Pages 1125-1156

State Register

STATE OF MINNESOTA

IN THIS ISSUE:

VOLUME 1, NUMBER 30

JANUARY 31, 1977

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The *State Register* is published weekly, on Monday, by the State of Minnesota, Department of Administration, Office of the State Register, Suite 203, 95 Sherburne Avenue, St. Paul, Minnesota 55103, pursuant to Minn. Stat. § 15.0411. In accordance with expressed legislative intent that the *State Register* be self-supporting, the subscription rate has been established at $110 per year, and $85 per year for second and additional subscriptions, postpaid to points in the United States. Second class postage paid at St. Paul, Minnesota.

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List of MSAR Rules Affected*

List of rules within the Manual of State Agency Rules affected by documents published in the State Register during the current quarter beginning January 1, 1977:

*New rules, both proposed and adopted, and which have never been disseminated or published, are not included in the List of MSAR Rules Affected. Rules which are listed as "uncodified" have been disseminated, but have never been published in the MSAR.

EXECUTIVE ORDERS

Executive Order No. 135

Repealing Executive Order No. 127

I, Rudy Perpich, Governor of the State of Minnesota, by virtue of the authority vested in me by the Constitution and applicable statutes, do hereby issue this Executive Order:

WHEREAS, in the interest of best accomplishing the ongoing goals of an aesthetic environment program; and,

WHEREAS, it is felt that said goals can best be served by placing this program directly within the Office of the Governor;

NOW, THEREFORE, I order:

1. That Executive Order No. 127 be repealed.

This order shall be effective upon publication in the *State Register*.

IN TESTIMONY WHEREOF, I hereunto set my hand on this 14th day of January, 1977.

PROPOSED RULES

Livestock Sanitary Board

Control of Mycoplasma in Turkeys

Notice of Hearing

Notice is hereby given that a public hearing will be held pursuant to Minn. Stat. § 15.0412, subd. 4 (1974), in the above-entitled matter, in Room A, Veterans Service Building, State of Minnesota, St. Paul, Minnesota, on Tuesday, March 8, 1977, commencing at 9:30 A.M., and continuing until all representatives or other interested groups of persons have had an opportunity to be heard concerning adoption of the proposed rules captioned above by submitting either oral or written data, statements, or arguments. Statements or briefs may be submitted without appearing at the hearing, and will be accepted for inclusion in the record for 20 days following the hearing. Statutory authority to promulgate the proposed rules is vested in the Livestock Sanitary Board by Minn. Stat. § 35.03 (1974).

The Livestock Sanitary Board proposes to amend these rules relating to the following:

1. To apply the rule to all poultry not just turkeys.

2. To bring the rule into agreement with National programs for Mycoplasma control.

3. To make *Mycoplasma gallisepticum* testing for turkeys mandatory as a step toward eradication.

4. To include wild turkeys in the program.

5. To provide for voluntary testing for *Mycoplasma synoviae* and *meliagridis*.

6. To provide for a voluntary *Mycoplasma gallisepticum* testing program for chickens.

7. To provide testing schedules for the 3 strains of Mycoplasma.

8. To make quarantine of *Mycoplasma gallisepticum* infected flocks mandatory.

A "statement of need" explaining why the department feels the proposed rules are necessary and a "statement of evidence" outlining the testimony they will be introducing will be filed with the Hearing Examiners Office at least 25 days prior to the hearing and will be available there for public inspection. Statements or briefs interested persons wish to submit before or after the hearing may be mailed to Peter C. Erickson, Office of Hearing Examiners, 1745 University Ave., Room 300, St. Paul, MN 55104 phone 612-296-6910.

Under Minn. Stat. § 10A.01, subd. 11 (1974) any individual engaged for pay or other consideration for the purpose of representing persons or associations attempting to influence administrative action, such as the promulgation of these rules, must register with the State Ethics Commission as a lobbyist within five days of the commencement of such activity by the individual. The State Ethics Commission is located at 410 State Office Building, St. Paul, Minnesota, 55155.

Copies of the proposed rules are now available and may be obtained by writing to the Minnesota Livestock Sanitary Board, 555 Wabasha Street, St. Paul, Minnesota, 55102. Additional copies will be available at the door on the date of the hearing.

J. G. Flint, D.V.M.
Secretary and Executive Officer

Rules as Proposed

LSB 32 Control of Mycoplasma [Gallisepticum] in [turkeys] **poultry.**

A. Definitions.

1. Board shall mean the Minnesota State Livestock Sanitary Board.

2. Person shall mean an individual, firm or corporation.

3. Veterinarian shall mean a [graduate of a recognized veterinary college who has been approved by the Board] **veterinarian licensed** and accredited [by the United States Department of Agriculture] **in Minnesota.**

4. Hatchery shall mean buildings and equipment on one premises operated or controlled for the production of [turkeys] **poultry.**

5. [Flock] **Poultry** shall mean [all] turkeys, [maintained and segregated as one flock on one premises] **chickens and other poultry.**

KEY: New rules and material proposed to be added to an existing rule are printed in **boldface.** Material proposed to be deleted from an existing rule is printed in [single brackets]. Underlining indicates additions to proposed rules, while [[double brackets]] indicate matter stricken from proposed rules. Existing material is printed in standard type face.

6. Other poultry shall [mean and] include [chickens,] pheasants, partridges, guinea fowl, **quail** [pigeons], and other domesticated fowl or wild fowl maintained in captivity.

7. [Products shall mean domesticated fowl and hatching eggs.] **Turkeys when used in this rule shall mean and include wild turkeys maintained in captivity.**

8. [Hatching egg dealer shall mean a person, firm or corporation in the business of selling turkey hatching eggs for participating flockowners or independent flockowners.] **Flock shall mean poultry maintained and segregated as one group of birds on one premises.**

9. Products shall mean domesticated fowl and hatching eggs.

10. Hatching egg dealer shall mean a person, firm or corporation in the business of selling, trading or exchanging poultry hatching eggs owned by them or for participating flockowners, independent flockowners or other hatcheries.

11. Primary breeding flock shall mean a flock composed of one or more generations that is maintained for the purpose of establishing, continuing or improving parent lines.

12. Multiplier breeding flock shall mean a flock originating from a primary breeding flock and is intended for the production of hatching eggs used for the purpose of producing progeny for commercial egg or meat production or for other non-breeding purposes.

13. Authorized agent shall mean a person not employed by the Board but designated and authorized to perform functions under these rules.

B. General provisions.

1. The Mycoplasma [gallisepticum] control program shall be administered on a voluntary basis, **except as provided in LSB 32 B. 2,** and any [flock] **flockowner,** [hatchery] **hatcheryman** or hatching egg dealer may participate [providing it complies] **provided they comply** with the following procedures:

a. Files a signed agreement with the Board **for participation** and complies with these rules. [and regulations]

b. Has not violated the terms of the above signed agreement or these rules [and regulations] resulting in cancellation until such time has elapsed as the Board shall consider sufficient for reinstatement.

c. When more than one hatchery located within the state is operated under the same name, ownership, or management, one or more of these hatcheries shall not participate in the Mycoplasma [gallisepticum] control program unless all participate [.] **and** [A]**all** such hatcheries shall attain and maintain the same **disease** classifications.

2. No person shall purchase, sell or trade turkey poults under 4 months of age and no person shall purchase, sell or trade turkey hatching eggs unless they originate in and are distributed from flocks, hatcheries or dealers under the supervision of the Board for the control of *Mycoplasma gallisepticum* disease and are classified as Minnesota *Mycoplasma gallisepticum* Tested or of a comparable *Mycoplasma gallisepticum* status.

C. [Testing] **Flock participation requirements.**

1. [All turkeys four months of age and over to be used for breeding purposes and participating under LSB 32 B. of these regulations shall be tested for *Mycoplasma gallisepticum* using the same blood sample collected for conducting the pullorum, typhoid and typhimurium tests. Breeders shall not be selected from flocks having a history of or are showing symptoms of a respiratory infection which is known to be egg transmitted. A turkey breeding flock held over for a second season's production shall be considered a new flock and tested according.] **A poultry breeding flock shall not be selected from a flock or flocks having a history of or showing signs of a respiratory infection known to be egg transmitted.**

2. [All tests shall be conducted with an antigen approved by the Board and such tests with all antigens shall be considered when final determination for a flock or hatchery classification is made.] **When applicable for obtaining a U. S. disease classification under this rule, primary breeding flocks participating in the Mycoplasma control program shall have been tested and found negative for two generations.**

3. [Reactors as designated by the official laboratory shall be presented for necropsy and bacteriological examination to an official laboratory within 10 days from date of test and accompanied by a shipping permit on which is recorded the individual band numbers. The following criteria shall be used to determine if the flock can receive an official classification:]

[a. Active air sac lesions.]

[b. Recovery of *Mycoplasma gallisepticum* organism.]

[c. Supplemental serological tests.]

When applicable for obtaining a U. S. disease classification under this rule, multiplier breeding flocks

participating in the Mycoplasma control program shall have originated from tested and clean primary breeding flocks.

