

**BEFORE THE BOARD OF PHARMACY  
OF THE STATE OF IOWA**

**RECEIVED**

MAY 07 2009

**IOWA BOARD OF PHARMACY**

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Re: )	Case No. 2009-21
Pharmacist License of )	
<b>MICHAEL J. CHRISTOFFERSEN</b> )	<b>EMERGENCY ORDER</b>
License No. 19260 )	
Respondent. )	

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**I. JURISDICTION**

The Iowa Board of Pharmacy (hereinafter, "Board") has jurisdiction over pharmacy licensees pursuant to Iowa Code Chapters 155A and 272C (2009). Respondent MICHAEL J. CHRISTOFFERSEN possesses pharmacist license number 19260 issued by the Board. A Statement of Charges was filed against Respondent on April 28, 2009. After receipt and review of the Statement of Charges, and careful review of evidence relating to the Statement of Charges, the Board has adopted the following Findings of Fact, Conclusions of Law, and Emergency Order.

**II. FINDINGS OF FACT**

1. On September 17, 1999, the Board issued Respondent a license to engage in the practice of pharmacy as evidenced by license number 19260, subject to the laws of the State of Iowa and the rules of the Board.
2. Respondent was recently employed as a pharmacist at Mercy Medical Center, 801 Fifth Street, Sioux City, Iowa. Since March 9, 2009, he has been unemployed.
3. On or about March 13, 2009, an investigation was commenced which revealed, among other things, the following:
  - a. Respondent was employed as an overnight pharmacist at Mercy Medical Center in Sioux City, Iowa.

- b. During the course of Respondent's employment, Respondent was implicated in the unexplained loss of controlled substances in five different incidents. The incidents involved the improper wasting of controlled substances. Respondent claims to have no memory of the incidents. The loss of controlled substances included injectable Fentanyl, Hydromorphone, and Morphine.
  - c. Respondent's employment with Mercy Medical Center was terminated on March 9, 2009.
  - d. As of March 11, 2009, Respondent was diagnosed with attention deficit/hyperactivity disorder and panic disorder with agoraphobia.
  - e. A complaint that the Board received in 2001 alleged that Respondent was involved in the diversion of controlled substances to a woman who is currently his wife.
4. The Board finds that the evidence assembled during the investigation of Respondent supports the April 28, 2009, Statement of Charges against Respondent.
5. The Board finds that Respondent is an immediate danger to the public health, safety, and welfare for the following reasons:
  - a. The Respondent is not capable of safely performing pharmacist functions, which require a clear, unimpaired mental state.
  - b. Should Respondent be impaired during hours of employment, he might cause or fail to prevent a dispensing error, fail to conduct an accurate utilization review or fail to appropriately counsel patients on medication usage.
    - i. The Board finds that immediate, emergency action must be taken for the reason that if Respondent is allowed to continue to work as a pharmacist, the public health, safety, and welfare will be threatened by his condition; specifically, by Respondent's loss of memory and/or impairment due to addiction to controlled substances. Given this fact, the Board must act in the interest of the public to suspend Respondent's license to practice pharmacy until his psychiatric condition and/or drug addiction is treated and controlled.
    - ii. The Board finds that the minimum emergency action needed to protect the public health, safety, and welfare is as follows:
      - a) Immediate suspension of Respondent's pharmacist license.
      - b) Issuance of an order directing that Respondent's license shall remain suspended until satisfactory evidence of Respondent's ability to resume the practice of pharmacy has been provided to the Board.

### **III. CONCLUSION OF LAW**

1. Respondent's unauthorized use of controlled substances, and related violations of the provisions of Iowa Code chapter 155A.15 (2009) and 657 Iowa Administrative Code § 36.1(4)(d)(1), prevent Respondent from working safely as a pharmacist.
2. The provisions of Iowa Code § 17A.18A (2009) permit the Board of Pharmacy to take emergency action to protect the health, safety, and welfare of the public. A basis for emergency action against Respondent, pursuant to the provisions of the Iowa Code and the Iowa Administrative Code, has been established by the findings of fact adopted above.

