



STATE OF FLORIDA
DEPARTMENT OF HEALTH
INVESTIGATIVE SERVICES

Florida
HEALTH

WWW.DOH.STATE.FL.US

CLASS II INSTITUTIONAL PHARMACY

File #
Insp #

ROUTINE [] CHANGE LOC [] NEW [] CURRENTLY NOT OPERATING [] CHANGE OWNER []

INSPECTION AUTHORITY - CHAPTER 465.017, CHAPTER 893.09 AND CHAPTER 456, FLORIDA STATUTES

NAME OF ESTABLISHMENT
PERMIT NUMBER
DATE OF INSPECTION
DOING BUSINESS AS
DEA NUMBER
CONSULTANT PHARMACIST
STREET ADDRESS
TELEPHONE #
EXT.
CITY
COUNTY
STATE/ZIP
LICENSE #

Table with Prescription Department Hours (Monday-Sunday) and Registered Pharmacist/Intern/Technician License #.

Main inspection checklist table with 30 items, each with a description and checkboxes for Satisfactory, N/A, Yes, No.

* Questions with (*) may be answered n/a (not applicable).

Facility Performing Immediate Use Compounding Only
31 Preparation time does not exceed 1 hour when preparing, and administration begins not later than 1 hour following start of Immediate use CSPs.
32 Preparation is properly labeled if preparer does not administer or witness administration when preparing immediate-use CSPs.

Remarks:

I have read and have had this inspection report and the laws and regulations concerned herein explained, and do affirm that the information given herein is true and correct to the best of my knowledge. I have received a copy of the Licensee Bill of Rights.

PRINT NAME OF RECIPIENT

ID

Institutional Representative Date Investigator/Sr. Pharmacist Signature