4. [Flocks which contain birds that are serologically positive, but show no active air sac lesions on necropsy and *Mycoplasma gallisepticum* is not recovered, shall be considered suspicious. A one-hundred (100) random sample test will be conducted on such flocks prior to the time they come into production. The final determination will be based on the same criteria as outlined above in sub-paragraph 3. or a negative random sample test will qualify the flock. Additional tests shall be conducted if deemed necessary.] **When a participating turkey flock is recycled and held over for a second or third egg production period, the Board reserves the right to determine if additional annual testing for Mycoplasma is needed to retain its Mycoplasma disease classification(s).**

5. All turkeys in the flock, whether or not sampled, shall be identified with an official leg or wing band approved by the Board. The bands or other acceptable identification can be applied at the time the turkey blood samples are collected or at some prior time. All sampled birds in chicken and other poultry flocks shall be identified with an official leg or wing band approved by the Board at the time the samples are collected.

6. Poultry flocks signed up for participation in the Mycoplasma control program shall be raised and managed with special attention to the following:

a. Establish a sound security program restricting movement of unauthorized visitors on the premises.

b. Provide workers with clean footwear and place footbaths in appropriate places.

c. Prevent mechanical disease transmission from outside sources such as vehicles and equipment.

d. Establish a work pattern to avoid cross-contamination between flocks.

e. Dispose of dead birds frequently and properly.

f. Minimize the presence of free-flying birds.

g. Keep rodent population, other pests and predators under control.

h. Keep accurate records of death losses.

i. Clean and disinfect poultry house before a new flock is placed.

j. Adopt and maintain a clean egg program.

k. Seek veterinary assistance when signs of disease occur.

D. [Classification] **Testing provisions.**

1. [A Minnesota Mycoplasma gallisepticum tested flock is a flock which, when officially tested for *Mycoplasma gallisepticum* in an official laboratory under supervision of the Board, contained no reactors to the *Mycoplasma gallisepticum* antigen, or a suspicious flock that is eventually declared to have no reactors after additional tests, and bacteriological examinations are made. The qualifying test shall be made within six (6) months prior to first sale of hatching eggs.] **All tests and antigens used in the control of Mycoplasma shall be approved by the Board.**

[a. The above classification shall not be issued to any flock with clinical signs or symptoms of infectious sinusitis.]

[b. Only birds of the same or comparable classification may be added to a Minnesota *Mycoplasma gallisepticum* tested flock.]

[c. Poults and hatching eggs originating from Minnesota *Mycoplasma gallisepticum* tested flocks may receive the same classification provided they are handled, hatched and reared separate and apart from other hatching eggs or poults not so classified.]

2. [A Minnesota *Mycoplasma gallisepticum* tested hatchery is one operating under the supervision of the Board and with the exceptions provided for in the following paragraph, hatching and handling only eggs and poults originating from Minnesota *Mycoplasma gallisepticum* tested flocks or from flocks of comparable status.] **All poultry signed up for participation under LSB 32 B. shall be at the minimum testing age described below, provided; such age limits may be adjusted with Board approval to avoid conflict with cooperative program changes.**

a. Turkeys and chickens — Over four (4) months of age.

b. Other poultry — Over four (4) months of age or in some game birds when they reach sexual maturity.

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3. [If facilities satisfactory to the Board for complete segregation are available, eggs from flocks not under this program or eggs from other species of poultry may be incubated and the products from such incubated eggs hatched and brooded in a Minnesota *Mycoplasma gallisepticum* Tested Hatchery provided; such eggs are incubated and hatched in separate machines, and the products of such eggs are maintained in complete segregation from the poults hatched from eggs originating in Minnesota *Mycoplasma gallisepticum* Tested flocks. A thorough cleaning, disinfection and fumigation program shall be conducted on all equipment and hatchery prior to setting other eggs.] **Only authorized agents and veterinarians are to collect official blood samples under this rule. The samples shall be submitted to an approved laboratory accompanied by an official test form on which all requested information is recorded. The test form shall be signed by the flockowner under witness and the authorized testing agent.**

4. The official test shall be the serum plate test or the standard tube agglutination test with either to be used in conjunction with the HI test.

5. Testing for Mycoplasma disease shall be done in accordance with LSB 32 I. *Mycoplasma gallisepticum* testing schedule, LSB 32 J. *Mycoplasma synoviae* testing schedule and LSB 32 K. *Mycoplasma meliagridis* testing schedule. Hatchery owners and flockowners may sign up for participation on a voluntary basis under test schedules LSB 32 J. and/or LSB 32 K. provided they meet and follow all other applicable provisions in this rule for the control of Mycoplasma, particularly *Mycoplasma gallisepticum*.

6. Flocks in which reactors are disclosed shall be handled in accordance with procedures outlined in LSB 32 L. Reactors.

7. Positive flocks shall be handled in accordance with M. Positive mycoplasma flocks.

E. [Hatcheries and flockowners] **Classifications.**

1. [The hatchery management shall:] **A Minnesota *Mycoplasma gallisepticum* tested flock is a flock which, when officially tested for *Mycoplasma gallisepticum* in an official laboratory under supervision of the Board, contained no reactors to the *Mycoplasma gallisepticum* antigen, or a suspicious flock that is eventually declared to have no reactors after additional tests and bacteriological examinations are made. The qualifying test shall be made within six (6) months prior to first sale of hatching eggs.**

a. [Permit inspection of buildings, equipment and poultry products contained therein at any reasonable time by agents of the Board.] **The above classification shall not be issued to any flock with clinical signs of *Mycoplasma gallisepticum* infection.**

b. [Maintain identity of hatching eggs as to flock and place of origin.] **Only birds of the same or comparable classification may be added to a Minnesota *Mycoplasma gallisepticum* tested flock.**

c. [Keep hatchery and incubator room well isolated from battery room.] **Poultry and hatching eggs originating from Minnesota *Mycoplasma gallisepticum* tested flocks may receive the same classification provided they are handled, hatched and reared separate and apart from other hatching eggs and poultry not so classified.**

[d. Practice recommended procedures for fumigation of incubators and hatchers.]

[e. Use only new egg cases or used egg cases that are clean and have been fumigated between each use.]

[f. Maintain available and adequate records to show origin of all hatching eggs and destination of poults sold for the current year and one year previous.]

2. [The flockowner shall:] **A Minnesota *Mycoplasma gallisepticum* tested hatchery is one operating under the supervision of the Board and with the exceptions provided for in LSB 32 E. 2. a., hatching and handling only eggs and poultry originating from Minnesota *Mycoplasma gallisepticum* tested flocks or from flocks of comparable status.**

a. [Maintain poultry buildings and premises in a sanitary condition.] **If separate facilities satisfactory to the Board for complete isolation are available, eggs from flocks not under this program or eggs from other species of poultry may be incubated and hatched provided; the products of such eggs are not sold and are maintained in complete segregation from poultry hatched from eggs originating in Minnesota *Mycoplasma gallisepticum* Tested flocks or flocks of comparable status. A thorough cleaning, disinfection and fumigation program shall be conducted on all hatchery equipment prior to setting other eggs.**

[b. Permit inspection of flock and premises at any reasonable time by agents of the Board, and submit flock for collection of additional blood samples if deemed necessary.]

[c. Attempts to eliminate animal disease carriers such as rats and mice and discourage the presence of free flying birds.]

[d. Avoid raising other poultry and farm animals on premises unless well segregated.]

[e. Report immediately to a disease control official when any respiratory symptoms appear in the flock.]

[f. Refrain from using any drug that will mask the results of serological tests or bacteriological recovery from *Mycoplasma gallisepticum*.]

3. Flock and hatchery classifications signed up for, obtained and maintained under any of the Mycoplasma test schedules may be issued under the same provisions as those for *Mycoplasma gallisepticum* naming the specific type or strain of Mycoplasma for which the flock was tested and for which the hatchery qualifies.

F. [Advertising] **Participating hatchery and flock-owner.**

1. [All advertising using official terminology or any portion thereof referring to the *Mycoplasma gallisepticum* disease control program shall be submitted to the Board for review and approval. Such advertising shall comply with the following paragraphs:] **The hatchery management shall:**

a. [The advertiser shall use only the classification which his birds, flocks or hatchery have attained under these rules and regulations.] **Permit inspection of buildings, equipment and poultry products contained therein at any reasonable time by agents of the Board.**

b. [All advertising shall specify the disease tested for, prefacing the word "Tested" with "Minnesota *Mycoplasma gallisepticum*".] **Maintain identity of hatching eggs as to flock and place of origin.**

c. Keep hatchery and incubator room well isolated from battery room.

d. Practice recommended procedures for fumigation of incubators and hatchers.

e. Use only new egg cases or used egg cases that are clean and have been fumigated between each use.

f. Maintain available and adequate records to show origin of all hatching eggs and destination of poults sold for the current year and one year previous.