### **IV. EMERGENCY ORDER**

The Board ORDERS as follows:

1. Pursuant to Iowa Code § 17A.18A, chapter 155A (2009) and 657 Iowa Administrative Code § 36.1(4)(d)(1), the pharmacist license of MICHAEL J. CHRISTOFFERSEN is suspended indefinitely. This suspension is effective immediately upon issuance of this order.
2. Respondent shall be notified of this order as provided in 657 Iowa Administrative Code 35.30(2).
3. A hearing regarding this Emergency Adjudicative Order and the Statement of Charges against Respondent shall be held on June 3, 2009. The hearing will commence at 9:00 a.m. and be held at the office of the Iowa Board of Pharmacy, 400 Southwest Eighth Street, Suite E, Des Moines, Iowa 50309.

**DATED** this 28<sup>th</sup> day of April, 2009.

*Leman E. Olson*

Leman E. Olson, Chairperson  
Iowa Board of Pharmacy  
400 SW Eighth Street, Suite E  
Des Moines, Iowa 50309-4688

RECEIVED

MAY 07 2009

IOWA BOARD OF PHARMACY

cc: Scott M. Galenbeck  
Assistant Attorney General  
Hoover State Office Building  
Des Moines, IA 50319

Respondent

PROOF OF SERVICE

The undersigned certifies that the foregoing instrument was served upon Respondent to the above cause by:

<input checked="" type="checkbox"/> personal service	( ) first class mail
( ) certified mail, return receipt requested	( ) facsimile
Article Number: <u>2009-21</u>	( ) other: _____
on the <u>30</u> day of <u>APRIL</u> , 2009.	

I declare that the statements above are true to the best of my information, knowledge and belief.

*Debbie S. Jorgenson*  
Debbie S. Jorgenson **BERNARD BERNTSEN**

**BEFORE THE BOARD OF PHARMACY  
OF THE STATE OF IOWA**

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Re:	)	Case No. 2009-21
Pharmacist License of	)	
<b>MICHAEL J. CHRISTOFFERSEN</b>	)	<b>STATEMENT OF CHARGES</b>
License No. 19260	)	
Respondent.	)	

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**COMES NOW**, the Complainant, Lloyd K. Jessen, and states:

1. He is the Executive Director for the Iowa Board of Pharmacy and files this Statement of Charges solely in his official capacity.
2. The Board has jurisdiction in this matter pursuant to Iowa Code Chapters 155A and 272C (2009).
3. On September 17, 1999, the Board issued Respondent, MICHAEL J. CHRISTOFFERSEN, by examination, a license to engage in the practice of pharmacy as evidenced by license number 19260, subject to the laws of the State of Iowa and the rules of the Board.
4. Respondent's pharmacist license is current and active until June 30, 2009.
5. Respondent's current address is 1722 George Street, Sioux City, Iowa 51103.
6. Respondent was most recently employed as a pharmacist at Mercy Medical Center, 801 Fifth Street, Sioux City, Iowa 51101.

**A. CHARGES**

**COUNT I – UNLAWFUL POSSESSION OF DRUGS**

The Respondent is charged with unlawful possession of prescription drugs in violation of Iowa Code § 155A.21 (2007) and 657 Iowa Administrative Code § 36.1(4) (j).

**COUNT II – ILLEGAL DISTRIBUTION OF DRUGS**

Respondent is charged with distribution of drugs for other than lawful purposes in violation of Iowa Code § 155A.21(1) (2007) and 657 Iowa Administrative Code § 36.1(4)(h), specifically diversion and distribution of drugs to himself in the absence of a prescription.

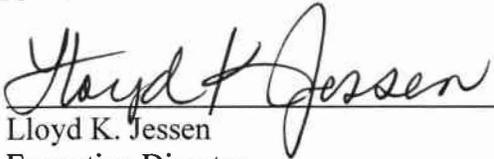
COUNT III – INABILITY TO PRACTICE PHARMACY DUE TO CHEMICAL ABUSE

The Respondent is charged with the inability to practice pharmacy with reasonable skill and safety by reason of chemical abuse in violation of Iowa Code § 155A.12(1) (2007) and 657 Iowa Administrative Code §§ 36.1(4)(d), 36.1(4)(j), and 36.1(4)(m).

B. CIRCUMSTANCES

Circumstances supporting the above charges are set forth in Attachment A.

WHEREFORE, the Complainant prays that a hearing be held in this matter and that the Board take such action as it may deem to be appropriate under the law.

  
Lloyd K. Jessen  
Executive Director

On this 28th day of April 2009, the Iowa Board of Pharmacy found probable cause to file this Statement of Charges and to order a hearing in this case.

