

BEFORE THE IOWA BOARD OF PHARMACY

Re:	)	Case No. 2012-71
Pharmacist License of)	
CORY J. ERNST	)	STATEMENT OF CHARGES
License No. 20122,)	
Respondent.)	

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

1. He is the Executive Director for the Iowa Board of Pharmacy (hereinafter, "Board") 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 (2011).
3. On December 21, 2004, the Board issued Cory J. Ernst ("Respondent"), by license transfer, a license to engage in the practice of pharmacy as evidenced by license number 20122, 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, 2012.
5. Respondent's most recent address of record is 1008 14th Street Southeast, Altoona, Iowa 50009.
6. At all times material to this statement of charges, Respondent was employed as the pharmacist in charge at the Hy-Vee Pharmacy in Knoxville, Iowa.

A. CHARGES

COUNT I – LACK OF PROFESSIONAL COMPETENCY

Respondent is charged under Iowa Code § 155A.12(1) (2011) and 657 Iowa Administrative Code § 36.1(4)(b) with lack of professional competency as demonstrated by Respondent's (a) substantial deviation from the standards of learning and skill ordinarily possessed and applied by other Iowa pharmacists, (b) failure to exercise in a substantial respect that degree of care which is ordinarily exercised by an Iowa pharmacist and (c) willful and repeated departures from, and a failure to conform to, the minimal standard and acceptable and prevailing practice of pharmacy in the state of Iowa.

COUNT II – INABILITY TO PRACTICE DUE TO CHEMICAL ABUSE

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) (2011) and 657 Iowa Administrative Code §§ 36.1(4)(d) and 36.1(4)(m).

COUNT III – UNLAWFUL POSSESSION OF PRESCRIPTION DRUGS

Respondent is charged with unlawful possession and use of prescription drugs in violation of Iowa Code §§ 155A.12(1), 155A.21 and 155A.23(11) (2011) and 657 Iowa Administrative Code §§ 36.1(4)(j) and 36.1(4)(u).

COUNT IV – ILLEGAL DISTRIBUTION OF DRUGS

Respondent is charged with distribution of drugs for other than lawful purposes in violation of Iowa Code §§ 155A.12(1) and 155A.23(17) (2011) and 657 Iowa Administrative Code § 36.1(4)(h), specifically, diversion and distribution of drugs to himself in the absence of a prescription.

COUNT V – VIOLATION OF CONTROLLED SUBSTANCES LAW

Respondent is charged with violating laws relating to controlled substances in violation of Iowa Code §§ 124.403(c) and 155A.12(5) (2011), and 657 Iowa Administrative Code §§ 36.1(4)(h) and 36.1(4)(j).

B. CIRCUMSTANCES

An investigation was completed April 27, 2012, which revealed the following:

1. At all times material to this statement of charges, Respondent was employed as the pharmacist in charge at the Hy-Vee Pharmacy, Knoxville, Iowa.
2. On April 23, 2012, Respondent was arrested by the Prairie City, Iowa police and charged, among other things, with illegal possession of controlled substances with intent to deliver. At the time of his arrest, Respondent was in possession of 99 tablets of alprazolam, 57 tablets of lorazepam and 144 tablets of tramadol. Respondent did not have a prescription for any of the drugs in his possession.
3. An audit of the Hy-Vee pharmacy inventory, conducted by Hy-Vee shortly after Respondent's arrest, revealed shortages of 633 tablets of alprazolam, in various strengths. The pharmacy was also short 74 tablets of lorazepam.
4. Hy-Vee personnel also provided information regarding historic, unexplained shortages of hydrocodone.

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 27th day of June 2012, the Iowa Board of Pharmacy found probable cause to file this Statement of Charges and to order a hearing in this case.


SUSAN M. FREY, 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, Iowa

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BEFORE THE IOWA BOARD OF PHARMACY

IN THE MATTER OF:)	Case No. 2012-71
Pharmacist License of)	
CORY J. ERNST,	)	STIPULATION
Pharmacist No. 20122	)	AND
Respondent	)	CONSENT ORDER

Pursuant to Iowa Code §§ 17A.10 and 272C.3(4) (2011), the Iowa Board of Pharmacy and Cory Ernst (hereinafter, "Respondent"), enter into the following Stipulation and Consent Order settling a licensee disciplinary proceeding currently pending before the Board.

Allegations contained in Statements of Charges against Respondent shall be resolved without proceeding to hearing, as the Board and Respondent stipulate as follows:

1. Respondent was issued a license, by license transfer, to engage in the practice of pharmacy as evidenced by license number 20122, subject to the laws of the State of Iowa and the rules of the Board.
2. The Iowa Pharmacist License issued to and held by Respondent is active and current until June 30, 2014.
3. Respondent was, at all times material to the Statements of Charges, employed as the pharmacist in charge at the Hy-Vee Pharmacy in Knoxville, Iowa.
4. A Statement of Charges was filed against Respondent by the Board on June 27, 2012.
5. The Board has jurisdiction over the parties and jurisdiction over the subject matter of these proceedings.
6. Respondent has chosen not to contest the allegations set forth in the

Statements of Charges and acknowledges that the allegations, if proven in a contested case proceeding, would constitute grounds for the discipline described herein.

7. On the date of the Board's approval of this Stipulation and Consent Order, Respondent's license shall be suspended indefinitely. Suspension of Respondent's license may be terminated only at such time as Respondent:

a. Obtains a complete physical and mental health evaluation—including a substance abuse evaluation—from a physician/treatment provider pre-approved by the Board.

b. Delivers to the Board a written, fully documented, and current physical and mental health evaluation—including a substance abuse evaluation—of Respondent which concludes that Respondent is mentally and physically fit to practice pharmacy. Any conclusion that the Respondent is fit to return to *the practice of pharmacy* will include an assessment of Respondent's ability to cope with the presence of controlled substances in the pharmacy setting.

c. Permits the Board complete access to Respondent's medical records, including records of substance abuse evaluation and treatment.

8. At such time as Respondent is able to deliver to the Board a written, fully documented, and current physical and mental health evaluation, including a substance abuse evaluation, which concludes that Respondent is mentally and physically fit to *practice pharmacy*, Respondent may petition the Board for (a) termination of the suspension of Respondent's license and (b) commencement of a period of probation.