2. The flockowner shall:

a. Maintain poultry buildings and premises in a sanitary condition.

b. Permit inspection of flock and premises at any reasonable time by agents of the Board, and submit flock for collection of additional blood samples if deemed necessary.

c. Avoid raising other poultry and farm animals on premises unless well segregated.

d. Report immediately to a disease control official when any respiratory signs appear in the flock.

e. Refrain from using any drug that will mask the results of serological tests or bacteriological recovery of Mycoplasma.

G. [Non-participant] **Advertising.**

1. [Products produced under these regulations shall lose their identity when purchased for resale or consigned to a non-participant.] **All advertising using official terminology or any portion thereof referring to the Mycoplasma disease control program shall be submitted to the Board for review and approval. Such advertising shall comply with the following paragraphs:**

a. The advertiser shall use only the classification which his birds, flocks or hatchery have attained under these rules.

b. All advertising shall specify the disease tested for, prefacing the word "Tested" with "Minnesota *Mycoplasma gallisepticum*" or other specific Mycoplasma strains for which the hatchery or flock qualify.

[2. A non-participant may not use the official terminology or any portion thereof of the *Mycoplasma gallisepticum* control program.]

H. Non-participant.

1. Products produced under these rules shall lose their identity when purchased for resale or consigned to a non-participant.

2. A non-participant may not use the official terminology.

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I. *Mycoplasma gallisepticum* testing schedule.

Species	Initial Test	To Retain Classification
Turkey		
Primary and Multiplier	10% or minimum of 300 per flock	Keep flock isolated Make one inspection No Mycoplasma infection disclosed
Chicken (egg & meat)		
Primary	*100% or 500 per flock	**5% each 90 days with 500 maximum — 100 minimum
Multiplier	50% with 300 max.-30 min.	2% each 90 days (300 max.-30 min.) or 25 cull chicks each 30 days (bact. exam) or ***100 chick serums each 60 days
Exhibition-game		
Primary	100% or 300 per flock	Same as chicken
Multiplier	Same as chicken	Same as chicken

* 100% test to be used on multiplier flocks not originating from clean primary flocks.

** Can be cumulative by testing fewer at more frequent intervals but must total 5% within the 90 days.

*** This monitoring procedure is limited to egg type breeding flocks.

J. *Mycoplasma synoviae* testing schedule.

1. This test schedule is to be used under a voluntary agreement and is designed mainly to determine if a flock is free of *Mycoplasma synoviae* infection and to provide a means whereby available state and/or federal disease classifications can be obtained.

Species	Initial Test	To Retain Classification
Turkey		
Primary	100% or minimum of 500 per flock	10% or minimum of 300 per flock at 32-34 weeks of age
Multiplier	10% or minimum of 300 per flock	and Keep flock isolated Make one inspection No Mycoplasma infection disclosed
Chicken (egg & meat)		
Primary	*5% 500 max.-30 min.	**3% each 90 days 500 max.-30 min.

Multiplier	1% 300 max.-30 min.	1% each 90 days 300 max.-30 min.
Exhibition-game		
Primary	Same as chicken	Same as chicken
Multiplier	Same as chicken	Same as chicken

* 5% test to be used on multiplier flocks not originating from clean primary flocks.

** Can be cumulative by testing fewer at more frequent intervals but must total 3% within the 90 days and not less than 30 at one time.

K. *Mycoplasma meliagridis* testing schedule.

1. This test schedule is to be used for turkey breeding flocks only and is designed mainly to determine if a flock is free of *Mycoplasma meliagridis* infection. Numbers tested at any given time can be adjusted to make this determination in either primary or multiplier flocks.

2. Initial test.

a. Test 100% or at least 500 per flock.

b. Use samples submitted for other tests.

3. Monitoring tests.

a. Test 100% or at least 300 per flock at 28-30 weeks of age or at time of first insemination.

b. Test 100% or at least 300 per flock at mid-production (approximately 40-42 weeks) or at marketing time or if flock shows respiratory signs.

L. Reactors.

1. Reactors to any of the Mycoplasma tests shall be handled using scheme below to determine if flock is positive or negative. Reactors are designated using HI titres of 1-40 as being significant for *Mycoplasma gallisepticum* and 1-20 for *Mycoplasma synoviae* and *Mycoplasma meliagridis*.

*If serology is suspicious for *Mycoplasma gallisepticum* and *Mycoplasma synoviae* and neither is isolated, continue serology and cultural exams until flock is determined to be positive or negative.

MG Reactors	MS and MM Reactors

At least 5 reactors to laboratory
(a) Cultural exam for Mycoplasma
(b) Necropsy for air sac lesions
(c) Supplemental serology
If (a) is positive
identify isolate by FAT, GIT or bird innoculation. If isolate is MG, flock is positive.
If (a) negative (b) and/or (c) positive
100 sample retest (serology)
100 tracheal swabs (culture)
*Additional testing as needed
	If reactors are disclosed:
	Collect 100 blood samples
	Collect 100 tracheal swabs
	Resample reactors if possible
	Run serology and identify any Mycoplasma isolates by FAT, GIT or bird innoculation.
	If identified as MS or MM flock is positive
	
	*Additional testing as needed.

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M. Positive mycoplasma flocks.

1. Flocks participating under the *Mycoplasma gallisepticum* program and designated as positive for *Mycoplasma gallisepticum* shall be handled as follows:

a. Turkey flocks, to include small groups or pairs of wild and fancy type turkeys, shall be placed under quarantine and not used for the production of hatching eggs in order to be in compliance with LSB 32 B. 2. The quarantine shall remain in effect until the flock is shipped to slaughter under permit or disposed of in a manner satisfactory to the Board.

b. Chicken and other poultry flocks shall be placed under quarantine and it is recommended that they shall not be used for the production of hatching eggs in order for hatchery to maintain its *Mycoplasma gallisepticum* disease classification. The quarantine shall remain in effect until the flock is shipped to slaughter, disposed of in a manner satisfactory to the Board or program participation is discontinued upon request in writing.

2. Flocks participaing under the *Mycoplasma synoviae* and/or *Mycoplasma meliagridis* program and designated as positive for *Mycoplasma synoviae*, *Mycoplasma meliagridis* or both shall be handled as follows:

a. Turkey, chicken and other poultry flocks shall be handled in such a manner as to carry out the intent of these two programs by pursuing the following objectives:

(1) Handle flocks designated as positive by not using hatching eggs or practice flock management procedures to avoid hatchery contamination and transmission to other poultry.

(2) Differentiate between *Mycoplasma synoviae* and *Mycoplasma gallisepticum* infection.

(3) Monitor negative flocks as required.

(4) Keep records on incidence and pattern of both diseases.

(5) Issue Mycoplasma disease classification when applicable.

Department of Public Safety
Motor Vehicle Division
Issuance and Transfer of Personalized License Plates

Notice of Hearing

Notice is hereby given that a public hearing in the above-entitled matter will be held in Room B9 Transportation Building, John Ireland Boulevard, St. Paul, MN 55155, on March 2, 1977, commencing at 9:00 a.m., and continuing until all persons have had an opportunity to be heard concerning adoption of the proposed rules captioned above.

All interested or affected persons or representatives of groups or organizations will have an opportunity to participate by submitting either oral or written data, statements, or arguments. Written materials may be submitted by mail to William Seltzer, Office of Hearing Examiners, 1745 University Avenue, St. Paul, MN either before the hearing or within 20 days after the close of the hearing.

The Commissioner proposes to adopt rules relating to the following matters:

1. Require that when a person sells a vehicle to which personalized plates have been assigned and elects to retain such plates, he must obtain regular plates before the vehicle is sold.

2. Require that upon issuance of personalized plates to a vehicle, any other valid plates assigned to that vehicle must be surrendered.

The department's authority to promulgate the proposed rules is contained in Laws of 1975, ch. 245. One free copy of the proposed rules is available and may be obtained by writing to Ms. Diane Hamilton, 210 Transportation Building, St. Paul, MN 55155. Additional copies will be available at the door on the date of the hearing.

A Statement of Need explaining the need for and reasonableness of the proposed rules and a Statement of Evidence outlining the testimony the department will be introducing at the hearing will be filed with the Office of Hearing Examiners at least 25 days prior to the hearing and will be available there for public inspection.

Pursuant to Minn. Stat. § 10A.01, subd. 11 (1974), any individual engaged for pay or other consideration for the purpose of representing persons or associations attempting to influence administrative action, such as the promulgation

of these rules, must register with the State Ethics Commission as a lobbist within five days of the commencement of such activity.

Edward G. Novak
Commissioner

Rules as Proposed

Chapter Four: Personalized Plates: Applications, Issuance, Transfer and Refunds.

MoVeh 58 Assignment of plates.

A. Personalized plates are assigned by the Division to an owner for the exclusive use of the passenger vehicle described in the application.

B. The personalized plates may be transferred to another vehicle owned by the applicant upon written notification of the registrar and:

1. payment of the prescribed fee as provided by ch. 245;

2. registration of the vehicle in Minnesota; and

3. surrender (if any) of the existing Minnesota registration plates assigned to the vehicle.

