

**BOARD OF PHARMACY
WHITE AND BROWN BAGGING WORKGROUP
DRAFT MINUTES**

August 25, 2021

9:00 a.m. ET

**Embassy Suites by Hilton Tampa USF Near Busch Gardens
3705 Spectrum Blvd
Tampa, FL 33612
813-903-6620**

Participants in this public meeting should be aware that these proceedings are being recorded and that an audio file of the meeting will be posted to the board's website.

I. CALL TO ORDER/ROLL CALL

Dr. Hickman called the meeting to order at 9:00 a.m. ET.

MEMBERS PRESENT

Jonathan Hickman, PharmD
Patty Ghazvini, PharmD, BCGP
Dorinda Segovia, PharmD, MBA

STAFF PRESENT

Jessica Sapp, Executive Director
Traci Zeh, Program Administrator

WORKGROUP MEMBERS PRESENT

Ken Komorny, PharmD, BCPS
Michael Diaz, MD
Richard Palombo, RPh, DPh
Mark Percifield, PharmD
Jorge Garcia, PharmD, MS, MHA,
MBA, FACHE

BOARD COUNSEL

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II. NEW BUSINESS

a. White and Brown Bagging Emerging Practices

The Board of Pharmacy received correspondence from the Florida Society of Health System Pharmacists, Inc (FSHP) regarding White and Brown Bagging Practices. That correspondence was placed on the April 14, 2021 and June 9, 2021 Rules Committee agenda for discussion. Subsequent to those meetings the Board formed a workgroup made up of three Board of Pharmacy members and health care professionals from the public.

Mr. Palomba addressed the workgroup regarding white and brown bagging practices and provided a definition of each. He explained white bagging as the dispensing of patient-specific medication from an outside pharmacy to a physician's office, hospital, or clinic for purposes of administration and brown bagging as the dispensing of a

medication from a pharmacy directly to the patient, who then transports the medication(s) to a physician's office for purposes of administration.

Dr. Ghazvini addressed the Workgroup regarding what oversight of white and brown bagging is within the Board's purview. She reiterated the Board's role is to assure the medications are properly stored, handled, and distributed to ensure patient safety.

Ms. Gift addressed the workgroup regarding managing the care of the patient and ensuring the medication is available. She suggested identifying how pharmacies are coordinating with the site administering the medication and who is responsible for assuring the patient drug is available when it needs to be administered.

Mr. Flynn suggested outlining the objectives and future goals of the workgroup. He identified the categories as educational purposes, what the objectives goals should be, and what legal options are available to the Board. He explained if rule making is within the Board's legal purview, he advised the workgroup to start with the educational portion first to identify what rules, if any, can be drafted.

Dr. Diaz confirmed that a Consultant of Record is responsible for medication oversight in an institutional setting. He stated it is not within a nurse's scope of practice to compound and prepare medications to their final form. He inquired about identifying the originating pharmacy and the dispensing pharmacy and the steps in between.

Dr. Segovia addressed the workgroup and explained a white bagging scenario. She explained how the medication arrives to a permitted facility. The responsibility of the medication is under the control of a Consultant of Record (COR). The COR confirms if the medication requires compounding and is responsible for the labeling and dispensing of the medication. She indicated the medication could end up in the possession of a pharmacist or nurse. Dr. Segovia suggested the workgroup identify what happens to the medication before it goes into final form for administration as well as identify which pharmacy is now the dispensing pharmacy: the originating dispenser or the pharmacy administering the medication to the patient.

Dr. Ghazvini suggested separating the two discussion between white bagging and brown bagging.

Mr. Flynn explained that brown bagging is when the medication is shipped directly to the patient from the originating dispensing pharmacy and then the patient transports the medication for administration. He stated the workgroup should identify the purpose of this process and what concerns arise with patient safety.

Dr. Percifield expressed his opinions on why brown bagging is necessary. He indicated it creates greater access for the patient to receive their medications faster; however, needs better instructions for the patient to ensure safety.

Dr. Diaz explained that brown bagging has been banned in the facility he currently works in as it is not needed and interferes with proper patient care.

Dr. Hickman summarized the discussion from the workgroup. He indicated the objectives access to medications and patient care. He tasked the workgroup members with identifying what changes they would make and asked for data to be collected from other states.

This discussion will continue at the October meeting.

III. ADJOURNMENT

There being no further business the meeting adjourned at 12:00 p.m. ET.