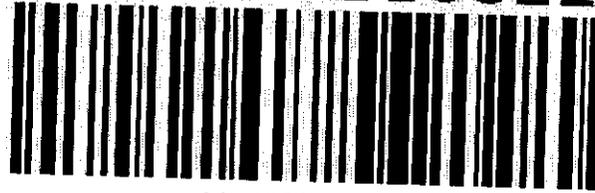
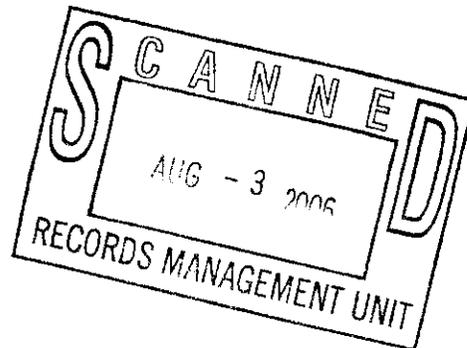


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location           Collection-389  
                      Order for  
summary            Surrender of  
                      License  
                      09/22/1999  
author              Donna Franklin  
expiration\_date    09/22/2064  
max\_versions      4  
title               Wojcik William  
                      Lic#28RI01747200  
document           Wojcik William  
                      Lic#28RI01747200  
keywords  
dsclass            Document  
description



#119

JOHN J. FARMER, JR.  
ATTORNEY GENERAL OF NEW JERSEY  
Division of Law - 5th Floor  
124 Halsey Street  
P.O. Box 45029  
Newark, New Jersey 07101

CERTIFIED TRUE COPY

FILED

SEP 22 1999

BOARD OF PHARMACY

By: Marianne W. Greenwald  
Deputy Attorney General  
Tel. (973) 648-4738

STATE OF NEW JERSEY  
DEPARTMENT OF LAW & PUBLIC SAFETY  
DIVISION OF CONSUMER AFFAIRS  
STATE BOARD OF PHARMACY

IN THE MATTER OF THE SUSPENSION	:	Administrative Action
OR REVOCATION OF THE LICENSE OF:	:	
	:	
WILLIAM WOJCIK, R.P.	:	ORDER FOR SURRENDER OF
	:	LICENSE
TO PRACTICE PHARMACY IN THE	:	
STATE OF NEW JERSEY	:	
<i>RI 17472</i>	:	

This matter was opened to the New Jersey State Board of Pharmacy upon receipt of information that on or about January 31, 1998, respondent had entered into a Consent Order with the Commission of Pharmacy in the State of Connecticut placing respondent's Connecticut license to practice pharmacy on probation for five (5) years with conditions, one of which was to provide a copy of that Order to all licensing Boards in jurisdictions where respondent held a pharmacy license. Not only did the Board receive no copy of the Order from respondent; further, respondent on his

1999 pharmacy license renewal in New Jersey answered, "no" to the question "[h]as any government agency instituted charges or action against you in any state since your last renewal". (Copies of Connecticut Order and renewal attached and made a part hereof).

It appearing that in lieu of a proceeding seeking to temporarily suspend respondent's license to practice pharmacy pursuant to N.J.S.A. 45:1-22, respondent, has voluntarily agreed to surrender his license to practice pharmacy and refrain from further practice of pharmacy pending a further action by the Board.

IT IS THEREFORE, ON THIS *22nd* DAY OF *Sept* 1999,

ORDERED AND AGREED, that the license of William Wojcik, R.P. to practice pharmacy in the State of New Jersey is hereby suspended, pending further order of the Board, and it is further

ORDERED AND AGREED, effective upon the execution of this Order by respondent, pending further order of the Board, respondent shall cease and desist from engaging in the practice of pharmacy including the following: respondent shall not handle, order, inventory, compound, count, fill, refill or dispense any drug; he shall not handle anything requiring a prescription including devices and medications; he shall not handle prescriptions; he shall not advise or consult with patients, and he is prohibited from being present within a prescription filing area of a pharmacy, and it is further,

