by pharmacy technicians  
188 including required documentation;

189

190 (ii) duties which may and may not be performed by pharmacy technicians in the absence of  
191 a pharmacist; and

192

193 (iii) the pharmacy technician's role in preventing dispensing and distribution errors.

194

195 (2) Duties. Duties may include, but need not be limited to, the following functions under the  
196 supervision of and responsible to a pharmacist:

197

198 (A) Facilities with 101 beds or more. The following functions must be performed under the  
199 physically present supervision of a pharmacist:

200

201 (i) pre-packing and labeling unit and multiple dose packages, provided a pharmacist  
202 supervises and conducts a final check and affixes his or her name, initials or electronic  
203 signature to the appropriate quality control records prior to distribution;

204

205 (iii) bulk compounding or batch preparation provided a pharmacist supervises and conducts  
206 in-process and final checks and affixes his or her name, initials, or electronic signature to the  
207 appropriate quality control records prior to distribution;

208

209 (iv) distributing routine orders for stock supplies to patient care areas;

210

211 (v) entering medication order and drug distribution information into a data processing  
212 system, provided judgmental decisions are not required and a pharmacist checks the accuracy  
213 of the information entered into the system prior to releasing the order;

214

215 (vi) loading unlabeled drugs into an automated compounding or counting device provided a  
216 pharmacist supervises, verifies that the system was properly loaded prior to use, and affixes his  
217 or her name, initials or electronic signature to the appropriate quality control records;

218

219 (vii) accessing automated medication supply systems after proper training on the use of the  
220 automated medication supply system and demonstration of comprehensive knowledge of the  
221 written policies and procedures for its operation; **and**

222

223 (viii) compounding non-sterile preparations pursuant to medication orders provided the  
224 pharmacy technicians or pharmacy technician trainees have completed the training specified in  
225 §291.131 of this title. ~~and~~

226

227 ~~—(ix) compounding sterile preparations pursuant to medication orders provided the pharmacy  
228 technicians or pharmacy technician trainees:~~

229

230 ~~—(I) have completed the training specified in §291.133 of this title; and~~

231

232 ~~—(II) are supervised by a pharmacist who has completed the training specified in §291.133  
233 of this title, and who conducts in-process and final checks, and affixes his or her name, initials,  
234 or electronic signature to the label or if batch prepared, to the appropriate quality control  
235 records. (The name, initials, or electronic signature are not required on the label if it is  
236 maintained in a permanent record of the pharmacy.)]~~

237

238 (B) – (D) (No change.)

239

240 (3) Procedures.

241

242 (A) Pharmacy technicians and pharmacy technician trainees shall handle medication orders  
243 in accordance with standard, written procedures and guidelines.

244

245 (B) Pharmacy technicians and pharmacy technician trainees shall handle prescription drug  
246 orders in the same manner as those working in a Class A pharmacy.

247

248 (f) Owner. The owner of a Class C pharmacy shall have responsibility for all administrative and  
249 operational functions of the pharmacy. The pharmacist-in-charge may advise the owner on  
250 administrative and operational concerns. The owner shall have responsibility for, at a minimum,

251 the following, and if the owner is not a Texas licensed pharmacist, the owner shall consult with  
252 the pharmacist-in-charge or another Texas licensed pharmacist:

253

254 (1) **establishing** [establishment of] policies for procurement of prescription drugs and devices  
255 and other products dispensed from the Class C pharmacy;

256

257 (2) **establishing and maintaining** [establishment and maintenance of] effective controls  
258 against the theft or diversion of prescription drugs;

259

260 (3) if the pharmacy uses an automated pharmacy dispensing system, reviewing and approving  
261 all policies and procedures for system operation, safety, security, accuracy and access, patient  
262 confidentiality, prevention of unauthorized access, and malfunction;

263

264 (4) providing the pharmacy with the necessary equipment and resources commensurate with  
265 its level and type of practice; and

266

267 (5) **establishing** [establishment of] policies and procedures regarding maintenance, storage,  
268 and retrieval of records in a data processing system such that the system is in compliance with  
269 state and federal requirements.

270

271 (g) Identification of pharmacy personnel. All pharmacy personnel shall be identified as follows.

272

273 (1) Pharmacy technicians. All pharmacy technicians shall wear an identification tag or badge  
274 that bears the person's name and identifies him or her as a pharmacy technician[, or a certified  
275 pharmacy technician, if the technician maintains current certification with the Pharmacy  
276 Technician Certification Board or any other entity providing an examination approved by the  
277 board].

278

279 (2) – (4) (No change.)