  
Leman E. Olson, Chairperson  
Iowa Board of Pharmacy  
400 SW Eighth Street, Suite E  
Des Moines, Iowa 50309-4688

cc: Scott M. Galenbeck  
Assistant Attorney General  
Hoover State Office Building  
Des Moines, IA 50319

Respondent

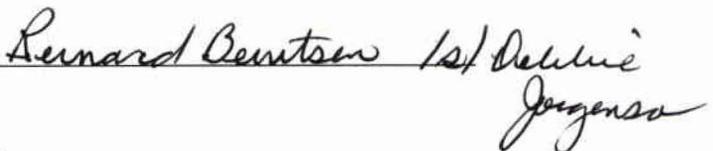
PROOF OF SERVICE

The undersigned certifies that the foregoing instrument was served upon Respondent to the above cause by:

personal service  
 certified mail, return receipt requested  
Article Number: \_\_\_\_\_  
on the 30 day of April, 2009.

first class mail  
 facsimile  
 other: \_\_\_\_\_

I declare that the statements above are true to the best of my information, knowledge and belief.

  
Bernard Beniston /s/ Delmi Jensen

BEFORE THE BOARD OF PHARMACY EXAMINERS  
OF THE STATE OF IOWA

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Re:	)	DIA NO: 09PHB015
	)	CASE NO: 2009-21
Pharmacist License of	)	
<b>Michael J. Christoffersen,</b>	)	
License No. 19260,	)	<b>FINDINGS of FACT,</b>
	)	<b>CONCLUSIONS of LAW,</b>
Respondent.	)	<b>and ORDER</b>

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On April 30, 2009, the Iowa Board of Pharmacy Examiners (the Board) filed a statement of charges and emergency order against Michael Christoffersen (respondent), a licensed pharmacist. The board charged respondent with three violations: 1) unlawful possession of prescription drugs, 2) distribution of drugs for other than lawful purpose, and 3) inability to practice pharmacy due to chemical abuse.

The case was set for hearing on June 1, 2009. The following board members were present for the hearing: Susan Frey, Mark Anliker, DeeAnn Wedemeyer-Oleson, Ed Maier, Peggy Whitworth, and Ann Diehl. Jeffrey Farrell, an administrative law judge from the Iowa Department of Inspections and Appeals, assisted the board. Scott Galenbeck, an assistant attorney general, represented the public interest. Respondent represented himself.

**THE RECORD**

The State's exhibits 1-6 were admitted. The State called respondent as a witness. Respondent provided additional testimony during his case. Respondent's exhibit A was admitted.

**FINDINGS OF FACT**

Respondent has practiced as a pharmacist for approximately ten years. Most recently, he was an overnight staff pharmacist at Mercy Medical Center (Mercy) in Sioux City for the past four years. Respondent typically worked a shift from 9:30 p.m. to 7:30 a.m. The staff levels usually included two or three pharmacists and four technicians from 9:30 to 11:30 p.m. At 11:30 p.m., the staff was reduced to one pharmacist and two technicians until 6:30 a.m. (Respondent testimony).

On or around March 2, 2009, David Liebsack, who is the director of pharmacy at Mercy, began an investigation of respondent based on information from staff. The investigation

resulted in Mercy terminating respondent's employment on March 9. Mr. Liebsack also made a referral to the Board. The Board assigned the case to Bernard Berntsen to further investigate. Mr. Berntsen obtained investigative and other information from Mercy, and also obtained a written statement from respondent. Mr. Berntsen compiled an investigative report that was made part of the record. (Exhibit 3).

Mercy documented five discrepancies in its protocol for handling or wasting controlled substances. Four of the discrepancies implicate respondent in the diversion or taking of controlled substances. Each incident occurred between February 25, 2009, and March 3, 2009. They are summarized below:

1. In the morning of March 2, 2009, respondent made two epidural drips requiring 4 ml of fentanyl. Each would require respondent to waste 1 ml of fentanyl. On one occasion, a technician observed respondent put his sleeve over his hand to hide the syringe holding the remaining fentanyl. He then left the room. The technician believes respondent took the syringe from the room. Staff later checked the sharps container and garbage in the IV room. There were no 3 ml syringes in the sharps container. There were two 3 ml syringes in the garbage, but they were drawn back to 2.5 ml and 1 ml. This suggests that they were not the same syringes used by respondent, based on the volume of drug to add to the IV.