**STATE OF CONNECTICUT**  
**BEFORE THE COMMISSION OF PHARMACY**

In the Matter of  
William J. Wojcik

Pharmacy File No. 96-11

Docket No. 98-356

Settlement Agreement Concerning Pharmacist

License of William J. Wojcik

*File  
Pharmacists*

This settlement agreement concerning William J. Wojcik, hereinafter referred to as Licensee, is entered into in accordance with Section 21a-8(8) of the Connecticut General Statutes.

PARAGRAPH ONE: Licensee is and has been the holder of Connecticut Pharmacist License No. 6922.

PARAGRAPH TWO: On December 3, 1996, the Commission of Pharmacy approved a Settlement Agreement which placed Licensee's pharmacist license on probation based upon the Licensee's diversion of the legend drugs Soma and Ibuprofen 800 mg for his personal use.

PARAGRAPH THREE: On May 7, 1997, the Commission of Pharmacy summarily suspended Licensee's pharmacist license based on the belief that he had violated the terms of his probation. Licensee acknowledges that he did violate his probation as indicated in his statement provided to the Department of Consumer Protection on May 29, 1998.

**RECEIVED**

**AUG 7 1998**

DCP DRUG CONTROL

**PARAGRAPH FOUR:** Upon the acceptance of this agreement by the Commission of Pharmacy the suspension of Licensee's Pharmacist License No. 6922 shall be immediately stayed provided the Licensee complies with Paragraphs Five through Sixteen of the Settlement Agreement. Licensee's Pharmacist License No. 6922 shall be placed on probationary status for five (5) years.

**PARAGRAPH FIVE:** Licensee must demonstrate to the satisfaction of the Commission of Pharmacy that he can practice pharmacy in a drug-free state. Accordingly, he shall include with this settlement agreement a report from his treating health care practitioner/substance abuse treatment program summarizing his treatment status and an executed release in favor of the Department of Consumer Protection authorizing the Department to obtain records directly from said health care practitioner/substance abuse treatment program and from any other health care provider who has treated Licensee.

**PARAGRAPH SIX:** Licensee shall continue a regularly scheduled treatment program for substance abuse, including alcohol. This substance abuse counseling shall be with David G. Jacob, CISW, CAC, of Stratford, Connecticut, or with another health care practitioner or substance abuse treatment program approved by the Department of Consumer Protection. Counseling shall be at regular intervals with the following as a minimum: once every two weeks for the first year, monthly for the second year, and quarterly for the final three years unless modified by the Commission of Pharmacy. In addition to the above counseling, Licensee shall attend self-help group treatment, such as 12 Step Meetings, a minimum of three times per week, with a minimum of two such

meetings each month being with a pharmacy recovery group approved by the Commission of Pharmacy.

**PARAGRAPH SEVEN:** Licensee shall have a continuing obligation to demonstrate to the satisfaction of the Commission of Pharmacy that he can practice pharmacy in a drug-free state. In accordance with said obligation, during his probation Licensee will submit, or cause to be submitted, to the Department of Consumer Protection quarterly reports by his treating health care practitioner or substance abuse treatment program. The first of these reports shall be provided three months after the effective date of this agreement, and the remainder shall be provided every three months thereafter. These reports shall include a record of the Licensee's attendance at treatment sessions, a list of any drugs prescribed for the Licensee by any health care practitioner, and a report on the Licensee's progress in treating his drug and/or alcohol dependency. Licensee shall also provide monthly to the Department of Consumer Protection a written statement indicating that he is attending self-help group treatment as provided in Paragraph Six; with the dates and locations of the meetings, and, in the case of pharmacy recovery groups, the signature of the chairperson of such groups.