9. In the event the Board determines that Respondent's license suspension should be terminated, Respondent's license to practice pharmacy shall be placed on

probation. The terms of probation shall include, but not be limited to, the following:

- a. Respondent shall agree to comply with the terms of probation.
- b. The period of probation shall be five (5) years provided, however, that only those time periods during which Respondent is employed as a pharmacist shall count toward exhaustion of the probationary term.
- c. Respondent shall inform the Board, in writing, of any change of home address, place of employment, home telephone number, or work telephone number, within ten (10) days of such a change.
- d. Respondent shall report to the Board quarterly, in writing. The report shall include Respondent's place of employment, current address, *Respondent's most recent efforts to implement the provisions of this Stipulation and Consent Order, by date*, and any further information deemed necessary by the Board from time to time.
- e. Respondent shall notify all employers and prospective employers (no later than at the time of an employment interview), including any pharmacist-in-charge, of the resolution of this case and the terms, conditions and restrictions imposed on Respondent by this Stipulation and Consent Order.
- f. Within thirty (30) days after approval of this Stipulation and Consent Order by the Board, and within fifteen (15) days of undertaking new employment as a pharmacist, Respondent shall cause his pharmacy employer, and any pharmacist-in-charge he works under, to report to the Board in writing acknowledging that the employer and the pharmacist-in-charge have read this document and understand it.

g. Respondent shall appear informally before the Board, upon the request of the Board, for the purpose of reviewing his performance as a pharmacist during Respondent's probationary period. Respondent shall be given reasonable notice of the date, time, and place for the appearances.

h. Respondent shall obey all federal and state laws, rules, and regulations related to the practice of pharmacy.

i. Respondent shall not possess or use any controlled substance or prescription drug in any form unless the controlled substance or prescription drug has been authorized and prescribed for Respondent by a licensed, treating physician or other qualified treating health care provider. Respondent shall inform any treating physician or other treating health care provider of her medical history, including any history of chemical dependency.

j. Respondent shall provide witnessed blood, hair or urine specimens on demand by the Board or its agents. The specimens shall be used for alcohol and drug screening, and to verify Respondent's compliance with this Stipulation and Consent Order and any drug therapy ordered by Respondent's physician or treatment provider. All costs related to the analysis of such specimens shall be paid by Respondent.

k. To facilitate performance of the preceding paragraph, Respondent shall report to and provide a specimen to any healthcare provider specified by the Board—said healthcare provider to be located in reasonable proximity to Respondent—within 24 hours after notice from the Board requesting that Respondent provide a specimen. Respondent agrees to cooperate with the Board

in establishing a specimen testing program through FirstLab, and hereby consents to disclosure to the Board, by FirstLab or any other testing facility, of all medical information, including test results, generated by Respondent's contact with the facility.

l. Respondent shall promptly provide, upon request of an agent of the Board, copies of or access to all his medical records.

m. If, as a result of the physical and mental health examinations of Respondent, Respondent's physician/treatment provider recommends a substance abuse treatment program, Respondent shall comply with such recommendations. In the event Respondent is participating in a substance abuse treatment program, Respondent's physician/treatment provider shall submit quarterly reports to the Board documenting Respondent's compliance with the treatment program.

n. Respondent shall not supervise any registered pharmacist-intern and shall not perform any of the duties of a pharmacy preceptor.

o. Such other reasonable terms as the Board may wish to impose as a result of (i) findings that Respondent is chemically dependant, (ii) the length of time Respondent's license is suspended pursuant to paragraph 8 above or (iii) the amount or nature of chemical dependency treatment Respondent must participate in as directed by her physician/treatment provider. If Respondent is found to be chemically dependent, Respondent shall participate in the Iowa Pharmacy Recovery Network (IPRN) program, under the direct support of a pharmacist advocate.

10. Should Respondent violate or fail to comply with any of the terms and conditions of this Stipulation and Consent Order, the Board may initiate action to revoke or suspend Respondent's Iowa pharmacist license or to impose other licensee discipline as authorized by Iowa Code chapters 272C and 155A (2011) and Iowa Administrative Code 657 chapter 36.

11. This Stipulation and Consent Order is the resolution of a contested case. By entering into this Stipulation and Consent Order, Respondent waives all rights to a contested case hearing on the allegations contained in the Statement of Charges, and waives any objections to this Stipulation and Consent Order.

12. The State's legal counsel may present this Stipulation and Consent Order to the Board *ex parte*.

13. This Stipulation and Consent Order is subject to approval by a majority of the full Board. If the Board fails to approve this settlement, it shall be of no force or effect to either the Board or Respondent. If the Board approves this Stipulation and Consent Order, it shall be the full and final resolution of this matter.

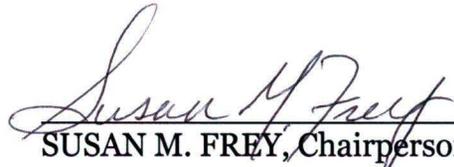
14. The Board's approval of this Stipulation and Consent Order shall constitute a FINAL ORDER of the Board.

This Stipulation and Consent Order is voluntarily submitted by Respondent to the Board for its consideration on the 21st day of August 2012.



CORY ERNST, R.Ph.
Respondent

This Stipulation and Consent Order is accepted by the Iowa Board of Pharmacy on the 29th day of August 2012.



SUSAN M. FREY, Chairperson
Iowa Board of Pharmacy
400 SW Eighth Street, Suite E
Des Moines, Iowa 50309-4688

cc: Meghan Gavin
Assistant Attorney General
Office of the Attorney General
Hoover State Office Building
Des Moines, Iowa 50319

BEFORE THE IOWA BOARD OF PHARMACY

IN THE MATTER OF THE)	
REQUEST FOR REINSTATEMENT	)	CASE NO: 2012-71
OF PHARMACIST:	)	DIA NO: 13PHB001
)	
COREY ERNST	)	FINDINGS OF FACT,
License No. 20122	)	CONCLUSIONS OF LAW,
Respondent	)	DECISION AND ORDER

On January 15, 2013, a hearing was held before the Iowa Board of Pharmacy (Board) on the reinstatement application filed by Corey Ernst (Respondent). The following members of the Board presided at the hearing: Susan Frey, Chairperson; Edward Maier; Edward McKenna; James Miller; DeeAnn Wedemeyer Oleson, and LaDonna Gratias. Respondent appeared and was self-represented. Assistant Attorney General Meghan Gavin represented the state. Administrative Law Judge Margaret LaMarche assisted the Board in conducting the hearing. The hearing was closed to the public, pursuant to Iowa Code section 272C.6(1)(2011) and 657 IAC 36.13(3), and was recorded by a certified court reporter. After hearing the testimony and examining the exhibits, the Board convened in closed executive session, pursuant to Iowa Code section 21.5(1)(f), to deliberate its decision. The administrative law judge was instructed to prepare the written decision for Board approval, in conformance with the Board's deliberations.