C. If an owner sells a vehicle to which personalized plates have been assigned and elects to transfer the personalized plates with the vehicle, the owner shall automatically assign to the new owner the right to reserve that combination of characters and the right to any refund of the personalized plate fees.

D. If an owner sells a vehicle to which personalized plates have been assigned and elects to retain the personalized plates, it shall be the responsibility of the owner to obtain regular passenger car plates before the vehicle is sold.

E. The applicant must surrender any valid license plates assigned to the vehicle on which the personalized plates will be displayed at such time he or she is issued personalized plates.

Board of Pharmacy

Proposed Rules Relating to Pharmacy Licenses, Continuing Education Requirements, Pharmacy Internship and Practice and Nuclear Pharmacy

Notice of Hearing

Notice is hereby given that a public hearing in the above-entitled matter will be held in the Board Room, Minnesota Department of Health Building, 717 Delaware Street, SE, Minneapolis, Minnesota, on March 18, 1977, commencing at 9:00 o'clock a.m. and continuing until all persons have had an opportunity to be heard.

All interested or affected persons will have an opportunity to participate. Statements may be made orally and written materials may be submitted at the hearing. In addition, written materials may be submitted by mail to Peter Erickson, Hearing Examiner, Office of Hearing Examiners, Room 300, 1745 University Avenue, St. Paul, Minnesota (Telephone: 612-296-8112) either before the hearing or within twenty (20) days after the close of the hearing.

Copies of the proposed rules are now available and one free copy may be obtained by writing to David E. Holmstrom, Minnesota Board of Pharmacy, 717 Delaware Street, SE, Minneapolis, Minnesota 55414. Additional copies will be available at the door on the date of the hearing. The agency's authority to promulgate the proposed rules is contained in Minn. Stat. § 151.06 subd. 1(10). A "Statement of Need" explaining why the agency feels the proposed rules are necessary and a "Statement of Evidence" outlining the testimony they will be introducing will be filed with the Hearing Examiner's Office at least twenty-five (25) days prior to the hearing and will be available there for public inspection.

Please be advised that pursuant to Minn. Stat. § 10A.01 subd. 11 (1974) any individual engaged for pay or other consideration for the purpose of representing persons or associations attempting to influence administrative action, such as the promulgation of these rules, must register with the State Ethics Commission as a lobbyist within five (5) days of the commencement of such activity by the individual.

David E. Homstrom
Secretary

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Rules as Proposed

Chapter One: Pharmacies, Wholesalers, Manufacturers

Pharm 1 Pharmacy defined. The term "pharmacy" means [a drug store or other] **an** established place regularly [registered] **licensed** by the [State] Board of Pharmacy in which prescriptions, drugs, medicines, chemicals and poisons are compounded, dispensed, vended or sold at retail. Whenever an applicable **rule or** regulation requires or prohibits action by a "pharmacy", responsibility for said action shall be that of the owner and pharmacist-in-charge thereof, whether said owner is a sole proprietor, partnership, association, corporation or otherwise.

Pharm 2 License required. No persons shall conduct a pharmacy in the state of Minnesota unless [it] **such pharmacy** is licensed [and registered] by the [State] Board of Pharmacy. A fee set by the Board [but not to exceed that prescribed by statute] shall be charged for each license [and registration].

Pharm 3 Form of application and license. Applications for the licensing [and] [registration] of a pharmacy and renewal thereof shall be on such form or forms as the [State] Board of Pharmacy may from time to time prescribe and the license [and registration] of such pharmacy shall be issued by the [State] Board of Pharmacy in such form as it may from time to time prescribe.

[Each license registers the pharmacy for which application for licensing and registration was made.]

[Pharm 4 Licenses, Annual Registration Date and Fees. Each pharmacy license shall expire on June 30 of each year and shall be renewed annually by filing an application therefore, on or before June 1 of each year, together with a fee set by the Board but not to exceed that prescribed by statute.]

Pharm 4 License, annual licensing date and fees. Each pharmacy license shall expire on June 30 of each year and shall be renewed annually by filing an application therefor, on or before June 1 of each year, together with a fee of $40. (Beginning January 1, 1978 said fee shall be $50.) Renewal applications received on or after July 1 shall be subject to a late filing fee of $20 in addition to the renewal fee.

Every person engaged in manufacturing or selling of drugs, medicines, chemicals or poisons for medicinal purposes other than at retail shall annually be licensed by the Board. Upon the filing of an application therefor, and upon payment of a fee of $50, the Board may issue a license in such form as it may prescribe to such manufacturer or wholesaler. (Beginning January 1, 1978 said fee shall be $75.) Such license shall be exposed in a conspicuous place in the manufacturer's or wholesaler's place of business for which it is issued, shall expire on the 10th day of June of each year and shall be renewed annually upon the filing of an application therefor with a fee of $50. (Beginning January 1, 1978 said fee shall be $75.) Renewal applications received after June 10 shall be subject to a late filing fee of $25 in addition to the renewal fee.

Pharm 6 Separate license required. A separate license shall be required for each pharmacy and is not transferable. The following shall be deemed a transfer **requiring relicensure**:

A. [(a)] The sale of all or substantially all of the assets of the pharmacy,

B. [(b)] The addition **or deletion** of one or more partners in a partnership, to which a pharmacy license has been issued.

C. [(c)] The change of ownership of [30%] **20%** or more of the **issued** voting stock of a corporation pharmacy since the issuance of the license or the last renewal thereof. This shall not apply to any corporation, the voting stock of which is actively traded on any securities exchange or in any over the counter market,

D. [(d)] The change in ownership from one form to another; sole proprietor, partnership or corporation.

Pharm 7 Access, space and security requirements. No person shall be issued a license to conduct a pharmacy unless such pharmacy:

A. [(a)] Has an entrance which affords the public reasonable access to the pharmacy,

B. [(b)] Contains more than 400 and less than 12,500 square feet.

[(c) Contains only one floor level devoted to the compounding, dispensing or sale of drugs,]

C. [(d)] Is surrounded by a continuous partition or wall extending from floor to ceiling, which wall shall contain doors capable of being securely locked to prevent entry when the pharmacy is closed.

In the interest of public health the Board may waive any of these provisions for pharmacies located in hospitals. [Any pharmacy, except a pharmacy located in a hospital, which had been granted a license prior to the effective date hereof and which does not comply with one or more of the requirements set forth in Subdivision (a) through (d) above, shall be given one year from the date hereto to comply therewith.]

Pharm 8 Change in location, dimension, or security.

A. Before a duly licensed [and registered] pharmacy changes the location of its business, it shall first submit to the [State] Board of Pharmacy a new application for a license [and registration] setting forth such changes, and shall submit therewith the information and documents required in an intitial application for license [and registration]. **The new application and supporting documents shall be submitted at least 60 days prior to the proposed change in location.** If the [State] Board of Pharmacy approved such application, no additional charge shall be made for such new license.

B. No duly licensed [and registered] pharmacy shall change its physical dimensions or elements of physical security until it has submitted documents and plans of the proposed changes to the [State] Board of Pharmacy. **Such documents and plans shall be submitted at least 60 days prior to the proposed changes.** The Board shall within 30 days after receipt of the proposed changes notify the licensee that the proposed changes either comply or do not comply with Regulation 7. The failure of the Board to respond in writing within said 30 days shall be deemed to be approval of the proposed changes.

[Pharm 9 Qualifications of applicant. Repealed 11-26-69]

Pharm [10] **9** Pharmacist on duty. Each pharmacy shall have at least one [registered] **licensed** pharmacist on duty and physically present in the pharmacy at all times that the pharmacy is open for the transaction of business.

[Pharm 11 Minimum Equipment Required in Pharmacies. Each pharmacy must have on file the latest edition or revision of at least two of the following references:

(a) U.S. Pharmacopeia

(b) National Formulary

(c) U.S. Dispensatory

(d) Remington's Pharmaceutical Sciences

(e) American Hospital Formulary Service

(f) Physician's Desk Reference

(g) Facts and Comparisons

(h) Merck Manual

(i) Pharmindex

(j) The Pharmacological Basis of Therapeutics

(k) Modern Drug Encyclopedia

(l) An equivalent reference approved by the Board in writing

In addition, each pharmacy must also have the following minimum equipment:

(a) One prescription balance, class "A" as specified in regulations of the Department of Weights and Measures.

(b) One set of accurate Apothecary weights ½ grain to two drams.

(c) One set of accurate Metric weights from 50 mg. to 100 Gm.

(d) Counter scale and weights.

(e) Measuring device capable of accurately measuring volumes from fifteen minims to at least one pint; and from 1cc. to at least 500cc.

(f) Mortars and Pestles — at least one 2 oz; at least one 8 oz; and at least one pint size.

(g) Spatulas — stainless steel, at least three assorted sizes; and one non-metallic medium size.

(h) Funnels, one 2 oz; one 8 oz; one 16 oz.

(i) Stirring rods — at least one each, glass and rubber.

