Date: _____
In: _____
Out: _____

☐ Periodic
☐ New
☐ Closing
☐ Change of Ownership / Name / Location

NUCLEAR & CHARITABLE INSPECTION FORM

License No._____
OBNDD_____
DEA_____

Licenses Current	Y	N
Licenses Displayed	Y	N
Training Area	Y	N
Hot/Cold Water	Y	N
References Current	Y	N
Refrigerator	Y	N

Business Hours:
Mon-Fri_____
Sat_____ Sun_____
_____

Oklahoma State Board of Pharmacy
2920 N Lincoln Blvd, Ste A, Oklahoma City, OK 73105
Phone (405) 521-3815 / Fax (405) 521-3758
www.pharmacy.ok.gov / pharmacy@pharmacy.ok.gov

PLEASE RETAIN UNTIL NEXT INSPECTION

NAME_____ PHONE_____

ADDRESS_____ CITY_____ ZIP _____

Employees at this location	OSBP#	License/Permit Displayed/Current		On Duty		Immunization Certificate		Preceptor		Nuclear Certified	
		Y	N	Y	N	Y	N	Y	N	Y	N
D.Ph.'s: (PIC)											

	OSBP#	License/Permit Displayed/Current		On Duty		Identification		Picture		Training	
		Y	N	Y	N	Y	N	Y	N	Y	N
Interns:											
Techs:											

Nuclear	Y	N		Y	N		Y	N		Y	N
Radioactive material license by DEQ			Radionuclide dose calibrator			Samples retained til exp date			Area Monitor		
NLT 2 GM Survey meters			Ongoing training documented			Scintillation counter			Microscope		
Radiochemical fume hood			Vial/syringe radiation shields			Decontamination supplies			Hemacytometer		
Proper transport containers			Proper disposal containers			Method of nuclear disposal:					
Maintain acquisition records			Maintain inventory records			Maintain disposal records			FDA approved drugs		
Outer Container Label contains:			Standard Radiation Symbol			Caution: Radioactive material			Pharmacy name		
Name of radiopharmaceutical			Amt of radioactivity or SI equivalent			Calibration Date & Time/Volume			Exp date/time		
Concentration of radioactivity			Pt Name or "per physician's orders"			Serial or Lot #			Prescriber Name		
Inner Container Label Contains:			Standard Radiation Symbol			Caution: Radioactive material			Serial or Lot #		
Name of radiopharmaceutical			Amt of radioactivity or SI equivalent			Calibration Date & Time					

Charitable Pharmacy	Y	N		Y	N		Y	N
Policy and Procedure Manual			Charge Patient for Meds			Meds left outside phcy after hrs		
Outdated meds removed within 6 months			Outdated drugs in active stock			Non DPh Employees work before or after hrs		
Rx files maintained			Particpate in Unused Med Act			Pt/Phcy info redacted		
ID reference available			Receiving manifest maintained			Destruction manifest maintained		

Comments:

Important: You are directed to take prompt action to correct the above violations. If such action is disregarded, Board action may result. These deficiencies have been explained and will be corrected.

Pharmacist: | Compliance Officer:

SAMPLE