THE RECORD

The record includes Respondent's testimony, State Exhibits 1-12 (See Exhibit Index for description), and Respondent Exhibit A.

FINDINGS OF FACT

1. Respondent has been a practicing pharmacist since 1998. Respondent has been licensed to practice pharmacy in Iowa (license number 20122) since December 21, 2004. (Respondent testimony; State Exhibits 2, 5)
2. In April 2012, Respondent was employed as the pharmacist-in-charge of the Hy-Vee Pharmacy in Knoxville, Iowa. On April 23, 2012, Respondent was stopped by the Prairie City Police on suspicion of Operating While Intoxicated while he was driving home from work. Respondent failed all of the field sobriety tests, but his preliminary

breath test for alcohol registered 0.0. Respondent was arrested and charged with two counts of Possession With Intent to Deliver Controlled Substances, two counts of Failure to Affix Drug Tax Stamp, and one count of Illegal Possession of Prescription Drugs. At the time of his arrest, Respondent was in possession of 99 tablets of alprazolam, 57 tablets of lorazepam, and 144 tablets of tramadol. Respondent did not have a prescription for any of these drugs. Respondent provided a urine specimen which tested positive for alprazolam and alpha-hydroxyalprazolam, which is a metabolite of alprazolam. (State Exhibits 2, 3, 4)

3. The Knoxville Hy-Vee Pharmacy was audited shortly after Respondent's arrest. The audit revealed shortages of 633 tablets of alprazolam, in various strengths, and 74 tablets of lorazepam. Respondent made no admissions but resigned from his position as pharmacist-in-charge following his arrest and this audit. (State Exhibit 2)

4. On June 27, 2012, the Board charged Respondent with lack of professional competency, inability to practice pharmacy with reasonable skill and safety by reason of substance abuse, unlawful possession of prescription drugs, illegal distribution of drugs, and violation of controlled substances laws. (State Exhibit 5)

On August 29, 2012, the Board approved a Stipulation and Consent Order that indefinitely suspended Respondent's license. The Stipulation and Consent Order provided that Respondent's suspension could be terminated only at such time as Respondent:

- a. Obtains a complete physical and mental health evaluation- including a substance abuse evaluation- from a physician/treatment provider pre-approved by the Board.
- b. Delivers to the Board a written, fully documented, and current physical and mental health evaluation-including a substance abuse evaluation- which concludes that Respondent is fit to practice pharmacy. Any conclusion that the Respondent is fit to return to the practice of pharmacy will include an assessment of Respondent's ability to cope with the presence of controlled substances in the pharmacy setting; and
- c. Permits the Board complete access to Respondent's medical records, including records of substance abuse evaluation and treatment.

The Settlement Agreement and Order also provided that if Respondent's license was reinstated, it would be placed on probation for five years, subject to terms of probation. The Settlement Agreement and Order included a non-exclusive list of probation conditions that would be imposed if Respondent's license was reinstated. (State Exhibit 6)

5. Respondent's criminal charges had not yet been resolved when he signed the Stipulation and Order. In October 2012, Respondent was convicted of Operating While Intoxicated (OWI). The felony drug charges against Respondent were dismissed, and he pled guilty to a misdemeanor drug possession. Respondent was granted a deferred judgment on the misdemeanor and is currently on probation. He is required to maintain contact with his probation officer and to abstain from the use of alcoholic beverages and any drugs for which he does not have a valid prescription. Respondent is subject to random drug testing by his probation officer. (Respondent testimony; State Exhibit 12)

6. At hearing, Respondent testified that he first began abusing prescription drugs in December 2008. He completed treatment at Powell Chemical Dependency Center in April or May 2010 and then maintained his sobriety for thirteen months. Respondent relapsed in June 2011. He attributes his relapse to increasing stress at work and "weakness." (Respondent testimony)

Respondent testified that after his arrest in 2012, he returned to Powell Chemical Dependency Center for evaluation and treatment. Respondent reports that he participated in outpatient treatment at Powell from mid-May to mid-June 2012. During this time he attended outpatient treatment 8 hours a day, Monday-Friday. Following outpatient treatment, Respondent reports that he attended aftercare meetings approximately one hour a week for eight weeks. The Board has not received any records or reports from Powell concerning Respondent's substance abuse evaluation or treatment. Respondent testified that he filled out a release and assumed that Powell would send the records to the Board. (Respondent testimony)

7. Respondent reports that he had been attending an Alcoholics Anonymous (AA) meeting in Altoona before he got his driver's license. For the two weeks prior to his reinstatement hearing, Respondent attended a Smart Recovery meeting in Des Moines. Respondent explained that Smart Recovery meetings are similar to AA but are more secular and less religious in nature. Respondent did not submit any verification of his

attendance at these support recovery meetings (Respondent testimony; Respondent Exhibit A)

Respondent also testified that he met with an advocate from the Iowa Pharmacist's Recovery Network (IPRN) in January 2013 and has obtained an IPRN contract. Respondent previously joined IPRN in 2010 but never committed to it. (Respondent testimony)

8. Respondent was seen by J. Patrick Bertroche, D.O. on November 28, 2012 for an initial psychiatric evaluation. Dr. Bertroche provided a letter to the Board verifying that he evaluated Respondent on that date. The letter provided Dr. Bertroche's diagnoses of Respondent and his recommendations to help Respondent minimize the risk of relapse. Dr. Bertroche's letter states that Respondent could return to work full-time as long as he complies with the following criteria:

- Continues with medication checkups;
- Follows through with his medication regimen to ensure that his ADHD, depression, and anxiety are manageable;
- Undergoes therapy to address his past substance abuse and to teach him the coping skills needed to manage his daily life and work stressors.

(State Exhibit 7)

On December 14, 2012, the Board responded to Dr. Bertroche and requested a more fully documented mental health evaluation. On January 7, 2013, Dr. Bertroche provided additional documentation and recommendations to the Board. Dr. Bertroche recommended that Respondent:

- Submit for physical examination by his primary care provider, Dr. Hepplewhite;
- Present himself for random urinalysis (2-4 times a month) through the Board, his employer, or a family practitioner;
- Attend a weekly substance abuse recovery program that addresses narcotic/substance abuse for a minimum of three months;
- Attend weekly therapy sessions for four weeks that address his issues and stressors. After four weeks the therapist should reevaluate the frequency of the sessions;

- Have some employment restrictions, including that he not hold a management position, not be left unattended in the pharmacy area, not hold keys to the pharmacy, and inform future employers of his opiate problem; and
- Regularly follow up with Dr. Bertroche to address his progress and monitor his medication.