(j) Heating apparatus.

(k) One prescription counter with sufficient drawers and storage space.

(l) Suitable refrigeration.

(m) Narcotic drug locker or safe.

(n) Counter sink.

(o) Toilet with a hand washing lavatory and disposable towels in a location which is reasonably accessible.

(p) Proper sanitary conditions shall be maintained at all times.]

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Pharm [11] 10 Minimum equipment required in pharmacies. Each pharmacy must have on file in addition to the most recent editions of the laws relating to the practice of pharmacy and the rules of the Board of Pharmacy (available through Documents Section, Department of Administration), the latest edition or revision of the U.S. Pharmacopeia — National Formulary and at least one reference from each category:

A. Pharmacology — examples:

1. Pharmacology in Medicine

2. Pharmacological Basis of Therapeutics

3. Merck Manual

4. Pharmindex

5. United States Dispensatory

B. Dosage and Toxicology — examples:

1. Hazards of Medications

2. American Hospital Formulatory Service

3. Facts and Comparisons

4. Pediatric Dosage Handbook

5. Evaluation of Drug Interactions (APhA)

C. Miscellaneous — examples:

1. Handbook of Non-Prescription Drugs

2. Modern Drug Encyclopedia

3. Physician's Desk Reference

4. Remington's Pharmaceutical Sciences

An equivalent reference approved by the Board in writing may be utilized in an appropriate category.

D. In addition, each pharmacy must also have the following minimum equipment, clean and in good working order:

1. One prescription balance, Class "A" as specified in regulations of the Department of Weights and Measures,

2. One set of accurate Metric weights from 50 mg. to 100 gm.,

3. Measuring devices capable of accurately measuring volumes from 1cc. to at least 500cc.,

4. Mortars, pestles, spatulas, funnels, stirring rods, and heating apparatus as necessary to meet the needs of that pharmacy,

5. Suitable Refrigeration,

6. Sink with hot and cold running water,

7. Toilet with a handwashing lavatory and disposable towels in a location which is reasonably accessible.

8. Other equipment deemed necessary by Pharmacist-in-charge.

[Pharm 12 Sale of drugs restricted to limited area under supervision. Hereafter the Board of Pharmacy of the State of Minnesota shall refuse to register or grant a license to any pharmacy which advertises, sells, or proposes to sell therein, merchandise in any manner, like or similar to the manner in which merchandise is sold in super markets or other stores commonly known as self-service stores using one or more check-out counters, unless there is provided in such pharmacy a drug area which shall be used exclusively for the display, sale, compounding and dispensing of drugs, medicines, chemicals, poisons, and for the display and sale of other items used in the cure, mitigation, treatment, or prevention of disease in man or other animals; which drug area shall include within it the prescription department of such pharmacy. Any sale of drugs, medicines, chemicals or poisons must be made and completed in its entirety within the drug area by or under the personal supervision of a pharmacist or of an assistant pharmacist in the temporary absence of the pharmacist.]

Pharm [12] 11 Sale of drugs restricted to limited area under supervision. Hereafter the Board of Pharmacy shall refuse to grant a license to any pharmacy or proposed pharmacy unless there is provided in such pharmacy a prescription department and a drug area which shall be used exclusively for the display, sale, compounding and dispensing of drugs, medicines, chemicals, poisons, and for the display and sale of other items used in the cure, mitigation, treatment, or prevention of disease in man or other animals.

Pharm 12 Each pharmacy shall maintain clean and sanitary conditions at all times.

[Pharm 13 Self-service of drugs. Repealed 11-26-69]

Pharm [14-20] **13-20** Reserved for future use.

Chapter Two: Pharmacists

Pharm 21 Pharmacist-in-charge, requirements, definition

and duties. No person shall conduct a pharmacy without a pharmacist-in-charge who shall be **a pharmacist regularly employed in the prescription department and shall be** designated in the application for license [and registration,] each renewal thereof or pursuant to Pharm 23. The term "pharmacist-in-charge" means a duly licensed pharmacist in the State of Minnesota who has been so designated, and it shall be his duty and responsibility consistent with the accepted standards of professional conduct and practice and in compliance with all applicable laws and regulations:

A. [(a)] To establish for the employees of the pharmacy, policies and procedures for the procurement, storage, compounding and dispensing of drugs.

B. [(b)] To supervise all of the professional employees of the pharmacy.

C. [(c)] To supervise all of the non-professional employees of the pharmacy insofar as their duties relate to the **procurement,** sale and/or storage of drugs, **to develop appropriate detailed written procedures directing these activities, and to submit these procedures to the Board in accordance with Pharm 36.**

D. [(d)] To establish and supervise the method and manner for the storing and safekeeping of drugs.

E. [(e)] To establish and supervise the recordkeeping system for the purchase, sale, possession, storage, safekeeping and return of drugs.

F. [(f)] To notify the Board immediately upon his knowledge that his services as pharmacist-in-charge have been or will be terminated.

Pharm 23 Pharmacist-in-charge, termination of service. Each pharmacy shall notify the [State] Board of Pharmacy immediately upon knowledge of the termination of the services of the pharmacist-in-charge and further, shall immediately designate a successor pharmacist-in-charge and immediately notify the [State] Board of Pharmacy of such designation. The [State] Board of Pharmacy upon receiving such notice shall furnish the successor pharmacist-in-charge such form or forms as it may from time to time prescribe which form or forms must be completed by the successor pharmacist-in-charge and filed with the [State] Board of Pharmacy within 10 days after receipt thereof.

Pharm 25 [Posting of License] **Licenses: annual renewal, fees, posting. Each pharmacist license shall expire on March 4 of each year and shall be renewed annually by filing an application therefor on or before March 1 of each year, together with a fee of $25. (Beginning January 1, 1978 said fee shall be $35). Any pharmacist license renewal application submitted after March 4 shall be subject to a late filing fee of $15 in addition to the renewal fee.**

Each pharmacist shall post his license or renewal thereof, in a conspicuous place **readily visible to the public,** within the pharmacy in which he is practicing his profession.

Pharm 26 [Re-Examinations] **Licensure.**

A. Applicants for licensure by examination shall submit a completed application for examination including affidavits of internship, a copy of applicants' birth certificate and a recent photograph. Applicants not citizens of the United States must have filed and proved their intention of becoming citizens. All applicants shall show evidence of graduation from a college of pharmacy or a department of pharmacy of a university approved by the Board and meeting at least the minimum standards set by the American Council on Pharmaceutical Education in the 7th Edition of its accreditation manual. Such evidence shall be shown by submitting a final transcript showing the date on which degree was conferred. The above listed documents together with a check for $75 must be submitted to the Board at least 30 days prior to the examination.

B. Any applicant who has failed to pass the examination required by Minn. Stat. §§ 151.06, 151.07, 151.10 or 151.12, may retake such examination within the next ensuing fourteen months, provided that no applicant who has failed in three examinations shall be permitted to take a further examination, except upon petition setting forth facts acceptable to the Board. The applicant shall, at least 30 days before an examination, notify the Board in writing of his intentions to retake the examination, certifying that information furnished on his original application remains true and correct, or reporting any changes therein, including additional education and experience, and shall submit a fee of [$50] **$75** payable to the State Treasurer. The board reserves the right to request a full and complete application.

C. Examination or license fees paid to the board shall not be returned.

D. An applicant who has failed to successfully pass the Minnesota Board of Pharmacy licensure examination shall not be eligible for licensure by reciprocity.

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Pharm 27 Continuing education requirements.

A. [(a)] Definitions.

1. [(1)] Continuing pharmaceutical education shall include but is not limited to professional post graduate education in any of the following subjects:

(a) [(aa)] Properties and actions of drugs and drug dosage forms;

(b) [(bb)] Etiology, characteristics and therapeutics and the disease state;

(c) [(cc)] Pharmacy practice;

(d) [(dd)] Legal, psychological and socio-economic aspects of health care delivery.

2. [(2)] Accredited program of Continuing Pharmaceutical Education means that a pharmacist must complete at least [25] **30** hours of credit in programs which are accredited by the [State] Board of Pharmacy.

3. [(3)] Accredited programs means those classes, conferences, correspondence study courses, institutes, lectures, professional meetings, programmed learning courses, journal readings, seminars, study groups, or comparable educational activities in Continuing Pharmaceutical Education which are accredited by the [State] Board of Pharmacy.

B. [(b)] Requirements for Continuing Pharmaceutical Education. Commencing March 4, 1975, no annual license renewal shall be issued to a pharmacist pursuant to Minn. Stat. § 151.13 until such pharmacist shall have submitted to the board satisfactory evidence that he has completed an accredited program of Continuing Education during the previous two year period. Thereafter, each pharmacist shall submit such evidence every two years. **The Board may grant a pharmacist, upon application, an extension of time not to exceed one year to comply with the requirements of this Rule. Such extension shall not relieve the pharmacist from complying with the Continuing Education requirements for any other two year period.**

C. [(c)] Accreditation of programs. Application may be made by an association, corporation, educational institution, organization, or person to have a program designated as an accredited program and shall be made on forms provided by the board. The applicant shall show evidence of an ability to conduct the program and must maintain records of program content and attendance for not less than three years following completion of such program. Applications shall be submitted not less than 60 days prior to the commencement of the program. The Board shall assign the number of credit hours to each program and shall accredit or deny accreditation of such application within 30 days of receipt of the application.

