



FLORIDA BOARD OF PHARMACY

4052 Bald Cypress Way, Bin C-04 • Tallahassee, FL 32399-3254
Phone: (850) 245-4292 • www.doh.state.fl.us/mqa/pharmacy

CLOSING A PHARMACY

Please notify the board as soon as possible of the anticipated closing date. This notice must be submitted in writing and must contain the following information:

- 1) Date of closing.
- 2) The names and addresses of the persons who shall have custody of the prescription files, and the controlled drug inventory records of the pharmacy to be closed.
- 3) The names and addresses of any persons who will acquire any of the legend drugs from the pharmacy to be closed.

No later than ten (10) days after the pharmacy has been closed, the pharmacy permit must be returned to the board office, and the permittee shall file a written report with the board office containing all of the following information:

- 1) Confirmation that a sign has been posted outside of the closed establishment indicating the name and address of the pharmacy where the prescription files have been transferred.
 - 2) Confirmation that ALL legend drugs have been transferred to an authorized person or destroyed. If transferred, provide the names of all persons to whom they were transferred.
 - 3) If controlled drugs were transferred, you must indicate the names and addresses of the persons to whom they were transferred.
 - 4) Confirmation that DEA registration and all blank DEA 222 (order forms) were returned to the DEA Miami Regional Office.
 - 5) Confirmation that all pharmacy labels and all blank prescriptions, which were in the pharmacy, were destroyed.
- I. Confirmation that all signs and symbols indicating the presence of a pharmacy have been removed.