

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF PROFESSIONAL LICENSING
BOARD OF PHARMACY
DISCIPLINARY SUBCOMMITTEE

In the Matter of

UNIVERSAL PHARMACY OF SAGINAW
License No. 53-15-068278,

File No. 53-17-147135

Respondent.

ADMINISTRATIVE COMPLAINT

The Michigan Department of Licensing and Regulatory Affairs by Cheryl Pezon, Acting Director, Bureau of Professional Licensing, complains against Respondent Universal Pharmacy Of Saginaw as follows:

1. The Michigan Board of Pharmacy is an administrative agency established by the Public Health Code, MCL 333.1101 *et seq.* The Board's Disciplinary Subcommittee is empowered to discipline licensees for Code violations.

2. The Board administers the controlled substance provisions in Article 7 of the Code, MCL 333.7101 - .7545, and is empowered to discipline licensees for Article 7 violations under MCL 333.7311(1)(h).

3. MCL 333.7333(1) provides, in pertinent part:

"[G]ood faith" means the prescribing or dispensing of a controlled substance by a practitioner . . . to or for an individual Application of good faith to a pharmacist means the dispensing of a controlled substance pursuant to a prescriber's order which, in the professional judgment of the pharmacist, is lawful. The pharmacist shall be guided by nationally accepted professional standards including, but not limited to, all of the following, in making the judgment:

(a) Lack of consistency in the doctor-patient relationship.

- (b) Frequency of prescriptions for the same drug by 1 prescriber for larger numbers of patients.
- (c) Quantities beyond those normally prescribed for the same drug.
- (d) Unusual dosages.
- (e) Unusual geographic distances between patient, pharmacist, and prescriber.

4. Respondent is a licensed pharmacy located in Saginaw, Michigan. Respondent also has a controlled substance license no. 53-15-068278. "Universal Pharmacy of Saginaw" is an assumed name of Dakshina, L.L.C., a Michigan limited liability company. On information and belief, Respondent's owner and pharmacist-in-charge (PIC) is Sureshkumar Dakshinamoorthy, R.Ph.¹

5. Alprazolam is a commonly abused and diverted benzodiazepine schedule 4 controlled substance, particularly in its 1 mg and 2 mg dosages.

6. Carisoprodol is a muscle relaxant and a schedule 4 controlled substance. Carisoprodol has significant potential for abuse, dependence, overdose, and withdrawal, particularly when used in conjunction with opioids and benzodiazepines.

7. Codeine preparations (e.g., codeine/promethazine syrup) are schedule 5 controlled substances prescribed for treating cough and related upper respiratory symptoms. Codeine/promethazine syrup is rarely indicated for any other health condition, and is particularly ill-suited for long-term treatment of chronic pain. Codeine/promethazine syrup is a highly sought-after drug of abuse, and is known by the street names "lean," "purple drank," and "sizzurp."

¹The Department has also filed an Administrative Complaint against Dakshinamoorthy for the conduct alleged here. *Sureshkumar Dakshinamoorthy, R.Ph.*, No. 53-17-147135.

8. Codeine with acetaminophen (e.g., “Tylenol 3” and “Tylenol 4”) is a schedule 3 controlled substance. Codeine with acetaminophen is a commonly abused and diverted drug.

9. Hydrocodone combination products and oxycodone are commonly abused and diverted opioid schedule 2 controlled substances.

10. The Department reviewed data from the Michigan Automated Prescription System (MAPS), the State of Michigan’s prescription monitoring program, which gathers data regarding controlled substances dispensed in Michigan. The Department discovered that Respondent dispensed more codeine/promethazine syrup than any other Michigan dispenser in 2015 and 2016. Respondent also was among the top 100 dispensers of hydrocodone/apap in its 7.5-325 mg dosage in 2015 and was the 26th ranked dispenser of hydrocodone/apap 7.5-325 mg in 2016.