D. [(d)] Revocation or suspension of an accredited program. The Board may deny, refuse to renew, revoke, or suspend authorization or accreditation previously furnished to sponsors of an accredited program if the program fails to conform to its application accredited by the Board, fails to furnish program content as publicized, or if the sponsor or program violates any provision of Laws of 1973, ch. 655, or this [regulation] **rule.**

E. [(e)] Hours of credit.

1. [(1)] Credit shall be earned on the basis of attendance or, in the case of correspondence courses, completion of a program. Failure to attend or complete an accredited program shall be the only reason for rejecting program credit hours.

2. [(2)] Credit for an identical program may be given only once to any individual during any reporting period.

F. [(f)] Credit for a presentation of professional lectures. Pharmacists may apply for credit of presentation of in-service training programs or lectures consisting of subjects included in the definition of Continuing Pharmaceutical Education, however, credit shall not be allowed for the preparation or presentation of programs or lectures for which academic credit may be granted to the pharmacy student. Such pharmacists need not apply for accreditation of the program provided that hours of credit applied for do not exceed the number of hours required to present the in-service training program or lecture, and, further provided that information, such as a class syllabus or lecture manuscript, he made available upon requests to document the presentation of the in-service training. Credit for presentation of the in-service training programs or other lectures will be granted only once for any given program or lecture.

G. [(g)] Advisory [Council] **Task Force** on Continuing Education. **The Advisory Task Force shall consist of not more than ten members. Five members of the Advisory Task Force shall be pharmacists designated by the Minnesota State Pharmaceutical Association, three members shall be pharmacists designated by the College of Pharmacy of the University of Minnesota and two members shall be designated by the Board.** The Advisory [Council] **Task Force** on Continuing Education shall meet at least quarterly and shall annually elect a chairman and vice chairman from its membership. The secretary of the [State] Board of Pharmacy shall act as secretariat to the Advisory [Council] **Task Force.**

H. [(h)] List of accredited programs. The Board shall maintain a record of accredited programs including the

hours of credit assigned to each program. [Such] [records are to be made available to any registrant upon request.]

I. [(i)] Non-accredited programs. Pharmacists may apply for credit for inclusion of programs not previously accredited by the Board, provided that the name and address of the program sponsor and all of the information required by the Board in compliance with Section C is submitted to the Board within 45 days after completing the program. Such programs shall be subject to all of the standards herein provided.

J. [(j)] Program promotion. No reference shall be made by a program sponsor in publicizing a program that it is an "accredited program sponsor" or other reference indicating endorsement by the Board except as follows: "This program is accredited by the Minnesota [State] Board of Pharmacy for ___ hours of Continuing Education credit."

Pharm 28 Reciprocity.

A. Applications for reciprocal licensure (licensure as a pharmacist on the basis of licensure as a pharmacist in another state) together with a fee of $150 shall be filed with the secretary of the Board at least 30 days prior to the date said application is to be considered by the Board. The Board will consider applications for reciprocity in at least January and June of each calendar year.

B. To be found eligible for consideration by the Board;

1. Candidate must have practiced in the profession for at least one year after licensure in another state which is an active member of National Association of Boards of Pharmacy before he will be deemed eligible to reciprocate to Minnesota.

2. Applicant, if examined and licensed prior to January 1, 1973, shall show that he has acquired 2,080 hours of practical pharmacy experience under the instruction of a licensed pharmacist.

3. Applicant, if examined and licensed after January 1, 1973, shall show that he has acquired 1,500 hours of practical pharmacy experience under the instruction of a licensed pharmacist; said 1,500 hours to be acquired after the successful completion of the third year of the standard five year pharmacy curriculum, 400 hours of which may be acquired: concurrently with college attendance, in clinical pharmacy programs, or in demonstration projects which have been approved by the Tripartite Committee on Internship and the Board of the active member state from which he applies.

C. Defects in internship experience will not preclude an applicant from being deemed eligible provided that said applicant shall have practiced as a licensed pharmacist for one year, plus one week at 40 hours per week for each week or portion thereof that he is deficient in internship experience. (i.e., the number of weeks in excess of one year the applicant has practiced as a licensed pharmacist prior to applying for reciprocity must be equal to or greater than the number of weeks or portions thereof that he is deficient in internship experience.)

D. The Board may compel applicants who have not engaged in practice as a licensed pharmacist for the two years immediately preceding the time of filing of their application for reciprocity to take a practical examination.

E. Applicants for reciprocal licensure shall be required to display their familiarity with the laws regulating the practice of pharmacy in Minnesota by submitting to a written and oral examination on the Minnesota laws and regulations and the federal laws and regulations governing the practice of pharmacy.

Pharm [28-30] **29-30** Reserved for future use.

Chapter Three: Professional Practice

Pharm 31 Vending machines. It shall be deemed unlawful to distribute, dispense or vend any legend drug by automatic or vending machine. **Provided, however, that nothing in this rule shall prohibit a licensed hospital receiving pharmaceutical services from a licensed pharmacy on the premises, from utilizing such a device in an emergency, after regular pharmacy hours, when the hospital's pharmacist shall have complete control over the monitoring of drug therapy, packaging, labeling, filling, recordkeeping and security of the drugs involved and of the device, and when such device is utilized in compliance with all other state and federal laws and regulations regarding the distribution of legend drugs.**

Pharm 33 Mail order sale. Hereafter no pharmacist or pharmacy shall solicit **or participate in the solicitation,** by advertising of any kind the sale or distribution of drugs [by] **requiring a** prescription by any mail order plan of any form. The mail order sale **or distribution** of drugs [by] **requiring a** prescription is prohibited whenever such sale

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has been solicited by advertising of any kind by any person or persons. No pharmacists or pharmacy shall accept or fill a prescription which has been received by mail and that has been written by a practitioner not licensed to practice his profession in this state.

[Pharm 36 Compounding and Dispensing. The practice of compounding and dispensing a prescription includes, but is not limited to the following acts, which shall be performed only by a pharmacist, assistant pharmacist, or pharmacist-intern under the immediate and personal supervision of a pharmacist.

(a) Receipt of prescriptions, written or oral, (except that written prescriptions may be received by an agent of the pharmacist if the patient is immediately adjacent to prescription area and pharmacist to enable professional communication and consultation directly with the pharmacist).

(b) Verification of prescribed dosage within proper limits.

(c) Reading, interpretation and transcription to the prescription label, or verification of the transcription by initialing the label, of the prescriber's directions for use in a manner that communicates his directions for use precisely, and with assurance of understanding by the patient.

(d) Selecting, compounding, mixing, combining, measuring, counting or otherwise preparing the drug or drugs needed to fill the individual prescription.

(e) Permanently affixing properly prepared label to the container of the prescription medication.

(f) Return of completed prescription medication to patient (except that completed prescription medication may be transmitted by an agent of the pharmacist if patient is immediately adjacent to pharmacist and prescription area to enable professional communication and consultation with the pharmacist).

(g) Obtaining, when required by law and in the best professional practice, permission to refill from authorized prescribers, and noting on the reverse side of the prescription the following data:

(1) Date refilled,

(2) Initials of practitioner authorizing refill (if different from original prescriber),

(3) Quantity of drug dispensed if different from the original prescription,

(4) Initials or signature (when required) of person refilling prescription.

(h) Supervision of non-pharmacist personnel in limited non-professional duties such as: looking up prescription refills, filing prescriptions, recordkeeping, non-professional aspects of presenting completed medications to patients and completing transaction, delivery.

Nothing in paragraphs one and six of this regulation shall prevent hospital pharmacists from accepting prescription orders or returning prescription medications via normal accepted in-patient hospital drug distribution practices.]

Pharm 36 Compounding and dispensing. The practice of compounding and dispensing a prescription includes, but is not limted to the following acts, which shall be performed only by a pharmacist, assistant pharmacist, or pharmacist-intern under the immediate and personal supervision of a pharmacist.

A. Determination of brands and suppliers.

B. Receipt of verbal prescriptions.

C. Verifying the prescription order. Verification of validity and propriety must be of the original prescription order. A copy, rewritten or verbal is not acceptable.

D. Selecting the drug to be used in filling the prescription.

E. Extemporaneous compounding on an individual basis.

F. Certifying the completed prescription. In certifying and documenting the completed prescription order, the pharmacist shall include:

1. Checking of the original labeled container from which the medication was withdrawn,

2. Checking of the labeling on the prescription medication container,

3. Checking the contents of the prescription medication container and the appearance of the total product,

4. Checking the patient's medication record, when utilized, for possible therapeutic incompatibilities and the accuracy of the addition to the record of the medication dispensed,

5. Initialing of the prescription by the pharmacist performing the certification.

G. Issuing the prescription to the patient in order to assure that the patient understands the use of the medication, the cautions and the proper storage of the drug

when in the professional judgment of the pharmacist such counsel is necessary.

