

STATE OF FLORIDA DEPARTMENT OF HEALTH **INVESTIGATIVE SERVICES** INV363 - Mod Class II Institutional Permit Animal Control Shelter



File # Insp #

NAME	PERMIT NUMBER		DATE OF INSPECTION	
DOING BUSINESS AS				
STREET ADDRESS		TEL	EPHONE #	EXT
СІТҮ	COUNTY		STATE/ZIP	

Additional Information

Business Operation Hours

M-T-W-TH-F	Weekly Hours	
Monday	Tuesday	
Wednesday	Thursday	
Friday	Saturday	
Sunday		
Registered Pharmacist / Intern / Tech		
ACS Manager		
Optional Information		
Basic License Data - PSD		

License Relations

Pharmacy Affiliate

	License #
RX DPT MGR/COR/POR	
	License #

INV 363 - Mod Class II Institutional Permit Animal Control Shelter

Animal Control Shelter Requirements

Current Modified Class II Institutional Pharmacy permit. [465.019(2) (c), F.S.]	
Board of Pharmacy Office notified of on-site manager change within 10 days. [64B16-29.002(6), F.A.C.]	
Current DEA registration for II N and III N Controlled Substances. [21 CFR1301.11]	
Controlled substance inventory taken on biennial basis and available for inspection. [893.07 (1)(a) , F.S.]	
Controlled substance records readily retrievable. [893.07, F.S.]	
DEA 222 order forms properly completed. [893.07, F.S.]	
Purchase records are maintained on premises and separate from administrative records. [64B16-29.004, F.A.C.] [828.055(1), F.S.]	
Storage of medications listed in [64B16-29.001, F.A.C.] and DEA 222's located within a locked room.	
Medications listed in rule [64B16-29.001, F.A.C.] only being used for euthanizing or chemically immobilizing animals.	
Medications listed in rule [64B16-29.001, F.A.C.] are the only medicinal drugs maintained on the premises.	
Records maintained for 4 years. [465.022(12)(b), F.S.] [64B16-29.004, F.A.C.]	

Insp

INV363 - Mod Class II Institutional Permit Animal Control Shelter

File

Shelter administration records show date of use, identification of the animal, amount of drug used, and signature of the person administering medication for euthanizing or chemically immobilizing animals. [64B16-29.004, F.A.C.]	
Administration and purchase records of the shelter reviewed and signed by on-site manager at least monthly. [64B16-29.004, F.A.C.]	
On-site manager has reported to the Department of Health any significant loss, theft, or inventory shortage of such prescription drugs. [828.055(3)(c), F.S.]	
Record of theft or significant loss of all controlled substances is being maintained and is being reported to the sheriff within 24 hours of discovery. [893.07(5), F.S.] [465.015(3), F.S.]	

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.

Investigator/Sr. Pharmacist Signature:

Date:

Representative:

Date: