

**STATE OF FLORIDA**  
**DEPARTMENT OF HEALTH**  
**INVESTIGATIVE SERVICES**

**CLASS I INSTITUTIONAL PHARMACY INSPECTION REPORT**

File # \_\_\_\_\_

Insp# \_\_\_\_\_

ROUTINE	CHANGE LOC	NEW	CURRENTLY NOT OPERATING	CHANGE OWNER
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**N/A YES NO**

1. Consultant pharmacist record inspecting monthly and providing written report.
2. Prepackaged medication properly labeled.
3. Medication requiring refrigeration stored in a refrigerator.
4. Medication properly labeled and has quantity of the drug placed in the container.
5. Unit dose medications properly labeled.
6. Adequate sanitation and space to protect the health of the public served.
7. Medicinal drugs stored in emergency kits are those medications deemed by the Medical Director, Director of Nursing, and Consultant Pharmacist as necessary.
8. Emergency kit is readily available and kept sealed.
9. Inventory of emergency kit attached to outside of kit.
10. Drugs in emergency kits are labeled consistent with Chapter 499 requirements.
11. Medications administered from emergency kits properly accounted for through procedural controls.
12. P & P manual delineates procedure for disposal of unused controlled substances.
13. Records exist for receipt and disposition of all controlled substances.
14. Account of controlled drugs is reconciled periodically.
15. Starter dose contracts provided.
16. CQI Policy and Procedures and quarterly meetings.

REMARKS:

  
  
  
  
  
  
  
  
  
  

Institutional Representative \_\_\_\_\_ Date \_\_\_\_\_

Investigator/Sr. Pharmacist Signature \_\_\_\_\_ Date \_\_\_\_\_