11. During the following periods, Respondent filled prescriptions for the following commonly abused and diverted controlled substances in the following quantities:

| | 2015 | 2016 |
|-------------------------------------|----------------------|----------------------|
| (a) Hydrocodone/apap 5-325 mg | 79 (0.98%) | 115 (1.20%) |
| (b) Hydrocodone/apap 7.5-325mg | 1797 (22.18%) | 2577 (26.93%) |
| (c) Hydrocodone/apap 10-325 mg | 635 (7.84%) | 834 (8.72%) |
| (i) Hydrocodone/apap, all strengths | 2511 (30.99%) | 3526 (36.85%) |
| (d) Oxycodone 30 mg | 46 (0.57%) | 79(0.83%) |
| (e) Carisoprodol 350 mg | 146 (1.80%) | 93 (0.97%) |
| (f) Alprazolam 1 mg | 399 (4.83%) | 310 (3.24%) |
| (g) Alprazolam 2 mg | 89 (1.10%) | 120 (1.25%) |
| (h) Promethazine/codeine syrup | 2335 (28.82%) | 1980 (20.69%) |
| (i) Total, (a) - (h) | 5526 (68.21%) | 6108 (63.83%) |
| (j) Total CS prescriptions | 8101 | 9569 |

12. Respondent purchased such a large amount of codeine/promethazine syrup in 2015 that its controlled substances distributor McKesson

terminated Respondent's ability to purchase controlled substances from McKesson in January 2016.

13. Patients paid cash for more than thirteen percent (13%) of the prescriptions Respondent filled in 2015 and 2016. These rates exceed the state average for cash payment and are indicative of prescriptions filled for the purpose of drug diversion.

14. In 2015 and 2016, nearly eighty percent of the prescriptions Respondent dispensed were issued by a small number of prescribers who are or have been disciplined by their respective licensing Boards for inappropriate prescribing:

| | 2015 | 2016 |
|---|----------------------|----------------------|
| Kriangsak Thepveera, M.D. ² | 5151 (63.58%) | 5237 (54.73%) |
| Glenn Scott Saperstein, D.O. ³ | 717 (8.85%) | 1207 (12.91%) |
| Amaning Sarkodie, M.D. ⁴ | 444 (5.48%) | 539 (5.63%) |
| Ramon Octavio Rodriguez, MD. ⁵ | 219 (2.70%) | 165 (1.72%) |
| Chidozie Ononuju, D.O. ⁶ | 66 (0.81%) | 35 (0.37%) |
| | 6597 (81.43%) | 7183 (75.07%) |
| Total CS Prescriptions | 8101 | 9569 |

15. MAPS data showed all the physicians identified in ¶ 14 frequently prescribed commonly abused and diverted controlled substances to many patients. When interviewed by a Department investigator, Respondent's owner and PIC

²Complaint and Order of Summary Suspension issued December 5, 2016; Consent Order imposing disciplinary suspension issued May 17, 2017. (File No. 43-16-141405).

³Complaint and Order of Summary Suspension issued January 31, 2017; Consent Order imposing disciplinary suspension issued August 3, 2017. (File No. 51-16-140958).

⁴Complaint and Order of Summary Suspension issued May 18, 2017. (File No. 43-16-141946).

⁵Complaint issued December 14, 2015; Consent Order imposing license limitation (no controlled substance prescribing) entered July 20, 2016. (File No. 43-14-133973).

⁶Complaint issued October 28, 2016; Order of Summary Suspension issued November 1, 2016; Consent Order imposing license revocation entered December 1, 2016. (File Nos. 51-14-133743, 51-14-133972, 51-16-140851).

Dakshinamoorthy admitted that he did not research the legitimate medical purpose for the prescriptions by checking patient MAPS reports.

16. Kriangsak Thepveera, M.D. told a Department investigator that he knew Respondent's owner and PIC Dakshinamoorthy when Dakshinamoorthy worked at another pharmacy. Thepveera admitted that Dakshinamoorthy was the only pharmacist who would dispense pursuant to Thepveera's prescriptions, as the other pharmacists considered Thepveera a "bad doctor."

