New Hampshire Board of Pharmacy

121 South Fruit Street, Suite 401
Concord, NH 03301-2412

Tel.: (603) 271-2350 • Fax: (603) 271-2856
Website: www.oplc.nh.gov/pharmacy

Facility Name	
Street Address	
City / State / Zip	
Email Address of Facility Contact	
Phone #	
Date of Last BOP Inspection	
Previous Issues Noted, Discipline, or Notice of Violation	
NHBOP License #:	
DEA Reg. #:	
Type of Facility:	❑ Manufacturer ❑ Wholesaler ❑ Distributor
Type(s)of Rx Products:	❑ Non-Controlled Drugs ❑ Controlled Drugs ❑ Rx Medical Devices ❑ Rx Medical Gases
Sells To:	❑ Physicians ❑ Dentists ❑ Veterinarians ❑ Podiatrists ❑ Pharmacies ❑ Hospitals ❑ Other:

A. FACILITY

	Compliant	Not Compliant
1. Facility of Suitable Size/Construction - *Ph 1001.01(e)(1)*	❑	❑
2. Zoned Commercial - *Ph 1001.01(e)(2)*	❑	❑
3. Law Enforcement Notified of Operation - *Ph 1001.01(e)(4)*	❑	❑
4. License Posted and Current	❑	❑
5. Adequate Light, Ventilation, Sanitation, Space - *Ph 1002.01*	❑	❑
6. Adequate Storage According to Mft Label – *Ph 1002.01(a)(4)*	❑	❑
7. Adequate Temperature	❑	❑
8. Ambient Temperature Logs: ❑ Manual ❑ Electronic	❑	❑
9. Number of Refrigerators/ Freezers:		

Manufacturer/Wholesaler – Inspection Form

A. FACILITY (Continued)

	Compliant	Not Compliant
1. Adequate Storage for Hazardous Drugs	❑	❑
2. Destruction of Hazardous Drugs Reverse Distributor:	❑	❑

B. SECURITY - GENERAL - *Ph 1001.01(e)*

	Compliant	Not Compliant
1. Alarm to 24-Hour Monitoring Service	❑	❑
2. Adequate Outside Lighting – *Ph 1001.01(e)(3)*	❑	❑
3. Employee Screening Program	❑	❑
• Records on File	❑	❑

C. INSPECTIONS BY OTHER OUTSIDE ENTITIES

1. By Whom / Dates:

D. RECORDKEEPING - GENERAL – *Ph 1002.04*

	Compliant	Not Compliant
1. Records of Receipt/Distribution	❑	❑
• Records: ❑ Onsite ❑ Central (If Central, Where):	❑	❑

E. NON-CONTROLLED DRUG AND/OR DEVICES RECORDS

	Compliant	Not Compliant
1. Two Years of Receipt Records	❑	❑
2. Two Years of Distribution Records	❑	❑
3. Controlled Drugs On Site? ** If Yes, Also Use C/S Form.*	**Yes ***	**No**
	❑	❑

F. WRITTEN POLICIES & PROCEDURES – *Ph 1002.06*

	Compliant	Not Compliant
1. Policies & Procedures Present	❑	❑
• Updated: Frequency:	❑	❑
• Accessible How ?	❑	❑
• Site Specific	❑	❑
2. Crisis / Intervention – *Ph 1002.06(a)*	❑	❑

SAMPLE

G. WRITTEN POLICIES & PROCEDURES (Continued)		
3. Correct Management of Inventory Errors – *Ph 1002.06(b)(1)* ❑ Returned ❑ Destroyed, How:	❑	❑
4. Shipping/Receiving – *Ph 1002.06(b)(3)*	❑	❑
5. Internal Security – *Ph 1002.03(c)*	❑	❑
6. Returned Goods – *Ph 710.11 & Ph 1002.07*	❑	❑
7. Recalls – *Ph 710.09 & Ph 1002.06*	❑	❑
• Manufacturer Voluntary – *Ph 1002.08(b)(1)*	❑	❑
• FDA (Other Gov't Agency) Directed *Ph 1002.08(b)(2)*	❑	❑
• Product Replacement – *Ph 1002.08(b)(3)*	❑	❑
8. Verification of Customer License	❑	❑
9. Track & Trace Capability	❑	❑
• Pertinent Auxiliary Labels – *Ph 601.15(a)(8)* *Verified ?*	❑	❑

Comments / Recommendations:

Comments / Recommendations (Continued):

The forgoing may not serve as a defense in any regulatory, civil or criminal proceeding.

Signature of Board of Pharmacy Inspector _____ Date _____

Signature of Clinic Representative _____ Date _____

My Signature acknowledges my awareness and understanding of all entries and notations made on this report and my receipt of a copy thereof. I also understand my responsibilities for corrective action as outlined above.

SAMPLE