Respondent was asked about the allegation. He claimed to have wasted the drugs. He was not able to offer any explanation for what happened to the syringes.

2. In the morning of March 2, 2009, a technician saw respondent take a vial with 10 ml of hydromorphone. Respondent acted like he was wasting the drug by dropping the vial into the sharps container, but the technician saw him take the vial from the IV room. Respondent returned to the IV room approximately 30 minutes later. He stood by the sharps container and tried to quietly drop the vial into the container. However, the technician heard the vial made a noise when it hit the bottom.

Mercy found that respondent had not followed protocol by signing the waste form in the IV room. When asked, respondent then attempted to initial the form as waste, but the technician refused to co-sign because she had not witnessed him follow the correct procedure.

3. On the night of March 1, 2009, technicians witnessed respondent looking into the narcotics boxes in the IV room several times for no known reason. The pharmacy keeps morphine in 20 ml vials in that box. Staff later checked the vials to determine whether any drug was missing. The sign-out sheets

indicated there should be 5 to 10 ml of overfill, but there was no overfill. Additionally, one of the vials looked and acted as if it had been accessed more than once, as it had a leak. Respondent denied diverting any of the drug.

4. On February 25, 2009, a technician witnessed respondent looking into the sharps containers and probing the containers with an object that looked like an antenna. When asked, respondent said that he was checking the container for insulin pens with patient labels attached. He said he wanted to remove the labels so the pens could be properly discarded. The technician reported that respondent cut himself during this same period. Respondent responded that it was a paper cut, but the technician did not believe him because the cut was too serious. The technician acknowledged that she did not see respondent cut himself while probing the sharps container.
5. Respondent appeared at the pharmacy at 3:00 a.m. on March 3, 2009, which is a shift he did not work. He said he had not slept, and came in to get a protein shake because he was hungry. A technician saw him near the first section of unit dose pills, where he took something from the bin and put it into his pocket. She had seen him do the same action the night before. This action was confirmed by one of the pharmacists. Respondent denied taking any pills.

The staff members told management that respondent acted like he might be using controlled substances. They described him as acting abnormally, barely able to keep his eyes open, moving slowly, and was easily agitated. He told some employees he had barely slept of the past several days. (Exhibit 3).

On March 3, 2009, the director of pharmacy and clinical manager tried to contact respondent to come in for an interview. Respondent called back at 1:45 p.m. on March 4, and he met them at the office at approximately 3:00 p.m. Respondent was unshaven, and management felt his eyes and mannerisms were consistent with an impaired person. The managers started by stating their concern about respondent's erratic behavior over the prior three or four days, and respondent responded by saying "they should be." Respondent attributed his behavior to marital difficulties and a severe lack of sleep. He denied each of the allegations, and denied any substance abuse problems. He repeatedly told his supervisors that he would "mind his P's and Qs for now on." They agreed to meet again on March 9 to decide what steps to take. (Exhibit 3).

On March 5, 2009, respondent appeared on his own at the office and asked to meet with the director and clinical manager. The managers felt he looked more like his normal self and did not seem impaired. Respondent said that he should not have met with them the day before. He reported that he had slept better after staying at a friend's house who had a "really dark" room. Respondent said that he did not want to lose his job, but he would be willing to resign to avoid termination if things had gone too far. Respondent again

stopped by the office on March 6 to talk to the director. Respondent said that he “let [himself] get that way” and that “[he] can prevent it from happening again.” He agreed to do whatever he had to do to stay at Mercy, including going to EAP or be placed on probation. (Exhibit 3).

Mr. Berntsen obtained a written statement from respondent on March 25, 2009. Respondent stated that he had been suffering from stress due a combination of work, marital problems, and four children at home. He began having severe panic attacks around February 9, 2009. He saw his psychiatrist on February 19. His doctor prescribed Klonopin for anxiety, while continuing a prescription for Concerta. Respondent stated that his use of Klonopin led to insomnia, extreme exhaustion, and fatigue, which in turn led to erratic behavior at work and home. Respondent contended that his behavior was a result of an adverse reaction to a prescribed medication. He denied any substance abuse problem. (Exhibit 3).