17. To facilitate Respondent's dispensing of commonly abused and diverted controlled substances, Thepveera arranged to pick up filled controlled substance prescriptions from Respondent for his patients so that his patients did not need to travel the distance from Thepveera's office to Respondent.

18. The Department reviewed MAPS data from January 1, 2015 through October 24, 2017. Respondent dispensed commonly abused and diverted drugs to the following persons in 2017, despite warning signs of abuse and diversion during that period:

- (a) Patient JB⁷ filled 33 controlled substance prescriptions, including for oxycodone, oxymorphone, and promethazine/codeine syrup, from 8 different prescribers.
- (b) Patient CD filled 74 controlled substance prescriptions, including for hydrocodone, alprazolam, diazepam, carisoprodol, and promethazine/codeine syrup, from 4 different prescribers.
- (c) Patient MM filled 78 controlled substance prescriptions, including for hydrocodone, alprazolam, zolpidem, carisoprodol, and promethazine/codeine syrup, from 13 different prescribers.
- (d) Patient RT, who has a Flint, Michigan address, filled 27 controlled substance prescriptions, including for hydrocodone, carisoprodol,

⁷Patients are partially deidentified to protect confidentiality.

and promethazine/codeine syrup, from 5 different prescribers located in Saginaw, Flint, Caro, and Davisburg.

- (e) Patient BS filled 49 controlled substance prescriptions, including for hydrocodone, tramadol, and lorazepam, from 14 different prescribers located in Saginaw, Eureka, Clinton Township, Pontiac, Bad Axe, and Grand Blanc.
- (f) Patient TM filled 44 controlled substance prescriptions, including for hydrocodone, tramadol, carisoprodol, and promethazine/codeine syrup, from 4 different prescribers located in Detroit, Ann Arbor, Saginaw, and Troy.
- (g) Patient JC filled 78 controlled substance prescriptions, including for alprazolam, oxycodone, oxymorphone, tramadol, zolpidem, and promethazine/codeine syrup, from 2 different prescribers.
- (h) Patient GC filled 11 controlled substance prescriptions, including for codeine with acetaminophen, hydrocodone, tramadol, and promethazine/codeine syrup, from 6 different prescribers located in Lansing, Ortonville, Saginaw, Flint, and Fenton. GC also filed prescriptions at 6 different pharmacies located in Flint, Coldwater, Grand Rapids, and Saginaw.

19. On September 8, 2017, a Department investigator audited Respondent's inventory of commonly abused and diverted drugs and uncovered the unexplained loss of 1430 ml of codeine/promethazine syrup, which amounted to 24% of the amount that should have been on hand.

20. The Department also inspected Respondent's business premises on September 8, 2017. The Department noted a lack of up-to-date reference materials and lack of proper quantity description on controlled substance prescriptions.

COUNT I

Respondent failed to maintain effective controls against diversion of controlled substances to other than legitimate and professionally recognized therapeutic, scientific, or industrial uses, in violation of MCL 333.7311(1)(e).

COUNT II

Respondent dispensed controlled substances for other than legitimate or professionally recognized therapeutic, scientific, or industrial purposes, or outside the Respondent's scope of practice, in violation of MCL 333.7311(1)(g).


COUNT III

Respondent dispensed controlled substances without good faith, contrary to MCL 333.7333(1) and in violation of 333.7311(1)(h).

RESPONDENT IS NOTIFIED that, consistent with Mich Admin Code, R 338.1615(3), Respondent has 30 days from the date of receipt of this complaint to answer this complaint in writing and to show compliance with all lawful requirements for retention of the license. Respondent shall submit the response to the Bureau of Professional Licensing, Department of Licensing and Regulatory Affairs, P.O. Box 30670, Lansing, MI 48909.

MICHIGAN DEPARTMENT OF
LICENSING AND REGULATORY AFFAIRS

Dated: 11/6, 2017


By: Cheryl Wykoff Pezon, Acting Director
Bureau of Professional Licensing

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