It was Dr. Bertroche's opinion that Respondent should be able to return to the practice of pharmacy with appropriate education, close monitoring, and employment restrictions. (State Exhibits 9, 10)

9. Respondent testified that he has begun receiving therapy through Erica A. Krolak, LMHC, NCC, who is an associate of Dr. Bertroche. Respondent testified that as of the date of the hearing, he has seen Ms. Krolak for a total of four weekly therapy sessions. Respondent did not submit any documentation or verification of his therapy sessions with Ms. Krolak. (Respondent testimony; Exhibit A)

10. On December 5, 2012, the Board received a letter from Dr. Daniel Hepplewhite, was addressed "To whom it may concern." In this letter, which was dated November 13, 2012, Dr. Hepplewhite wrote that:

- he had provided care to Respondent since February 2008;
- Respondent told him about his problem with narcotics about two years earlier and also told him that he had voluntarily requested help from the Board of Pharmacy; and
- Respondent told him about his relapse earlier in 2012.

Dr. Hepplewhite offered to help in Respondent's recovery efforts. (State Exhibit 8)

On January 8, 2013, Dr. Hepplewhite conducted a physical examination of Respondent and provided a written evaluation report to the Board. In his report, Dr. Hepplewhite concluded that Respondent is "physically able to work as a pharmacist." (State Exhibit 11)

11. Respondent admits that he was impaired while working as a pharmacist, which he compared to being like a "high functioning alcoholic." He believed his relapse was caused by his increasing work stress due to his management responsibilities and a new pharmacy computer system. Respondent testified that he is not drinking alcohol or

taking any mood altering substances at this time. Respondent reports that he has a strong support system of family and friends who are helping him stay drug free. Respondent denied that he has any drug cravings at this time and feels able to return to the practice of pharmacy. Respondent agrees that he should not be in a pharmacy management position. (Respondent testimony; Respondent Exhibit A)

CONCLUSIONS OF LAW

657 Iowa Administrative Code 36.13 provides, in relevant part:

657-36.13(17A,124B,147,155A,272C) Reinstatement. Any person whose license to practice pharmacy...has been revoked or suspended shall meet the following eligibility requirements for reinstatement:

36.13(1) Prerequisites. The individual shall satisfy all terms of the order of revocation or suspension or court proceedings as they apply to that revocation or suspension. If the order of revocation or suspension did not establish terms or conditions upon which reinstatement might occur, or if the license...was voluntarily surrendered, an initial application for reinstatement may not be made until one year has elapsed from the date of the board's order or the date of voluntary surrender.

...

36.13(3) Proceedings. The respondent shall initiate all proceedings for reinstatement by filing with the board an application for reinstatement of the license...Such application shall be docketed in the original case in which the license, registration, or permit was revoked, suspended, or relinquished. All proceedings upon petition for reinstatement, including all matters preliminary and ancillary thereto, shall be subject to the same rules of procedure as other cases before the board...

36.13(4) Burden of Proof. An application for reinstatement shall allege facts which, if established, will be sufficient to enable the board to determine that the basis for the revocation or suspension no longer exists and that it will be in the public interest for the license... to be reinstated. The burden of proof to establish such facts shall be on the respondent.

A person seeking reinstatement must establish that they have satisfied all of the terms of the order suspending or revoking the license. In addition, the person must present

persuasive evidence that they have fully addressed the problems leading to the suspension or revocation of their license and that it is in the public interest for the license to be reinstated.

Respondent has failed to satisfy all of the terms of the Stipulation and Order that indefinitely suspended his license. Respondent has not provided the Board with a written substance abuse evaluation report and has not provided any documentation of treatment or of the treatment program's recommendations for aftercare. In addition, Respondent has not submitted an evaluation or assessment from a substance abuse professional stating that he is currently fit to return to the practice of pharmacy and to cope with the presence of controlled substances in the pharmacy. Under the terms of the Stipulation and Order, Respondent was responsible for delivering the required documentation to the Board. Respondent's testimony is an inadequate substitute for the required documentation.

Respondent has also failed to persuade the Board that he has fully addressed the problems leading to the indefinite suspension of his license. Respondent has not provided the Board with any verification or documentation of his current sobriety or his attendance at support recovery group meetings. Respondent has not provided any documentation of his therapy for personal issues. Given Respondent's prior relapse after a 13 month period of sobriety and based on his demeanor and testimony at hearing, the Board was not persuaded that Respondent's recovery is sufficiently stable for reinstatement to be in his own interest or in the public interest.

DECISION AND ORDER

IT IS THEREFORE ORDERED that the application for reinstatement filed by Respondent Corey Ernst is hereby DENIED.

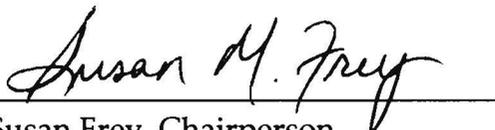
IT IS FURTHER ORDERED that Respondent shall not file another reinstatement application for a minimum period of four (4) months. Prior to filing another reinstatement application, Respondent shall:

- Submit a substance abuse evaluation report from Powell Chemical Dependency Center. Respondent shall also submit documentation of his treatment and a discharge summary containing any recommendations for aftercare. The Powell evaluation report shall address whether Respondent is currently mentally and physically fit to practice pharmacy and shall include an assessment of

Respondent's ability to cope with the presence of controlled substances in the pharmacy setting;

- Continue to attend weekly substance abuse recovery meetings and shall maintain documentation of his attendance;
- Continue to meet with his mental health counselor/therapist at the frequency recommended by the counselor;
- Continue participation in IPRN and provide the Board with a letter concerning his progress; and
- Participate in alcohol and drug screening by establishing a specimen testing program through FirstLab. Respondent is responsible for all costs associated with the alcohol and drug screening and shall sign all necessary releases to permit FirstLab to disclose medical information, including test results, to the Board.

Dated this 30th day of January, 2013.



