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FILED

MAR 25 2013

BOARD OF PHARMACY

By: Megan Cordoma
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STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF PHARMACY

IN THE MATTER OF THE SUSPENSION OR :
REVOCATION OF THE LICENSE OF :
: Administrative Action
ANTOINETTE D. WALLACE, R.P. :
License No. 28RI03484900 : PROVISIONAL ORDER OF
: DISCIPLINE
TO PRACTICE PHARMACY :
IN THE STATE OF NEW JERSEY :

This matter was opened to the New Jersey State Board of Pharmacy ("Board") upon receipt of information which the Board has reviewed and on which the following preliminary findings of fact and conclusions of law are made:

FINDINGS OF FACT

1. Antoinette D. Wallace ("Respondent") was licensed to practice pharmacy in the State of New Jersey on April 2, 2012 and has been licensed at all times relevant hereto. (See Board's L2K printout, attached hereto and made a part hereof as Exhibit A).

2. On or about October 12, 2012, Respondent made a voluntary statement to her employer, CVS Pharmacy. In this signed and witnessed statement, Respondent admitted to stealing Alprazolam,

Zolpidem, and Zaleplon from multiple CVS Pharmacy locations at which she worked. She estimated that she stole approximately sixteen (16) 100-count bottles of Alprazolam, ten (10) 500-count bottles of Zolpidem, and twenty (20) 100-count bottles of Zaleplon. Respondent denied taking the drugs for personal use but admitted she stole them for resale outside of CVS. She agreed to reimburse her employer for losses in the amount of \$12,450.74. (See written and signed statement from Respondent, dated October 12, 2012, attached hereto and made a part hereof as Exhibit B.)

CONCLUSIONS OF LAW

Respondent's theft of controlled dangerous substances from her employer pharmacy for resale provides grounds to take disciplinary action against Respondent's license to practice pharmacy in New Jersey pursuant to N.J.S.A. 45:1-21(b), (e), and (f), in that Respondent has engaged in the use or employment of dishonesty, deception, and misrepresentation; in professional misconduct; and in acts constituting a crime or offense of moral turpitude or relating adversely to the activity regulated by the Board.

ACCORDINGLY, IT IS, on this 25th day of MARCH, 2013,

ORDERED THAT:

1. Respondent's license to practice pharmacy in the State of New Jersey is hereby provisionally suspended for a minimum of five (5) years.
2. Respondent shall refrain from engaging in the practice of pharmacy and shall not represent herself as a licensed pharmacist

until such time as her license is reinstated. Any practice in this State prior to such reinstatement shall constitute grounds for a charge of unlicensed practice.

3. Prior to the Board's consideration of any petition for reinstatement of her license, Respondent shall:

a) Appear before the Board or a committee thereof, if so requested, to discuss her readiness to re-enter the practice of pharmacy. At that time Respondent shall be prepared to propose her plans for future practice in New Jersey and demonstrate she is fit and competent to practice and has been rehabilitated to the Board's satisfaction.

b) Provide the Board with documentation of her successful completion of a PRIM-E or ProBE ethics course.

4. The within Order shall be subject to finalization by the Board at 5:00 p.m. on the 30th day following entry hereof unless Respondent requests a modification or dismissal of the above stated Findings of Fact or Conclusions of Law by:

a) Submitting a written request for modification or dismissal to Anthony Rubinaccio, Executive Director, 124 Halsey Street, 6th floor, P.O. Box 45013, Newark, New Jersey 07101.

b) Setting forth in writing any and all reasons why said findings and conclusions should be modified or dismissed.

c) Submitting any and all documents or other written evidence supporting Respondent's request for consideration and reasons therefor or offered in mitigation of penalty.

5. Any submissions will be reviewed by the Board and the Board will thereafter determine whether further proceedings are necessary. If no material discrepancies are raised through a supplemental submission during the thirty-day period, or if the Board is not persuaded that the submitted materials merit further consideration, a Final Order of Discipline will be entered.

6. In the event that Respondent's submissions establish a need for further proceedings, including, but not limited to an evidentiary hearing, Respondent shall be notified with regard thereto. In the event that an evidentiary hearing is ordered, the preliminary findings of fact and conclusions of law contained herein may serve as notice of the factual and legal allegations in such proceeding. Further, in the event a hearing is held and upon review of the record, the Board shall not be limited to the findings, conclusions and sanctions stated herein.