**PARAGRAPH EIGHT:** Licensee shall submit to random urine and/or blood screens, at the Licensee's expense, which test for alcohol and controlled substances, including but not limited to synthetic narcotics, amphetamines, benzodiazepines, barbiturates and cocaine. Within 30 days of the effective date of this Agreement, Licensee shall provide to the Department of Consumer Protection the names of the health care provider which will be directing submission of the urine and/or blood screens and the

name of the testing laboratory. Within this time period, License shall also submit, or cause to be submitted, to the Department of Consumer Protection for its approval the method to be used in randomly choosing the drug screen collection dates. The method of collection shall require that Licensee have the urine or blood sample collected on the same day that he is contacted. These screens shall be performed a minimum of twelve (12) times per year for the first and second years, and a minimum of six (6) times per year for the final three years of the probationary period. Said screens shall be legally defensible in that the donor and chain of custody can be identified throughout the screening. On a regular basis, and not more than 21 days from the time each blood or urine sample is taken, Licensee shall cause to be provided to the Department of Consumer Protection the laboratory reports on the drug screens. Said screens shall be negative for drugs except drugs properly prescribed or properly taken for a therapeutic or medically proper purpose.

**PARAGRAPH NINE:** In addition to the drug screens referred to in Paragraph Eight, Licensee shall submit to unannounced, observed urine and/or blood screens for drugs whenever requested by the Department of Consumer Protection or the Commission of Pharmacy. These drug screens shall be submitted and tested pursuant to the procedures established by Paragraph Eight. In addition to any drug screens required by Paragraph Eight and any drug screens requested by the Department pursuant to the first sentence of this Paragraph, the Department of Consumer Protection at any time may request and collect a urine sample from the Licensee for drug screening. This request

shall be performed in a manner so as to minimize the inconveniences or embarrassment to the Licensee.

**PARAGRAPH TEN:** Licensee shall not consume alcohol or any controlled substance or prescription legend drug unless prescribed by a duly licensed medical practitioner for a therapeutic or medically proper purpose.

**PARAGRAPH ELEVEN:** During the probationary period, Licensee shall not manage a pharmacy.

**PARAGRAPH TWELVE:** Licensee will comply with all federal and state statutes and regulations concerning controlled substances, prescription legend drugs and the practice of pharmacy.

**PARAGRAPH THIRTEEN:** During the probationary period, Licensee shall:

(a) notify the Department of Consumer Protection of any change of address or change of employment within 5 days of such change;

(b) provide a copy of this Settlement Agreement to any present or future employer, and to any Pharmacy licensing board for any other state in which he currently holds a license or to which he applies for a license in the future;

(c) cause any employer to send a letter to the Commission of Pharmacy prior to commencement of employment acknowledging that the employer has been provided with a copy of this Settlement Agreement and that the employer understands that the Licensee must be available to provide drug screens as provided by Paragraphs Eight and Nine ; and

(d) notify the Department of Consumer Protection of any arrest on an alcohol or drug-related offense within 5 days of such arrest.

PARAGRAPH FOURTEEN: Licensee agrees that any substantial violation of the conditions set forth in Paragraphs Five through Thirteen shall result in a summary suspension of his Pharmacist License No. 6822. The summary suspension will be effective on the date notice is mailed to the Licensee's address of record with the Department of Consumer Protection. The summary suspension will continue until a decision is issued after a hearing by the Commission of Pharmacy on the violation of probation, or an agreement is approved by the Commission resolving Licensee's suspension. Any extension of time or grace period granted to the Licensee in complying with this agreement shall not waive the right of the Department of Consumer Protection or the Commission of Pharmacy to take action at a later time or take action for a subsequent violation.

PARAGRAPH FIFTEEN: Licensee agrees that this Settlement Agreement may be entered in evidence as an admission of the violations stated in Paragraph Three in any proceeding before the Commission of Pharmacy in which his compliance with this Settlement Agreement is at issue.

