



AGENDA

Florida Board of Pharmacy * Tripartite Committee Meeting March 26, 2018 – 9:30 a.m.

Conference Call Number: (888) 670-3525

Conference Code Number: 5134896685

Committee Members:

Debra B. Glass, BPharm – Chair

Group A:

Carsten Evans, Ph.D., RPh

Debra B. Glass, BPharm

Mark Mikhael, PharmD

Group B:

Michelle Weizer, Pharm.D., BCPS

Julie Wilkinson, PharmD

Jeenu Philip, BPharm

Group C:

Jonathan Hickman, PharmD

Amy H. Schwartz, PharmD, BCPS

Michael Jackson, RPh

Board Staff:

C. Erica White, MBA, JD - Executive Director

Sophie Amoroso, Regulatory Supervisor

Board Counsel:

Lawrence Harris, Assistant Attorney General

Note: Participants in this public meeting should be aware that these proceedings are being recorded.

9:30 a.m. Call to Order

1. Continuing Education Approval Process Review

Use of CE Broker – review and routing procedures

- Sign off on program (only if you are the 2nd reviewer and approve)
- Read the information carefully (verify number of hours requested)
- Timeliness (notify Board Office if unable to complete review in 14 days) deadline
- CV required on all programs (auditing requirement)
- Stick to requests being timely submitted (45 days in advance).
- Email Board Office when finished with your review to assist with timeliness of approval in the 14-day window to prevent unnecessary follow up)
- Requests for additional information - process

2. Report on current CE Program/Provider applications

3. Update on Board Staff

4. New Business

- Individual Requests for Continuing Education Credit (form)

5. Questions and Answers

6. Adjourn



Individual Requests

Individual requests to have a course approved must be made on the attached form and submitted in advance of completion of the course for approval with the course description and outlined content in accordance with Section 465.009(5), F.S. The Board has adopted rules within the requirements of this section that are necessary for its implementation, including a rule creating a committee composed of equal representation from the Board, the colleges of pharmacy in the state, and practicing pharmacists within the state, whose purpose shall be to **approve the content of each course offered for continuing education credit prior to the time such course is offered.**



INDIVIDUAL REQUESTS FOR CONTINUING EDUCATION CREDIT

In order to review a request from an individual licensee, a copy of the promotional information **(time, date(s), location, speaker(s), objective(s))** must be furnished to the Board office at least **45 days prior** to presentation.

ALL CONTINUING EDUCATION MUST BE APPROVED BY THE BOARD BEFORE TAKING THE COURSE.

Programs approved by the American Council on Pharmaceutical Education (ACPE) are accepted for **Pharmacist (PS) General Education** by the Board without any further review or consideration.

INDIVIDUAL PARTICIPENT REQUEST FOR APPROVAL OF CONTINUING EDUCATION

(Please Type or Print Legibly)

NAME OF INDIVIDUAL _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____ **PHONE:** _____

NAME OF PROGRAM _____ **DATE** _____

CITY _____ **STATE** _____

Indicate the number of CE hours and type requested: _____ Live CE _____ Home Study CE

- _____ General CE
- _____ HIV/AIDS
- _____ Order/Evaluate Laboratory Test
- _____ Consultant Certification
- _____ Consultant Recertification
- _____ Laws and Rules
- _____ Medication Error
- _____ Nuclear CE
- _____ Immunization Course
- _____ Technician CE
- _____ Quality Related Event (Disciplinary Course)

PLEASE ATTACH 4 COPIES OF THE PROGRAM AND/OR BROCHURE AND IDENTIFY THE SEGMENTS OF ATTENDANCE.