Susan Frey, Chairperson
Iowa Board of Pharmacy

cc: Meghan Gavin, Assistant Attorney General

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 IOWA BOARD OF PHARMACY

IN THE MATTER OF THE)	
REHEARING REQUEST FILED BY	)	CASE NO: 2012-71
PHARMACIST:	)	DIA NO: 13PHB001
)	
COREY ERNST	)	BOARD RULING DENYING
License No. 20122	)	REQUEST FOR REHEARING
Respondent)	

On January 30, 2013, the Iowa Board of Pharmacy (Board) issued Findings of Fact, Conclusions of Law, Decision and Order denying the reinstatement application filed by Corey Ernst (Respondent). The Decision and Order required Respondent to wait a minimum of four (4) months before filing another reinstatement application. The Decision and Order also established certain conditions that Respondent must meet prior to filing another reinstatement application.

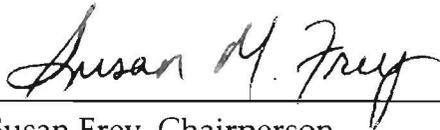
On February 5, 2013, Respondent sent an email to the Board's Executive Director requesting an appeal of the decision to deny his reinstatement. The Board's Executive Director issued a Notice of Hearing and placed Respondent's rehearing request on the Board's agenda for March 12, 2013. The following members of the Board were present and considered Respondent's request for rehearing: Susan Frey, Chairperson; Edward Maier; Edward McKenna; James Miller; DeeAnn Wedemeyer Oleson; Margaret Whitworth; and LaDonna Gratias. Respondent appeared and was self-represented. Assistant Attorney General Meghan Gavin represented the state. Administrative Law Judge Margaret LaMarche assisted the Board in conducting the hearing, which was closed to the public, pursuant to Iowa Code section 272C.6(1)(2013) and 657 IAC 36.13(3).

Respondent asked to present additional evidence to support his reinstatement request. Some documents had been provided to the Board prior to the meeting, and additional exhibits were marked at the time of Respondent's appearance. The state objected to any additional evidence being taken by the Board and urged the Board to deny the rehearing request. Prior to taking any additional evidence, the Board discussed Respondent's rehearing request and determined that it was unwilling to reconsider its January 30, 2013 Decision and Order. Respondent was advised that he could reapply for reinstatement in accordance with the terms and conditions established in that Decision and Order. After returning to open session, the Board unanimously approved a motion denying Respondent's rehearing request.

DECISION AND ORDER

IT IS THEREFORE ORDERED that the rehearing request filed by Respondent Corey Ernst is hereby DENIED.

Dated this 3rd day of April, 2013.

A handwritten signature in cursive script that reads "Susan M. Frey". The signature is written in black ink and is positioned above a horizontal line.

Susan Frey, Chairperson
Iowa Board of Pharmacy

cc: Meghan Gavin, Assistant Attorney General

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 IOWA BOARD OF PHARMACY

RE:	)	Case No. 2012-71
	)	DIA No: 11PHB021
Pharmacist License of)	
Cory John Ernst,	)	FINDINGS OF FACT,
License No. 20122,	)	CONCLUSIONS OF LAW,
Respondent	)	DECISION AND ORDER

On August 21, 2012, the Iowa Board of Pharmacy (the Board) indefinitely suspended the pharmacy license held by respondent Cory Ernst pursuant to a stipulation and consent order. On or around May 31, 2013, respondent filed a request for reinstatement of his license. The case heard at the Board's headquarters on June 25, 2013. The following board members were present for the hearing: Susan Frey, LaDonna Gratias, Edward Maier, Edward McKenna, James Miller, Sharon Meyer, and Judith Trumpy. Jeffrey Farrell, an administrative law judge from the Iowa Department of Inspections and Appeals, assisted the board. Meghan Gavin, an assistant attorney general, represented the public interest. The hearing was held confidentially pursuant to the request of the licensee.¹

THE RECORD

The State's exhibits 1-17 were admitted. Respondent's exhibits A-D were admitted. Respondent testified at the hearing.

FINDINGS OF FACT

Background: Respondent has been a practicing pharmacist since 1998. He started working in Kansas, and moved back to his home state of Iowa in 2005. He has served as the pharmacist in charge in multiple retail pharmacies since 2003. (Respondent testimony).

In 2012, respondent was working as the pharmacist in charge at Hy-Vee in Knoxville, Iowa. On April 23, 2012, respondent was stopped by law enforcement on the way home from work on suspicion of drunk driving. He failed all field sobriety tests, but tested 0.0 on his preliminary breath test. Respondent was arrested, and officer searched the

¹ See Iowa Code section 272C.6(1).

car to find 99 tablets of alprazolam, 57 tablets of lorazepam, and 144 tablets of tramadol. Respondent provided a urine specimen that tested positive for alprazolam and a metabolite of alprazolam. Respondent did not have a prescription for any of the drugs found in the car. Officers charged respondent with a number of drug-related offenses relating to the drugs found in the car. (Exhibits 2, 12).

On or around April 25, 2012, an investigator from the Board contacted the Knoxville Hy-Vee and asked for a physical count of alprazolam and lorazepam. The count revealed shortage of 633 tablets of alprazolam and 74 tablets of lorazepam. (Exhibits 2, 12).

On June 27, 2012, the Board charged respondent with lack of professional competency, inability to practice pharmacy with reasonable skill and safety by reason of substance abuse, unlawful possession of prescription drugs, illegal distribution of drugs, and violation of controlled substances laws. On August 29, 2012, the Board approved a stipulation and consent order that indefinitely suspended respondent's license. The order provided that respondent's suspension could only be terminated after he completed the following conditions:

- a. Obtains a complete physical and mental health evaluation including a substance abuse evaluation from a physician/treatment provider pre-approved by the Board.
- b. Delivers to the Board a written, fully documented, and current physical and mental health evaluation-including a substance abuse evaluation which concludes that Respondent is fit to practice pharmacy. Any conclusion that the Respondent is fit to return to the practice of pharmacy will include an assessment of Respondent's ability to cope with the presence of controlled substances in the pharmacy setting; and
- c. Permits the Board complete access to Respondent's medical records, including records of substance abuse evaluation and treatment.

The Settlement Agreement and Order also provided that if Respondent's license was reinstated, it would be placed on probation for five years, subject to terms of probation. The Settlement Agreement and Order included a non-exclusive list of probation conditions that would be imposed if Respondent's license was reinstated. (Exhibits 5-6).

In October of 2012, respondent resolved his criminal charges through a plea bargain. He pled guilty to operating while intoxicated and misdemeanor drug possession. The court granted a deferred judgment and placed him on probation with conditions including abstaining alcohol and any drugs unless he has a valid prescription. He was also subject to random drug testing. (Exhibit 12).

