# TEXAS STATE BOARD OF PHARMACY

**Pharmacist in Charge Attestation:**

**I hereby attest the following statements are true and accurate (initial each statement below):**

BK — I am the Pharmacist-in-Charge (PIC) of *VIALSRX*, pharmacy license number *35264*, and I ☑ was/ ☐ was not present during a Compliance Inspection conducted by a Texas State Board of Pharmacy Compliance Officer/Inspector on *03/18/2026*.

BK — I received and reviewed the Notice of Inspection, Inspection Report, and Warning Notice (if applicable) issued by the Compliance Officer/Inspector.

BK — I reviewed the document titled Texas State Board of Pharmacy "Red Flags" Checklist for Pharmacies YOU MIGHT BE A PILL MILL IF.

NA — If applicable, the Warning Notice issued contains *0* deficiencies which may require corrections to resolve. I affirm that each of the deficiencies will be corrected by the date noted on the Warning Notice.

BK — I was present and completed this Attestation during the Compliance Inspection.

If not completed during the Compliance Inspection, please email this completed form to the TSBP Compliance Inspector for your area or to inspections@pharmacy.texas.gov within 7 days of the date of the inspection.

**Signed:** **Date:** *03/18/2026*

**Printed Name:** *KEMAH, BALLAH* **License No.(if applicable):** *64332*

**Texas State Board of Pharmacy**
**"Red Flags" Checklist for Pharmacies**
**YOU MIGHT BE A PILL MILL IF...**

*Check all that apply:*

| | |
|---|---|
| | (1) Your pharmacy fills a discernable pattern of prescriptions for prescribers who write essentially the same prescriptions for numerous persons, indicating a lack of individual drug therapy |
| | (2) Your pharmacy operates with limited hours of operation or closes after a certain threshold of controlled substance prescriptions are dispensed, and has overall low prescription dispensing volume. |
| | (3) Prescriptions presented to the pharmacy are for controlled substances with popularity as street drugs, such as opiates, benzodiazepines, muscle relaxants, psychostimulants, and/or cough syrups, or any combination of these drugs. |
| | (4) The prescriptions for controlled substances contain nonspecific or no diagnoses. |
| | (5) The prescriptions are commonly for the highest strength of the drug and/or for large quantities. |
| | (6) Dangerous drugs or OTC products (such as multi-vitamins or laxatives) are added to the controlled substance prescriptions, maintaining relatively consistent 1:1 ratio of controlled substances to dangerous drugs and/or OTC products dispensed as prescriptions. |
| | (7) Prescriptions are authorized by the same prescriber with what appears to be different handwriting on the hardcopy prescription drug order forms. |
| | (8) Upon contact with the prescriber's office, you are unable to engage in comprehensive discussion with the actual prescriber, or he/she is unconcerned about your apprehensions regarding his/her prescribing practices or unwilling to provide additional information, such as treatment goals and/or prognosis with prescribed drug therapy. |
| | (9) You rely solely on the prescriber's representation, or on the representation of the individual answering the phone at the number on the prescription, that prescriptions are legitimate. |
| | (10) The prescriber's clinic is not registered as a pain management clinic by the Texas Medical Board, despite routinely receiving prescriptions from the prescriber foropiates, benzodiazepines, and/or muscle relaxants. |
| | (11) Drugs prescribed are inconsistent with the prescriber's area of practice. |
| | (12) The prescriber of the drugs is located a significant distance from your pharmacy. |
| | (13) The prescriber has been subject to disciplinary action by the licensing board, had his/her DEA registration removed, or been subject to criminal action. |
| | (14) The Texas PMP system indicates that persons are obtaining prescriptions for the same drugs from multiple prescribers or that persons are filling prescriptions for the same drugs at multiple pharmacies. |
| | (15) The person's address is a significant distance from your pharmacy and/or from the prescriber's office. |
| | (16) Multiple persons with the same address present prescriptions from the same prescriber. |
| | (17) Persons pay with cash or credit card more often than through insurance. |
| | (18) Persons presenting controlled substance prescriptions are doing so in such a manner that varies from seeking routine pharmacy services (e.g., willing to wait in long lines to receive drugs, persons arrive in the same vehicle with prescriptions from same prescriber, one person presents to pick up prescriptions for multiple others, persons refer to drugs by "street names" and/or comment on drug's color, persons seek early refills, persons travel from outside reasonable trade area of pharmacy). |
| | (19) Your pharmacy charges and persons are willing to pay more for controlled substances than they would at nearby pharmacies. |
| | (20) Your pharmacy routinely orders controlled substances from more than one drug supplier, or your pharmacy has been discontinued by a drug supplier related to controlled substance orders. |
| | (21) Sporadic and non-consistent dispensing volume (including zero dispensing) varies from day to day and week to week, and your pharmacy does not maintain operational hours each week on Monday through Friday. |
| | (22) Your pharmacy employs or contracts security personnel during operational hours to prevent problems. |
| | (23) Your pharmacy has been previously warned or disciplined by the Texas State Board of Pharmacy for inappropriate dispensing of controlled substances (i.e., corresponding responsibility). |