Respondent’s psychiatrist noted that side effects of Klonopin may include excess sedation, confusion, falls, and driving accidents. He encouraged respondent to monitor these symptoms when he started the drug. Respondent saw his doctor on March 11, 2009, and reported that he stopped using the drug. The doctor concurred and encouraged respondent to flush the extra pills. Respondent agreed to do that. The doctor wrote the Board on May 26, 2009, stating that he is not aware of respondent abusing recreational or prescription medications. (Exhibits 4, A).

Respondent testified that he threw away the Klonopin on March 4, 2009, because he did not like what it was doing to him. He was only getting two hours of sleep a night and was acting irrationally. He testified that he slept well on March 5 and 6, and was feeling much better the time he was terminated by Mercy on March 9. Respondent testified that he did not recall diverting any medications from Mercy. He claimed that he does not remember what happened, but also claimed that it would be out of character for him to take drugs. He testified that he hates needles and often bruises with blood draws, so he believes he would not have used any syringes. Respondent stated that he wants to resolve the charges and will perform all reasonable criteria set by the Board. (Respondent testimony).

Respondent’s testimony is supported to some degree by his psychologists notes. Respondent saw his psychologist on March 3, 2009. He reported having a rough night and sleeping little. The psychologist confirmed that that respondent looked tired and very shaky. On March 6, the psychologist reported that respondent was sleeping much better and was more stable. (Exhibit 5).

## CONCLUSIONS OF LAW

**Regulatory framework:** The Board was created for the express purpose to promote, preserve and protect the public health, safety, and welfare through the effective regulation of the practice of pharmacy.<sup>1</sup> The Board regulates the practice, in part, through the licensing of pharmacies, pharmacists, and others engaged in the sale, deliver, or distribution of prescription drugs and devices.

The Board has the authority to grant licenses to pharmacists, adopt regulations creating standards for licensure, and to enforce compliance with those standards.<sup>2</sup> The Board may impose discipline against the license holder, including revoking or suspending a license, putting a licensee on probation, imposing a civil penalty up to \$25,000, issuing a citation and warning, and requiring professional education.<sup>3</sup>

**Statement of charges:** The first two counts are related and will be considered together. The State claimed in count I that respondent possessed prescription drugs in violation of Iowa law.<sup>4</sup> The State can prove possession if drugs are found on the person, of if respondent had knowledge of the presence of the controlled substances with the authority or right to maintain control of them.<sup>5</sup> The State claimed in count II that respondent distributed drugs to himself in violation of Iowa law.<sup>6</sup> The State can prove a violation of either provision if he took prescription medications that were not prescribed to him.

The evidence, as a whole, is compelling. Respondent's co-workers observed several incidents of erratic behavior. During this week-long time period, multiple staff members saw respondent take controlled substances that were not prescribed to him. In particular, the State provided statements showing direct witness accounts that respondent took fentanyl, hydromorphone, and a pill from the unit dose area. There is strong circumstantial evidence that respondent took morphine as well. Respondent was seen getting into the boxes of morphine at a time he had no professional reason to be there, and further investigation showed some of the drug to be missing.

Several staff members stated that respondent appeared impaired, as opposed to merely tired. This further supports the claims that respondent took the medication for the purpose of using it. Additionally, respondent's discussions with pharmacy managers indicate a partial admission. He made statements that he would "mind his P's and Q's," had "allowed things to go to far," he "let [himself] get that way," and that "he could

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<sup>1</sup> Iowa Code section 155A.2.

<sup>2</sup> Iowa Code section 272C.1(6)(q), 272C.3.

<sup>3</sup> Iowa Code sections 155A.12, 155A.18, 272C.3(2).

<sup>4</sup> Iowa Code section 155A.21; 657 IAC 36.1(4)(j).

<sup>5</sup> *State v. Carter*, 696 N.W.2d 31, 38-39 (Iowa 2005).

<sup>6</sup> Iowa Code section 155A.21; 657 IAC 36.1(4)(h).

prevent it from happening again.” Respondent did not attribute his actions to the use of Klonopin at that time. Rather, his statements seem a partial acknowledgement of his actions.