First request for reinstatement: Respondent filed an application for reinstatement after his criminal charges were resolved. The Board held a hearing on January 15, 2013, and issued a written decision on January 30, 2013. The decision speaks for itself and will not be repeated verbatim here, but some summary is helpful. (Exhibits 12).

Respondent testified at the hearing that he first began abusing prescription drugs in December of 2008. He was admitted to Powell Chemical Dependency Center and completed treatment in April or May of 2010. He maintained sobriety for 13 months, but relapsed in June of 2011. He attributed his relapse to increasing stress at work and "weakness." (Exhibit 12).

Respondent returned to Powell to attend its outpatient program for approximately four weeks after his arrest in April of 2012. He then attended aftercare meetings for eight weeks. However, respondent did not provide a substance abuse evaluation or treatment report to the Board as required by the consent order. Respondent testified at the hearing that he signed a release and assumed that Powell would send it to the Board. Respondent testified that he had been attending Alcoholics Anonymous (AA) or Smart Recovery meetings, but did not submit to the Board verification of attendance.² (Exhibit 12).

Respondent also obtained mental health and physical evaluations. Dr. Patrick Bertroche diagnosed respondent with ADHD, depression, and anxiety. Dr. Bertroche stated that respondent should be able to return to the practice of pharmacy with appropriate education, close monitoring, and employment restrictions. Specifically, Dr. Bertroche recommended the following plan under which respondent could return to practice:

- Submit for physical examination by his primary care provider, Dr. Hepplewhite;

² Respondent described Smart Recovery as similar to AA, but less religious in nature.

- Present himself for random urinalysis (2-4 times a month) through the Board, his employer, or a family practitioner;
- Attend a weekly substance abuse recovery program that addresses narcotic/substance abuse for a minimum of three months;
- Attend weekly therapy sessions for four weeks that address his issues and stressors. After four weeks the therapist should reevaluate the frequency of the sessions;
- Have some employment restrictions, including that he not hold a management position, not be left unattended in the pharmacy area, not hold keys to the pharmacy, and inform future employers of his opiate problem; and
- Regularly follow up with Dr. Bertroche to address his progress and monitor his medication.

(Exhibit 12, referencing Exhibit 10).

Respondent testified that his work stress was mainly attributed to his management responsibilities and implementing a new pharmacy computer system. He admitted to being impaired while working as a pharmacist, and characterized himself as a "high functioning alcoholic." He testified he has stopped using any alcohol or mood-altering substances. He believes he has a strong support system of family and friends to help him remain drug-free. (Exhibit 12).

The Board denied the request for reinstatement due to respondent's failure to provide a written substance abuse evaluation report and recommendations for aftercare, and his failure to provide documentation of substance abuse treatment. Additionally, the Board found respondent failed to provide an evaluation or assessment from a substance abuse professional stating he was fit to return to the practice of pharmacy and cope with the presence of controlled substances at work. The Board also found that respondent had not proven that he had fully addressed the problems leading to the indefinite suspension, specifically including: a) verification of current sobriety or attendance at support recovery group meeting, and b) documentation of therapy for personal issues. The Board expressed its concern that only 13 months had passed since respondent's relapse, and did not appear "sufficiently stable" to be approved for reinstatement based on his demeanor and testimony at hearing. (Exhibit 12).

The Board ordered that respondent not file another application for reinstatement for at least four months from the date of that order. The Board stated that respondent shall perform each of the following prior to filing another application:

- Submit a substance abuse evaluation report from Powell Chemical Dependency Center. Respondent shall also submit documentation of his treatment and a discharge summary containing any recommendations for aftercare. The Powell evaluation report shall address whether Respondent is currently mentally and physically fit to practice pharmacy and shall include an assessment of Respondent's ability to cope with the presence of controlled substances in the pharmacy setting;
- Continue to attend weekly substance abuse recovery meetings and shall maintain documentation of his attendance;
- Continue to meet with his mental health counselor/therapist at the frequency recommended by the counselor;
- Continue participation in IPRN and provide the Board with a letter concerning his progress; and
- Participate in alcohol and drug screening by establishing a specimen testing program through FirstLab. Respondent is responsible for all costs associated with the alcohol and drug screening and shall sign all necessary releases to permit FirstLab to disclose medical information, including test results, to the Board. (Exhibit 12).

On February 5, 2013, respondent sent an email to the Board requesting an "appeal" of the Board's decision. The Board treated the request as a request for rehearing, and set it for hearing on March 12, 2013. Respondent sought to present additional evidence to support his request for rehearing. The Board denied that request, and otherwise denied the request to reopen the hearing. The Board noted that respondent could reapply for reinstatement in accord with terms and conditions established in that decision and order. (Exhibits 13-14).

Second request for reinstatement: On or around May 30, 2013, respondent filed his second application for reinstatement. He stated in his application that he had completed all conditions set by the Board, and would be delivering documentation to the Board by June 5, 2013. (Exhibit A).

At hearing, it became clear that the Board had not received all information required. The Board did not have copies of the substance abuse evaluation, treatment records, or discharge summary from Powell. Respondent testified during cross-examination that he thought it had been filed. He then asked to go to his car to get a copy. He had no hard copy in his car, so he asked to download a copy from his phone. He eventually

was able to print, through the help of Board staff, a copy of Powell's assessment and discharge summary. However, in light of the prior reinstatement hearing and the explicit instructions in the Board's last order, it was surprising to have to stop the hearing to print out basic documents that the Board had requested on multiple occasions. (Exhibits C-D; respondent testimony).

Powell's discharge summary stated that respondent met program requirements and completed the program. Powell recommended that respondent: a) attend continuing care and aftercare as scheduled, b) attend at least three 12-step meetings per week, c) work the 12-steps with a male sponsor, and d) socialize with sober people. Powell stated that respondent would likely maintain his recovery if he is sufficiently involved with recovery support groups and complies with pharmacy board stipulations. (Exhibit D).

Respondent testified that he has attended weekly substance abuse meetings. He initially went to AA, but switched to Smart Recovery because they are less religious. He went back to AA after he lost his driver's license and could not drive to Smart Recovery, but has since returned to Smart Recovery after regaining his license. He provided verification of weekly attendance with Smart Recovery, as well as regular attendance at meetings with the Iowa Pharmacy Recover Network (IPRN), from February 3, 2013 through June 2, 2013. Emily Dykstra of IPRN wrote a positive letter stating that respondent has been compliant with his contract and the terms of probation in his criminal case. She reported that respondent has been honest, open minded, and willing to participate in group meetings. (Respondent testimony; exhibit A).