If you checked any of the above items, you should review the laws and rules regarding corresponding responsibility and non-therapeutic dispensing, especially Board rule §291.29, in the law book or on our website: www.pharmacy.texas.gov (click on Texas Pharmacy Rules and Laws). Additional educational material is available at: http://www.pharmacy.texas.gov/Nontherapeutic.asp. Failure of pharmacies and pharmacists to detect patterns of inappropriate dispensing of prescription drugs is unprofessional practice and constitutes grounds for disciplinary action.

Texas State Board of Pharmacy
1801 Congress Avenue, Suite 13.100
Austin, TX 78701
512-305-8000

# Notice of Inspection

## Facility Information

**Name**: *VIALSRX*

**License Number**: *35264*

**Address**: *6220 WESTPARK DR STE 111, HOUSTON, TX 77057*

**Phone**: *(713) 497-5510*

**Email**:

**Class of License**: *AS*

**License Expiration**: *02/29/2028*

**DEA #**: *FV3870018*

**DEA Expiration**: *05/31/2027*

## Inspection Information

**Type**: *Compliance*

**Purpose**: *Other*

**Purpose Other**: *CHANGE OF LOCATION A-S*

**Date**: *03/18/2026*

**Arrival Time**: *9:45 AM*

## Acknowledgment

**This is to acknowledge that Texas State Board of Pharmacy Agent has presented official credentials and this Notice of Inspection citing Sections 554.001, 556.001, 556.051-556.054, and 556.101 of the Texas Pharmacy Act which authorizes an inspection of the above described facility. By my signature, I hereby acknowledge receipt of this Notice of Inspection and certify that:**

1. **I have read the Notice of Inspection and understand its contents and purpose;**
2. **I have the authority to act in this matter and have signed this Notice of Inspection pursuant to my authority;**
3. **I have had the purpose of the entry into the above-described facility by the Boards agent stated to me; and**
4. **I have consented to an inspection of the above-described facility voluntarily and without any manner of threats.**

*KEMAH, BALLAH PIC 64332*

## Witness

*LARRY EATOUGH*

Texas State Board of Pharmacy
1801 Congress Avenue, Suite 13.100
Austin, TX 78701
512-305-8000

# Inspection Report

## Facility Information

**Name**: *VIALSRX*

**License Number**: *35264*

**Class of License**: *AS*

## Inspection Information

**Type**: *Compliance*

**Purpose**: *Other*

**Purpose Other**: *CHANGE OF LOCATION A-S*

**Date**: *03/18/2026*

**Arrival Time**: *9:45 AM*

**Departure Time**: *12:15 PM*

**Action Taken**: *Other*

**Action Other**: *CHANGE OF LOCATION A-S*

**General Comments**:
*NEW NAME: BELIEVE RX*
*NEW ADDRESS: 16402 FM 2920 BUILDING E TOMBALL, TX 77377*
*Pharmacy will be compounding nonsterile to sterile preparations.*
*Pharmacy has current DEA registration but does order, stock, or fill controlled substances.*

## Inspection Checklist

| | |
|---|---|
| **1. The prescription department has adequate space for the size and scope of the pharmaceutical services provided by the pharmacy.** | *Yes* |
| **2. Fixtures (i.e. shelving, countertops, etc.) for the storage of drugs, equipment, and supplies necessary to operate a pharmacy are installed.** | *Yes* |
| **3. Electrical supply exists.** | *Yes* |
| **4. A sink with hot and cold running water available exclusive of the restroom facilities.** | *Yes* |
| **5. Pharmacy arranged in an orderly fashion and kept clean.** | *Yes* |
| **6. The prescription department is complete and contains the following required equipment and supplies including, but not limited to:** | *Yes* |
| **6a. data processing system including a printer or comparable equipment;** | *Yes* |