The State alleged in count III that respondent is not able to practice pharmacy with reasonable skill and safety by reason of chemical abuse.<sup>7</sup> On this count, the evidence is mixed. The evidence shows that respondent could not practice with a reasonable skill and safety from February 25 to March 3, 2009, based upon his theft of controlled substances and other erratic behavior. However, respondent’s conduct occurred during a defined period of time in which he was experimenting with a new prescription drug to manage panic attacks. Respondent ceased taking Klonopin in early March. There is no evidence to show that he illegally possessed or used drugs before or after he used Klonopin, and respondent’s ability to practice is not directly challenged outside this time period. The Board cannot find, by a preponderance of the evidence, that respondent’s inability to practice was caused by his chemical abuse or by the side effects of a drug he was legally taking. Accordingly, the Board cannot find a violation of Count III.

### SANCTION

The legislature has appointed the Board and the pharmacy profession as a whole to be the gate keeper for the distribution of controlled substances in this state. This is an exceedingly important responsibility. If the public does not trust pharmacists to abide by the law regard to their handling of controlled substances, the confidence in the system as a whole is eroded. As a result, the Board must treat violations regarding possession and diversion of drugs very seriously.

At the same time, the Board must judge each violation in context. Respondent’s violations were not long-standing and appear to have resulted from a change in medications properly prescribed by his psychiatrist. In essence, this appears to be more of a one-time offense with mitigating circumstances.

The Board’s larger concern is to ensure that there are no repeat offenses. Because the cause of respondent’s conduct is in question, the Board must look to a number of conditions to best protect the public interest. Respondent’s conduct may have resulted from his use of Konopin, but may also have been caused by his underlying mental health diagnoses. The Board is also concerned that respondent never fully accepted responsibility for his actions. This shows a lack of insight into his conduct that could make a reoffense more likely. While it is possible that respondent may not recall all the details surrounding his conduct, his admissions to his pharmacy managers at Mercy indicates that he understood his wrong-doing at some level. Notwithstanding these

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<sup>7</sup> Iowa Code section 155A.12(1); 657 IAC 36.1(4)(d),(j),(m).

concerns, the Board believes respondent can practice, assuming he complies with the conditions set forth below.

### **DECISION AND ORDER**

The Iowa Board of Pharmacy will lift the emergency suspension of respondent Michael Christophersen's pharmacist license and place it on probation for two years upon Respondent's entry into the Iowa Pharmacy Recovery Network (IPRN) program under the direction of Emily Dykstra or her designee. Respondent shall provide evidence to the Board that he has a contract with IPRN before the suspension of his license shall be lifted. Upon the commencement of his probation, Respondent shall be subject to each of the following conditions:

1. Respondent shall completely abstain from the personal use of alcohol. Respondent shall completely abstain from the personal use of all controlled substances or drugs in any form unless prescribed by a duly licensed treating physician. Respondent shall advise any treating physician of his chemical dependency prior to accepting any prescription drug. Respondent shall report any use of controlled substances prescribed for him to the Board within fourteen days.
2. Respondent shall participate in and shall fully comply with a Board approved urine screening program through First Lab. In addition, Respondent shall immediately submit a witnessed blood or urine sample whenever requested by the Board or its designee. All costs of biological fluid testing shall be borne by the Respondent.
3. Respondent shall participate in the Iowa Pharmacy Recovery Network (IPRN) program under the direct support of an IPRN advocate and shall fully comply with all IPRN requirements.
4. Respondent shall obtain a substance abuse evaluation from a provider approved by the Board within 30 days of the date of this order. Respondent shall provide a copy of the evaluation to the Board within ten days of receipt. Respondent shall comply with all treatment recommendations in the evaluation.
5. Respondent shall provide a copy of this decision and order to all prospective employers at the time of interview. Respondent shall provide his current employer and all co-employees in the pharmacy with a copy of this decision and order. Within 15 days of receipt of this decision and order and within 15 days of beginning any new employment, all employers and all pharmacy co-employees shall sign a verification that they have read the decision and order and understand the terms, conditions and restrictions imposed on respondent by this decision. These written verifications shall be provided to the Board when

signed. Respondent's employer shall provide quarterly written reports to the Board describing his work performance and attendance. The reports shall be filed no later than March 5, June 5, September 5, and December 5 of each year of Respondent's probation.

6. Respondent shall continue to see his psychiatrist, psychologist, and any other mental health counselors or therapists, per the recommendation of his treatment providers. Respondent shall obtain a quarterly report from his psychiatrist documenting his status and ability to practice. The reports shall be filed no later than March 5, June 5, September 5, and December 5 of each year of respondent's probation.