Respondent has not failed any drug tests, but some concerns were raised. He is required to call the lab each morning to find out if he is required to test. Testing is only required occasionally, but respondent does not find out whether a test is required until the call is made. Respondent failed to call on three occasions. He did not have a compelling explanation as to any of the three missed calls. He testified that he has difficulty remembering to call in on Mondays after coming off a weekend (when no calls are required). He surmised that he missed two of the calls due to conflicts with work that he has picked up as a handyman. Ms. Dykstra stated in her letter that she does not believe that the missed calls reflect a relapse into drug use, but rather, a correctable lapse in judgment. (Exhibits A, 15-16; respondent testimony).

Respondent's therapist, Erica Krolak, provided a letter stating that respondent should be able to return to the practice of pharmacy with some guidelines. She stated that respondent should:

- Continue to meet with Dr. Bertroche for medication management;
- Present himself to his employer and/or the Board on a regular basis for random drug tests;
- Place restrictions on his employment to reduce stress, and thus reduce the risk of relapse;
- Continue to meet with Ms. Krokak for regular therapy as recommended.

Dr. Bertroche confirmed in a June 19, 2013 letter that respondent has been compliant with all prescribed medications attended all appointments. (Exhibits A-B).

At hearing, respondent appeared honest and willing to answer questions from the State's lawyer and the Board members. However, his presentation was plagued by the same demeanor and testimony problems that created doubt at the first reinstatement hearing. For instance, respondent's failure to ensure that all required documents were presented to the Board prior to his hearing was concerning. This is respondent's second application for reinstatement, and the failure to provide information was a basis for denying the first application. Respondent testified that his use of drugs resulted in part from stress at work, but his primary strategy for lowering stress was to avoid management responsibilities. The practice has other stressors, and it is unclear exactly how respondent will manage those. When asked why the Board should believe he will not relapse, he responded that there are more mechanisms to watch him (e.g. family, drug testing), as opposed to giving insight into his prior drug abuse. Respondent has failed to make calls required as part of his drug testing, and while IPRN does not believe respondent relapsed, it shows lapses in judgment. His explanations of these lapses were not convincing. (Respondent testimony).

Respondent's commitment to the practice was so uncertain based on his testimony that one Board member directly asked whether he still wanted to be a pharmacist. Respondent's immediate response was not a ringing endorsement of his application – he said that it is what he knows and he is not a good handyman. He did repeatedly state that he enjoys helping people as part of the practice, but his motivation for reinstatement appears directed toward wanting a more stable and higher paying job than serving the profession. There is nothing wrong with wanting to provide for one's

family, but it harder to demonstrate that past misconduct will not reoccur without a genuine commitment to the profession. (Respondent testimony).

Respondent stated he was agreeable to any of the terms that have been set out in prior Board orders or by professionals with whom he has worked. The only term he questioned was prohibiting him from holding the keys to the pharmacy, because that might be problematic for future employment. Respondent stated that part-time employment might be a good start, and he asked the Board to consider 8 hour increments as that would be a better fit for employers considering part-time help. (Respondent testimony).

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.³ 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.⁴ 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.⁵

After the Board suspends or revokes a license, it may consider an application for reinstatement.⁶ A person must meet all terms of the order that revoked or suspended the license. If the order did not set forth conditions, the person must wait at least one year before applying for reinstatement. The applicant has the burden of proving that the basis for the revocation or suspension no longer exists and that the public interest will be served by reinstatement.

³ Iowa Code section 155A.2.

⁴ Iowa Code section 272C.1(6)(q), 272C.3.

⁵ Iowa Code sections 155A.12, 155A.18, 272C.3(2).

⁶ 657 Iowa Administrative Code 36.13.

Discussion: Respondent has now completed the conditions set forth in prior Board orders. He presented letters from his psychiatrist, therapist, IPRN, and his treatment provider stating that he can return to the practice with conditions. There is no evidence he has abused drugs since his arrest in April of 2012. He completed treatment and followed aftercare requirements. He has complied with the terms of probation in his criminal case. He has not used alcohol. He has a wider support group than he did after first entering treatment. There are solid objective reasons to find that respondent is on the right track and will not suffer a second relapse if allowed to return to the practice of pharmacy.

On the other hand, respondent's history of abuse and relapse, as well as questions that continue to exist after two reinstatement application processes, show the need to take a cautious approach. The legislature has granted professional licensing boards a great deal of discretion to exercise their expertise when licensing applicants and those who practice in the profession.⁷ The practice of pharmacy is challenging and requires, among other things, organization, precision, and the ability to juggle multiple tasks at one time. The Board continues to have concerns with respondent's commitment to the profession, his ability to deal with job stress, and his capability to safely practice. Respondent cannot simply show that he is ready to return to practice because he has completed treatment and has letters of support from his providers. He must prove that the basis for the suspension no longer exists and his reentry into the practice will serve the public good.

After considerable thought and discussion, the Board agreed to allow respondent one more chance to prove he is capable of working in the profession, subject to a number of terms and conditions that are designed to protect the public welfare. Respondent should understand that his opportunity is purely by the grace of the Board and that the Board will be considering revocation of his license if there are any further drug-related offenses. The terms and conditions are based on those often used in cases involving drug abuse, as well as other terms suggested by his healthcare providers. The Board believes that respondent can safely practice through the imposition of these terms and conditions.

⁷ See *Al- Khattat v. Engineering & Land Surveying Examining Bd.*, 644 N.W.2d 18, 23 (Iowa 2002); *Cannon v. Board Of Psychology Examiners*, 2005 WL 2508536, 2 (Iowa App. 2005).

DECISION AND ORDER

Respondent's application for reinstatement of pharmacy license is hereby granted, subject to the terms and conditions set forth in this order. Respondent's license is placed on probation for a term of five years from the date of this order. Periods of time when Respondent is not employed as a pharmacist shall not count toward satisfaction of the five-year probationary period. Respondent's probation will be subject to the following terms and conditions:

- A. Respondent shall inform the Board, in writing, of any change of home address, employment status, place of employment, home telephone number or work telephone number, within ten days of such a change.
- B. Respondent shall file written, sworn quarterly reports with the Board attesting to his compliance with all the terms and conditions of the Board's 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 current place of employment, home address, home telephone number or work telephone number, and any further information deemed necessary by the Board from time to time.
- C. Respondent shall notify all prospective employers (no later than at the time of an employment interview), including any pharmacist-in-charge, of the terms, conditions, and restrictions imposed on respondent by this order.
- D. Within 15 days of undertaking new employment as a pharmacist, respondent shall cause his pharmacy employer, and any supervising pharmacist in charge, to report to the Board in writing acknowledging that the employer and pharmacist in charge have read this document and understand it.
- E. Respondent shall appear informally before the Board, upon request of the Board, for the purpose of reviewing his performance as a pharmacist during his probationary period. The Board shall give Respondent reasonable notice of the date, time, and place for such appearances.
- F. Respondent shall obey all federal and state laws and regulations related to the practice of pharmacy and the distribution of controlled substances.