NEW JERSEY STATE BOARD OF PHARMACY

By: Edward G. McGinley
Edward G. McGinley R.P.
Board President

Exhibit

A

Antoinette D. Wallace

Date of birth: [REDACTED]
Date of death:
License No.: **28RI03484900**
Profession: Pharmacy
License type: Pharmacist

License status: **Active** Last renewal date:
Date this status: 04/02/2012 Expiration date: 04/30/2013
Issue date: 04/02/2012

Address of Record
616 Bement Avenue
Staten Island, NY 10310

Education
School name: Massachusetts College of Pharmacy Worcester
Degree/Certificate: Doctorate
Date Graduated: 05/15/2011
Major:

Prerequisite License(s)
None

Report generated on 3/18/13 1:33:12 PM

Exhibit

B

STATEMENT

I, Antoinette Wallace, hereby make this statement voluntarily to CVS/pharmacy and to RCPM Clint Merritte on 10-18-12 667.

I understand that I am making this statement of my own free will without any threat, promise, or coercion.

Address: Foxe Avenue, Staten Island, NY 10310

Phone: [REDACTED] DOB: [REDACTED] AGE: 27 SSN: [REDACTED]

Q= Question by: Clint

A= Answer by: Antoinette

Q. What is your current title and length of service at CVS/pharmacy?

A. pharmacist 10 years

Q. During this interview, you were asked about the removal of medication from CVS pharmacy departments without a prescription of payment. You stated you have removed medication from New Jersey CVS locations without permission. Is this statement true?

A. Yes

Q. During this interview, you stated to RCPM Clint Merritte that you worked as a pharmacist in the following locations since April 2012: 2064, 2001, 759, 506, 867, and 3753. During this period of time you stated that you only removed medications from these locations without a prescription.

I offer this statement voluntarily, and state that it is true, to the best of my knowledge. I have not been threatened, coerced, or promised leniency by any agent of CVS/pharmacy to compel me to submit this statement.

SIGNED: Antoinette Wallace DATE: 10/22/2012 TIME: 9:22p

WITNESS: [Signature] DATE: 10/22/2012 TIME: 9:23PM

WITNESS: _____ DATE: _____ TIME: _____

STATEMENT

of payment?

Yes

Q. Can you list the medications you removed from these locations without authorization?

A. Alprazolam, Zolpidem, Zaleplon

Q. Were you taking these drugs for personal use?

A. NO

Q. Please list the total approximate quantities of Zaleplon 100mg (100's) bottles you removed from these locations without authorization.

A. 20 (twenty bottles)

Q. Please list the total approximate quantities of Zolpidem Tartrate 100mg (500's) bottles you removed from these locations without authorization.

A. ten (bottles)

Q. Please list the total approximate quantities of Alprazolam 2mg (100's) bottles you removed without authorization.

A. 16 sixteen (bottles)

Q. Were these medications stolen for resale outside of CVS?

A. Yes

I offer this statement voluntarily, and state that it is true, to the best of my knowledge. I have not been threatened, coerced, or promised leniency by any agent of CVS/pharmacy to compel me to submit this statement.

SIGNED: [Signature] DATE: 10/18/2012 TIME: 9:23p

WITNESS: [Signature] DATE: 10/18/2012 TIME: 9:24p

WITNESS: _____ DATE: _____ TIME: _____

STATEMENT

Q. Are you being forced against your will to perform these actions by anyone within CVS or outside of CVS?

A. NO

Q. How were you removing these medications from the pharmacy departments?

A. in the morning

Q. Do you understand your actions caused CVS a loss and are against CVS policy?

A. On the WELFARE YES

Q. Are to your actions CVS stores within Region 19, District 6 sustained a loss of \$12,450.74? Do you agree to reimburse CVS for this loss?

A. yes

Q. Were you treated fairly during this interview?

A. yes

yes

AWI

AWI

I offer this statement voluntarily, and state that it is true, to the best of my knowledge. I have not been threatened, coerced, or promised leniency by any agent of CVS/pharmacy to compel me to submit this statement.

SIGNED: [Signature]

DATE: 10/12/12

TIME: 9:22 AM

WITNESS: [Signature]

DATE: 10/12/12

TIME: 9:23 AM

WITNESS: _____

DATE: _____

TIME: _____