7. Respondent shall obtain a stress test from his psychiatrist or person designated by his psychiatrist within 30 days from the date of this order. Respondent shall provide a copy of the report to the Board within ten days of receipt. Respondent shall comply with all treatment recommendations.

8. Respondent shall file written, sworn quarterly reports with the Board attesting to his compliance with all the terms and conditions of his probation. The reports shall be filed no later than March 5, June 5, September 5, and December 5 of each year of Respondent's probation. The quarterly reports shall include Respondent's place of employment, current home address, home telephone number, or work telephone number, verification of AA/NA attendance, and any further information deemed necessary by the Board from time to time.

9. Respondent shall make personal appearances before the Board or a Board Committee upon request. Respondent shall be given reasonable notice of the date, time and location for such appearances.

10. Respondent shall inform the Board in writing within ten (10) days of any change of home address, place of employment, home telephone number, or work telephone number.

11. Respondent shall release his medical records to the Board upon request, including all medical recordings pertaining to treatment for alcohol and substance abuse, if any, and shall sign all necessary releases of information to allow the free flow of information between the Board and respondent's physician(s) and treatment provider(s) and to ensure that the Board receives all necessary information if further evaluation or treatment of respondent is requested or required.

12. Respondent shall obey all federal and state laws, rules, and regulations substantially related to prescription drugs, controlled substances, or

nonprescription drugs; with Iowa Code chapters 124, 124A, 124B, 126, 147, 155A, and 205; and shall comply with the Board's rules.

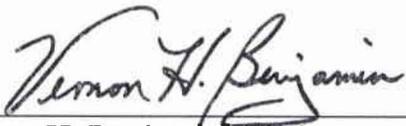
13. Should Respondent leave Iowa to reside or practice outside this state, Respondent must notify the Board in writing of the dates of departure and return. Periods of residency or practice outside the state shall not apply to reduction of the probationary period.

14. Should Respondent violate or fail to comply with any of the terms and conditions of probation, the Board may initiate action to revoke or suspend Respondent's Iowa pharmacist license or to impose other discipline as authorized by Iowa Code chapters 272C and 155A and 657 IAC 36.1.

Respondent shall pay \$75.00 for fees associated with conducting the disciplinary hearing. In addition, the executive secretary of the board may bill respondent for any witness fees and expenses or transcript costs associated with this disciplinary hearing. Respondent shall remit for these expenses within thirty days of receipt of the bill.

Violation of any of the provisions of this order may be the subject of additional disciplinary action.

Dated this 24th day of September, 2009.



Vernon H. Benjamin, Chairperson  
Iowa Board of Pharmacy Examiners

cc: Scott Galenbeck, Assistant Attorney General  
Michael Christoffersen, Respondent

### Notice

Any aggrieved or adversely affected party may seek judicial review of this decision and order of the board, pursuant to Iowa Code section 17A.19.

**BEFORE THE BOARD OF PHARMACY STATE OF IOWA**

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**IN THE MATTER OF THE STIPULATION AND CONSENT ORDER AGAINST  
MICHAEL J. CHRISTOFFERSEN, R.Ph., RESPONDENT**

**2009-21**

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**TERMINATION ORDER**

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**DATE: October 10, 2011**

1. On September 24, 2009, a Findings of Fact, Conclusions of Law, and Order was issued by the Iowa Board of Pharmacy placing the license to practice pharmacy, number 19260 issued to Michael J. Christoffersen on September 17, 1999, on probation for a period of two years under certain terms and conditions.

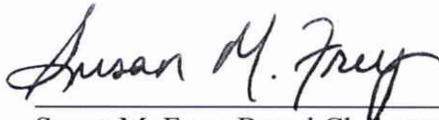
2. Respondent has successfully completed the probation as directed.

3. The Board directed that the probation placed upon the Respondent's license to practice pharmacy should be terminated.

**IT IS HEREBY ORDERED:**

That the probation placed upon the Respondent's license to practice pharmacy is terminated, and the license is returned to its full privileges free and clear of all restrictions.

**IOWA BOARD OF PHARAMCY**



Susan M. Frey, Board Chairperson  
400 SW 8<sup>th</sup> Street, Suite E  
Des Moines, Iowa 50309-4688