G. Respondent shall not possess or use any controlled substance or prescription drug in any form unless the controlled substance or prescription drug has been authorized and prescribed for respondent by a licensed, treating physician or other qualified treating health care provider. Respondent shall inform any treating physician or other treating health care provider of his medical history, including any history of chemical dependency.

H. Respondent shall provide witnessed blood, hair or urine specimens on demand by the Board or its agents. The specimen shall be used for alcohol and drug screening, and to verify respondent's compliance with this order and any drug therapy ordered by respondent's physician or treatment provider. All costs related to the analysis of such specimens shall be paid by respondent.

I. To facilitate performance of the preceding paragraph, respondent shall report to and provide a specimen to any healthcare provider specified by the Board – said provider to be located in reasonable proximity to respondent – within 24 hours after notice from the board requesting that respondent provide a specimen. Respondent agrees to cooperate with the Board in establishing a specimen program through FirstLab, and hereby consents to disclosure to the Board, by FirstLab or any other testing facility, or all medial information including test results, generated by respondent's contact with the facility.

J. Respondent shall promptly provide, upon request of an agent of the Board, copies of or access to all his medical records.

K. If, as a result of the physical and mental health examinations of respondent, respondent's physician/treatment provider recommends a substance abuse treatment program, respondent shall comply with such recommendations. In the event respondent is participant in a substance abuse treatment program, respondent's physician/treatment provider shall submit quarterly reports to the board documenting respondent's compliance with the treatment program.

L. Respondent shall attend a weekly substance abuse recovery program such as Alcoholics Anonymous (AA) or Smart Recovery on a weekly basis or at the frequency recommended by his counselors. The chosen program must incorporate and address narcotics or substance abuse. Respondent shall obtain verification of his attendance and submit it with his quarterly written reports to the Board.

M. Respondent shall follow the recommendations of his physician and therapist to attend appointments and therapy sessions that specifically address the issues and stressors that led to substance abuse.

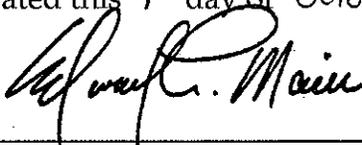
N. Respondent shall not work in a pharmacy more than 32 hours during any calendar week. Respondent shall verify his work hours and submit them with his quarterly written reports to the Board. After respondent has worked for six months as a pharmacist, he may file a written request with the Board to lift the 32 hour restriction. The request may be approved by the Board administrator or the administrator's designee.

O. Respondent shall not supervise any registered pharmacist-intern, certified pharmacy technician, or other person working or present in the pharmacy. Respondent shall not perform any of the duties of a pharmacy preceptor or pharmacist in charge.

P. Should Respondent violate or fail to comply with any of the terms or conditions of probation, the Board may initiate action to revoke or suspend Respondent's Iowa pharmacist license or to impose other licensee discipline as authorized by Iowa Code chapters 272C and 155A and 657 IAC 36.

Respondent is responsible for all costs of compliance with this decision and order. Additionally, as required by Iowa Code section 272C.6 and 657 IAC 36.18(2), Respondent shall pay \$75.00 for fees associated with conducting the disciplinary hearing. In addition, the executive secretary/director 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 (30) days of receipt of the bill.

Dated this 9th day of October, 2013.



Chairperson
Iowa Board of Pharmacy

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cc: Meghan Gavin, Assistant Attorney General

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 IOWA BOARD OF PHARMACY

RE:	)	Case No. 2012-71
)	
Pharmacist License of	)	Modification to
CORY JOHN ERNST,	)	Findings of Fact,
License No. 20122	)	Conclusions of Law,
Respondent.	)	Decision and Order

On October 9, 2013, the Iowa Board of Pharmacy (the Board) approved the Findings of Fact, Conclusions of Law, Decision and Order (Decision and Order), reinstating Respondent's Iowa pharmacist license, subject to the terms and conditions set forth in the Decision and Order. Respondent appeared before the Board on August 26, 2014, seeking a modification to the terms of the Decision and Order. Specifically, he sought changes to paragraphs "N" and "O" limiting number of hours Respondent can work per week and supervision of any registered pharmacist-intern, certified pharmacy technician, or other person working or present in the pharmacy.

IT IS HEREBY ORDERED that paragraph "N" is revised as follows:

N. Respondent shall not work in a pharmacy more than 32 hours during any calendar week, but under certain conditions such as vacations, may work up to 40 hours. Respondent shall verify his work hours and submit them with his quarterly written reports to the Board. After respondent has worked for six months as a pharmacist, he may file a written request with the Board to lift the 32 hour restriction. The request may be approved by the Board administrator or the administrator's designee.

IT IS ALSO ORDERED that paragraph "O" is revised as follows:

O. Respondent shall not supervise any registered pharmacist-intern. Respondent shall not perform any of the duties of a pharmacy preceptor or pharmacist in charge.

Dated this 27th day of August, 2014.



Susan M. Frey
Acting Chairperson, Iowa Board of Pharmacy

BEFORE THE IOWA BOARD OF PHARMACY

RE:	)	Case No. 2012-71
)	
Pharmacist License of	)	2 nd Modification to
CORY JOHN ERNST,	)	Findings of Fact,
License No. 20122	)	Conclusions of Law,
Respondent.	)	Decision and Order

On October 9, 2013, the Iowa Board of Pharmacy (the Board) approved the Findings of Fact, Conclusions of Law, Decision and Order (Decision and Order), reinstating Respondent's Iowa pharmacist license, subject to the terms and conditions set forth in the Decision and Order. Respondent appeared before the Board by phone on June 4, 2015, seeking a modification to the terms of the Decision and Order. Specifically, he sought changes to paragraphs "N" limiting number of hours Respondent can work per week.

IT IS HEREBY ORDERED that conditions of paragraph "N" are lifted.

Dated this 4th day of June, 2015.



Edward L. Maier
Chairperson, Iowa Board of Pharmacy