H. Obtaining, when required by law or by the best professional practice, permission to refill from authorized prescribers of their agents, and noting on the reverse side of the prescription the following data:

1. Date refilled,

2. Name of practitioner authorizing refill (if different from original prescriber),

3. Quantity of drug dispensed (if different from the original prescription),

4. Initials of the pharmacist refilling the prescription.

I. Supervising non-pharmacist supportive personnel utilized in the performance of certain pharmacy tasks. (The nature of these tasks shall be such that they permit adequate checking by a pharmacist and do not require professional judgment. Non-pharmacist supportive personnel may be utilized in the performance of these tasks only after appropriate detailed written procedures directing these activities have been developed by the pharmacist-in-charge and have been submitted to and approved by the board).

The ratio of supportive personnel performing allowable delegated tasks to pharmacists responsible for their supervision shall not exceed 1:1 at any time, provided, however, that pharmacist preceptors responsible for the supervision of a pharmacist-intern may supervise one such supportive person in addition to the intern.

Appropriate procedures directing the activities of non-pharmacist, personnel performing non-professional, clerical duties such as typing, looking up refills, filing prescriptions, recordkeeping, etc., are to be maintained in the pharmacy.

Pharm 37 Unprofessional conduct. Unprofessional conduct shall include, but is not limited to, the following acts of a pharmacist or pharmacy:

A. [(a)] The assertion or inference in a public manner of professional superiority in the practice of pharmacy,

B. [(b)] The publication or circulation of false, misleading or otherwise deceptive statements concerning the practice of pharmacy,

C. [(c)] Refusing to compound and dispense prescriptions which may reasonably be expected to be compounded or dispensed in pharmacies by pharmacists,

D. [(d)] Participation in agreements or arrangements with any person, corporation, partnership, association, firm, or others involving rebates, "kickbacks", fee-splitting, or special charges in exchange for professional pharmaceutical services,

E. [(e)] Discriminating in any manner between patients or groups of patients, for reasons of religion, race, creed, color, sex, **age** or national origin,

F. [(f)] Refusing to consult with patrons or patients concerning contents, therapeutic values and uses of **prescription or** non-prescription drugs, chemicals or poisons,

G. [(g)] Requiring an individual patient to be a member of any organization, association or other group as a condition for obtaining the professional services of a pharmacist,

H. [(h)] The violation of any law, rule, regulation or ordinance of the State or any of its political subdivisions, including the [State] Board of Pharmacy, or the United States government or any agency thereof relating to the practice of pharmacy,

I. [(i)] Divulging or revealing to others the nature of professional pharmaceutical services rendered to a patient without his expressed consent orally or in writing or by order or direction of a Court. This shall not prevent pharmacies from providing information copies of prescriptions to other pharmacies or to the person to whom the prescription was issued and shall not prevent pharmacists from providing drug therapy information to physicians for their patients,

J. [(j)] Participation in institutional drug distribution as a consultant without providing pharmaceutical services in accordance with accepted principles of pharmacy practice and in compliance with Federal and State laws or regulations,

K. [(k)] Prescription drug price information may be provided to the public only by a pharmacy, so long as it is not violative of any federal or state laws applicable to the advertisement of such articles generally and if all of the following conditions are met:

1. [(1)] No representation or suggestion concerning the drug's safety, effectiveness, indications for use or competitive comparison shall be made;

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2. [(2)] No reference shall be made to controlled substances listed in Schedule II-IV of the latest revision of the Federal Controlled Substances Act, and the [Regulations] **Rules** of the Minnesota [State] Board of Pharmacy;

3. [(3)] The termination date for the prices listed shall be stated in the ad.

The public promotion, direct or indirect, of drugs requiring a prescription, narcotics, depressants, or stimulants is hereby declared to be an act of unprofessional conduct. The reference in any advertistement in any media or other means of the term "cut rate", "discount", "bargain", or terms of similar connotation in connection with drugs requiring a prescription or for pharmaceutical services thereto shall be included within the meaning of public promotion.

L. The selling, giving away, or otherwise disposing of accessories (i.e., glassine papers, empty capsules, quinine, lactose, or similar products found in illegal drug traffic), chemicals, or drugs by a pharmacist when he knows or should have known of their intended use in illegal activities.

Pharm 40 Prescription labeling. All drugs dispensed to or for a patient (other than an in-patient of a hospital) shall be labeled with the following information:

A. [(a)] Identification of pharmacy

B. [(b)] Patient's name

C. [(c)] Prescription number

D. [(d)] Name of prescribing practitioner

E. [(e)] Directions for use

F. [(f)] Generic or trade name of drug and strength (except when specified by prescriber to the contrary).

1. [(1)] In the case of combining premanufactured drug products, the names of the products, or a category of use name shall suffice.

2. [(2)] In the case of compounding basic pharmaceutical ingredients, the common pharmaceutical name (if such exists), the names and strengths of the principle active ingredients or a category of use label shall suffice.

[Some Examples

Equanil, 400 mg.

Meprobamate, 400 mg.

Donnatal

Coriforte

Cosanyl/Cheracol a.a.

Calamine Lotion/Phenol 0.5%

Compounded Expectorant

White Lotion

Salicylic Acid 5%, Resorcin 5%, in Flexible Collodion

Keratolytic Ointment]

G. Name of the manufacturer of the finished dosage form of the drug.

H. [(g)] Auxiliary labels, as needed

I. [(i)] Date of original issue or renewal

Pharm 41 Labeling of controlled substances and certain other drugs. All drugs classified as controlled substances under Minn. Stat. § 152 and Pharm 51, antihistamines, psycho-therapeutic agents, and other drugs deemed appropriate in the professional judgment of the pharmacist and dispensed to or for an adult patient (other than an in-patient of a hospital or nursing home) shall be labeled according to the requirements of Pharm 40 and in addition shall contain the following:

"Caution: Taking this drug alone or with alcohol may impair your ability to drive."

Pharm 43 Electronic data processing.

A. When electronic data processing equipment is employed by any pharmacy, input of drug information may be performed only by a pharmacist or under the immediate and personal supervision of a pharmacist. The pharmacist must certify the accuracy of the information to be entered and verify the prescription order at the time of entry. The identity of such pharmacist must be carried in the record.

B. Electronic data processing equipment, when used to store prescription information must:

1. Guarantee the confidentiality of the information contained in the data bank.

2. Be capable of producing a hard copy daily summary of controlled substance transactions.

3. Be capable of recording and carrying in the record all dates of refills of any prescription and initials of the pharmacist which shall act in lieu of the requirements of Pharm 36 (h)(4).

4. Be capable of producing a patient profile indicating all drugs being taken and the dates of refills of these prescriptions.

5. Be capable of being reconstructed in the event of a computer malfunction or accident resulting in destruction of the data bank.

C. In all cases where electronic data processing equipment is used the original prescription must be retained on file according to law to assure access to the information contained thereon in the event of a computer breakdown.

Pharm 44 Poisons. For the purpose of this regulation, poisons shall be deemed to mean any substance except drugs or medicines which has the inherent capability to produce bodily harm, injury, or morbidity to man or beast through ingestion, inhalation, or absorption through or from any body organ or surface and shall include, but not be limited to, substances that are toxic, caustic, corrosive, sensitizing, extremely flammable or explosive alone or in mixtures and whose label bears the signal word "Poisons" or cautionary words such as "Caution", "Warning", "Danger", etc. intended to signal a use alert.

Pharm 45 Sale of poisons. Sales of poisons or hazardous substances shall be made only by a registered pharmacist or by a pharmacy intern under the direct supervision of a pharmacist. Each such transaction shall be entered into a poison register with pen and each entry shall show the date and time of day, the name and quantity of substance, the proposed use, the name, address, and signature of the purchaser, and the signature of the seller. No such substance shall be sold without the pharmacist first determining the propriety of the purported use and satisfying himself that such purchaser has produced proof of identity and legal age.

Economic poisons and simple proprietory preparations in the original manufacturer's container may be entered into the poison register pursuant to the above requirement if called for by the best professional judgment of the pharmacist.

Pharm 46 Labeling of poisons. All poisons sold, except when in the original manufacturer's container or on the written prescription of a licensed practitioner, shall bear a label containing the word "Poison", the name and quantity of the substance, and the name and business address of the seller. In addition the package labeling shall contain the following information in accordance with the Hazardous Substance Labeling Act.

A. Name of the substance

B. The name and business address of the manufacturer or repackager

C. The word "POISON" in letters no smaller than the largest print on the label. For extremely dangerous substances this must be accompanied by the "skull and crossbone."

D. The word "Caution", "Warning", "Danger" or some such signal word of warning together with the specific indication necessitating its use.

E. The name and quantity of each toxic, poisonous, caustic, or corrosive constituent together with directions for treatment in case of accidental injury.