PARAGRAPH SIXTEEN: Licensee agrees to waive:

- a.) any right to seek judicial review or otherwise challenge or contest the validity of this Settlement Agreement;
- b.) any requirement that this Settlement Agreement contain findings of fact and conclusions of law; and

c.) any right to a hearing or other procedural requirements of the Uniform Administrative Procedure Act, Connecticut General Statutes, Section 4-186 et seq.

PARAGRAPH SEVENTEEN: This Settlement Agreement shall not become binding unless and until it is accepted and approved by the Commission of Pharmacy.

**For the Licensee**

Dated: 7/31/98

William J. Wojcik  
William J. Wojcik  
Licensee

Dated: 7/31/98

By: Thomas J. Welch  
Thomas J. Welch  
Attorney for Licensee

**For the Department of Consumer Protection**

Dated: 8/2/98

Steven J. Schwane  
Steven J. Schwane, Esq.  
Administrative Hearings Attorney II  
and Complaint Counsel

The above Settlement Agreement concerning Pharmacist License of William J. Wojcik is accepted and approved by the Commission of Pharmacy on this 4th day of August, 1998.



William Summa, Chairman  
Commission of Pharmacy

D9/A-PH-WOJ.CIK

PHARMACIST  
Period From: 05/01/99  
Period To: 04/30/01

If Not Renewed By: 05/01/99  
The Late Fee Is: \$240.00

Renewal Fee  
\$140.00

WILLIAM J WOJCIK  
14 LAWTON TERRACE  
ANSONIA CT 06401

This address is considered your official address and is a matter of public record. If changes are necessary, please complete and return the attached data change form with your renewal. Do not return with renewal if your data is unchanged. Retain and complete when changes occur and mail to Board. Then forward to address on data change form.

DEPOSIT ONLY  
NEW JERSEY  
DIVISION OF PUBLIC SAFETY  
CONSUMER AFFAIRS  
GENERAL TREASURY

292720

Questions:

Has any government agency or professional association instituted charges or action against you in any state, since your last renewal? YES  NO

Have you been convicted for the violation of any law or regulation or surrendered your professional license since your last renewal? (Parking or speeding violations need not be disclosed; motor vehicle offenses such as driving while impaired or intoxicated must be disclosed.) YES  NO

Have you violated any state or federal laws governing the practice of pharmacy or the dispensing of prescription drugs in the past two years? YES  NO

I have successfully completed continuing education courses during the past two years as follows (See General Information/Continuing Education):

Primary	Supportive	Total CE Credits
31		31
Number of Credits	Number of Credits	

I certify that the information entered on this form is true and complete to the best of my knowledge; and further acknowledge that if the information applied on this form is willfully false, I am subject to punishment and/or disciplinary sanction including suspension/revocation or the imposition of civil penalties as may be provided by law.

*William J Wojcik*  
Signature

4-14-99  
Date



BOARD OF PHARMACY  
DIVISION OF CONSUMER AFFAIRS  
PO BOX 0151  
TRENTON NJ 08625-0151

General Information: Return the completed, signed original (photo/faxed copies not application with your check or money order (NO CASH) made payable to the Division of Consumer Affairs in the enclosed envelope. This renewal application must be completed in ink. All must be answered and the licensee must sign thereby attesting to the accuracy of the answers. Failure to do so will result in the application being returned to the applicant, possibly at renewal effective date.

Continuing Education: Pursuant to N.J.A.C. 45:14-11, completion of thirty (30) hours of pharmaceutical education is required during the two (2) years preceding renewal. Do documentation with your renewal. Retain proof of course completion in the event required by the Board for audit purposes.

Change Form: Licensees are obligated to notify their board immediately upon change of name, business and/or mailing address. Failure to notify is not justification for a waiver. Complete the form and return with your renewal. ONLY if you have had changes (es) or name that have not been reported to the board. Name changes require documentation (birth certificate, marriage license or court order).

MAR