**Comment**

*Best Rx.*

| | |
|---|---|
| **6b. refrigerator to be maintained within a range compatible with the proper storage of drugs requiring refrigeration;** | *Yes* |
| **6c. adequate supply of child-resistant, light-resistant, tight, and, if applicable, glass containers;** | *Yes* |

| | |
|---|---|
| **6d. adequate supply of prescription labels with name, address, and telephone number of the pharmacy;** | *Yes* |
| **6e. appropriate equipment necessary for the proper preparation of prescription drug orders;** | *Yes* |
| **6f. metric-apothecary weight and measure conversion charts;** | *Yes* |
| **6g. if the pharmacy serves the public, the word "pharmacy" or similar word or symbol, as determined by the board, is displayed in a prominent place on the front of the pharmacy.** | *Not Applicable* |

**Comment**

*Closed door pharmacy.*

| | |
|---|---|
| **7. A reference library is on site and current:** | *Yes* |
| **7a. Texas Pharmacy Laws and Regulations (publication year: _____)** | *Yes* |

**Publication Year**
: *Online*

| | |
|---|---|
| **7b. Drug Interactions Reference (publication year: _____)** | *Yes* |

**Publication Year**
: *Online*

| | |
|---|---|
| **7c. General Information Reference (publication year: _____)** | *Yes* |

**Publication Year**
: *Online*

| | |
|---|---|
| **7d. Chapter 795 of the USP/NF concerning Pharmacy Compounding Non-Sterile Preparations (if the pharmacy is compounding non-sterile preparations)** | *Not Applicable* |
| **7e. General reference text on veterinary drugs (if the pharmacy dispenses veterinary prescriptions)** | *Not Applicable* |
| **7f. Basic Antidote Information and telephone number of the nearest Regional Poison Control Center.** | *Yes* |
| **8.If the pharmacy is compounding sterile preparations, the following references are also required:** | *Yes* |
| **8a. United States Pharmacopeia/National Formulary or USP Pharmacist's Pharmacopeia containing USP Chapter 797, Pharmaceutical Compounding Sterile Preparations** | *Yes* |
| **8b. Chapter 71 of the USP/NF concerning Sterility Tests** | *Yes* |
| **8c. Chapter 85 of the USP/NF concerning Bacterial Endotoxins Test** | *Yes* |
| **8d. Chapter 1163 of the USP/NF concerning Quality Assurance in Pharmaceutical Compounding** | *Yes* |
| **8e. Handbook on Injectable Drugs (publication year: _____)** | *Yes* |

**Publication Year**
: *Online*

| | |
|---|---|
| **8f. Specialty reference text appropriate for the scope of pharmacy services provided by the pharmacy (e.g., if the pharmacy prepares hazardous drugs, a reference text on the preparation of hazardous drugs)** | *Yes* |
| **9. Security Requirements can be met to assure the pharmacy will be locked by key, combination, or other mechanical or electronic means to prohibit unauthorized access when a pharmacist is not on-site.** | *Yes* |
| **10. Pharmacy has basic alarm system with the off-site monitoring and perimeter and motion sensors. (Alarm must be activated). *If your city requires an alarm permit, provide a copy of the permit.** | *Yes* |
| **11. Written policies and procedures/SOPs for the pharmacy's security system that meet the requirements of Rule 291.33(b)(2)(E)** | *Yes* |
| **12. An area suitable for confidential patient counseling, if the pharmacy serves the general public** | *Not Applicable* |

**Comment**

*Closed door pharmacy.*

| | |
|---|---|
| **13. If compounding sterile preparations, the pharmacy has controlled area that meets the requirements in Rule 291.133 (d)(6)(A) if the pharmacy is compounding low-risk and medium-risk preparations or Rule291.133(d)(6)(B) if high-risk preparations are being compounded.** | *Yes* |
| **14. Certified primary engineering control device (e.g., laminar airflow work benches, biological safety cabinets, compounding aseptic isolators, and compounding aseptic containment isolators).** | *Yes* |
| **15. Certified clean room(s) (e.g. ante area, buffer area).** | *Yes* |

## Signatures

**An agent of the Texas State Board of Pharmacy has inspected your pharmacy. The results of this inspection have been noted.**

- **Items designated as "Refer to Legal" must be rectified immediately. In addition, the matter discovered during the inspection and deemed to be a serious violation by the inspector will be referred to the Legal Division for review and possible disciplinary action; and**
- **Items designated as "Warning Notice" must be corrected by the deadline noted to ensure compliance with the laws and rules governing the practice of pharmacy (Note: A "Warning Notice" is issued for a minor violation, and does not equate to disciplinary action).**

*KEMAH, BALLAH*

*Larry Eatough*