F. The added warning "Keep Out of the Reach of Children".

Pharm [41-50] **47-50** Reserved for future use.

Pharm 51 Controlled substances.

Sections (a) (1), (2), (4) remain unchanged.

3. [(3)] Any material, compound, mixture or preparation which contains any quantity of the following hallucinogenic substances, their salts, isomers and salts of isomers, unless specifically excepted, whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designation:

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Statutory Name	Some examples of common names, trade names, or names of products which contain a controlled substance.
3, 4-Methylenedioxy Amphetamine	MDA
4-Bromo-2, 5-Dimethoxyamphetamine	
2, 5-Dimethoxyamphetamine	
4-Methoxyamphetamine	
5-Methoxy-3, 4-Methylenedioxy Amphetamine	MMDA
Bufotenine	
Diethyltryptamine	DET
Dimethyltryptamine	DMT
3, 4, 5-Trimethoxy Amphetamine	TMA
4-Methyl-2, 5-Dimethyloxyamphetamine	DOM, STP
Ibogaine	
Lysergic Acid Diethylamide	LSD
Marijuana	
Mescaline	
N-ethyl-3-Piperidyl Benzilate	JB-318
N-methyl-3-Piperidyl Benzilate	JB-336
Psilocybin	
Psilocyn	
Tetrahydrocannabinols	THC
1- [1-(2-Thienyl) Cyclohexy] Piperidine	

5. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances having a depressant effect on the central nervous system including its salts, isomers, and salts of isomers whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designation: Mecloqualone

Chapter Five: Internship

Pharm 61 Internship. A regulation for the purpose of defining and regulating the internship experience of prospective pharmacists as required by Minn. Stat. § 151.10 and § 151.101.

This regulation shall take effect immediately but the provisions contained herein shall not nullify any period of internship service by any individual previous to its adoption provided such period of internship is filed in a proper manner with the secretary of the [State] Board of Pharmacy.

A. [(a)] Definitions.

1. [(1)] "Pharmacist Intern" and "Intern" means (1) a natural person satisfactorily progressing toward the degree in pharmacy required for licensure, or (2) a graduate of the University of Minnesota College of Pharmacy, or other pharmacy college approved by the board, who is registered by the [State] Board of Pharmacy for the purpose of obtaining practical experience as a requirement for licensure as a pharmacist, or (3) a qualified applicant awaiting examination for licensure.

2. [(2)] "Preceptor" means a natural person licensed as a pharmacist by the [State] Board of Pharmacy, and who participates in instructional programs approved by the Board.

3. [(3)] "Hour" means the standard 60 minute division of time.

4. [(4)] "Supervision", as used in connection with this regulation, means that in the pharmacy where the intern is being trained, a registered pharmacist designated as preceptor, or another registered pharmacist, shall be in continuous personal contact with and actually giving instructions to the intern during all professional activities of the entire period of his internship.

5. [(5)] "Concurrent time" means internship experience gained during the fourth and fifth academic years only, while a person is a full-time student carrying, in any given school term, at least 75% of the average number of credit hours per term needed to graduate within five years.

6. [(6)] "Approved clinical program" means a clinical program approved by the Internship Advisory Committee and the [State] Board of Pharmacy, which is a patient oriented instructional program involving actual patient contact activities, including, but not limited to; patient rounds, medication histories, patient drug education and clinical conferences.

7. [(7)] "Approved Externship Program" means an undergraduate program of practical experience administered by a college of pharmacy approved by the board.

8. [(8)] "Quarter" means that amount of internship time gained during a three month period of time, but not to exceed 700 hours.

B. [(b)] Registration and reporting.

1. [(1)] Every person shall register with the board before beginning his internship in this state. **Applications for the registration of a pharmacist-intern shall be on such form or forms as the Board of Pharmacy may from time to time prescribe and shall be accompanied by a fee of $20.** Registration shall remain in effect during successive quarters of internship training if progress reports, examinations, and affidavits of experience as required by the board are submitted promptly upon beginning or terminating employment, and if the board is satisfied that the registrant is in good faith and with reasonable diligence pursuing a degree in pharmacy.

Credit for internship time will not be granted unless registration, progress reports and affidavits of experience for preceding time are completed and received.

2. [(2)] The pharmacist-intern shall be so designated in his professional relationships, and shall in no manner falsely assume, directly or by inference, to be a pharmacist. The board shall upon proper registration issue to the intern a pocket registration card for purposes of identification and verification of his role as an intern, which card shall be surrendered to the secretary of the board upon termination of the internship program.

3. [(3)] All registered interns shall notify the board immediately upon change of employment or residence address.

4. [(4)] The intern [shall] **may be required** to maintain additional records of his professional activities. Such records, which shall be submitted after the completion of each quarter of internship, are to be prescribed by the board for the purpose of recording details of the scope of internship experience and may include examinations to test the competency of interns. **Such examinations shall be administered approximately quarterly at such times and locations as the board may designate.**

5. No person who terminates his efforts towards the completion of the educational prerequisites of licensure is entitled to the continued privileges of internship registration.

6. No person not properly registered with the board as a pharmacy intern shall take, use, or exhibit the title of pharmacy intern, pharmacy apprentice, pharmacy extern, or any other term of similar or like import.

C. [(c)] Training requirements. The intent of this regulation is to provide a proper preceptor-intern (teacher-student) relationship within the context of the employer-employee relationship; provide a broad base of internship experience and to supplement didactic academic training in a manner which prepares the intern for all aspects of the practice of pharmacy.

1. [(1)] Nothing in this regulation shall imply that the standards described herein are acceptable to other states on a reciprocal basis.

2. [(2)] When an intern desires to obtain credit for training received in a state other than Minnesota, he shall abide by all the provisions of the internship regulations in that state, and shall provide evidence from that state's board of pharmacy that his internship training has been completed in compliance with the internship standards of the National Association of Boards of Pharmacy and with the standards herein provided. Where a possible conflict may exist between the provisions of this regulation and the requirements of the state in which the intern is training the intern shall contact the secretary of the State Board of Pharmacy in his state and outline any possible problem.

3. [(3)] No more than one intern shall be trained by a preceptor at one time.

4. [(4)] Upon registration, interns and preceptors will be furnished guides and objectives for internship training. The guides are furnished to suggest appropriate types and order of training experience and shall be used to insure that the intern's practical experiences are commensurate with his educational level, and broad in scope.

5. [(5)] Applicants for licensure as pharmacist who are examined and licensed after September 17, 1973, shall submit evidence that they have successfully completed not less than 1,500 hours of internship under the instruction and supervision of a preceptor. Credit for internship shall be granted only to registered interns who have begun the fourth year of the five year pharmacy curriculum, provided, however, that:

(a) [(aa)] 400 hours of internship credit may be acquired by any combination of the following: internship experience gained concurrent with attendance at a college of pharmacy during the fourth and fifth year, or participation in

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approved clinical pharmacy programs [, approved externship] [programs] or approved internship demonstration projects.

(b) [(bb)] At least 520 hours of the required internship time shall be completed after graduation from a college of pharmacy approved by the board and shall consist of advanced internship training involving the compounding and dispensing of drugs and drug consultation with patients.

(c) [(cc)] Not more than 700 hours of intership credit may be given during any internship quarter.

D. [(d)] Reciprocity standards. The board may accept internship credit from applicants for licensure by reciprocity who have submitted evidence of completion of internship training in another state, provided that the training is, in the opinion of the board, substantially equivalent to the standards herein provided, and is in compliance with the internship standards of the National Association of Boards of Pharmacy, and provided, further, that the applicant has practiced pharmacy for one year prior to being examined for licensure in this state pursuant to the requirements of Pharm 28.

E. [(e)] Advisory committee. The board shall appoint an Advisory Committee on Internship to advise the board on the administration of this regulation. The committee shall include practicing pharmacists, pharmacist-educators, pharmacy interns and representatives of the board.

Chapter Eight: Nuclear Pharmacy The provisions of Pharm 101-110 are applicable to pharmacies and manufacturers dealing with radioactive pharmaceuticals, provided, however, that Pharm 1 through 70 shall also be applicable to such pharmacies, unless specifically exempted by Pharm 101-110 or are in direct conflict therewith, in which case Pharm 101 through 110 shall apply.

Pharm 101 Definitions.

A. Radioactive drug. A radioactive drug is any substance defined as a drug in Section 201 (g) (1) of the Federal Food, Drug and Cosmetic Act which exhibits spontaneous disintegration of unstable nuclei with the emission of nuclear particles or photons and includes any non-radioactive reagent kit or nuclide generator which is intended to be used in the preparation of such substance but does not include drugs such as carbon-containing compounds or potassium-containing salts which contain trace quantities of naturally occurring radionuclides.

B. Nuclear pharmacy. A nuclear pharmacy is any area, place or premises described in a license issued by the board with reference to plans approved by the board where radioactive drugs are stored, prepared, manufactured, derived, manipulated, compounded or dispensed.

C. Manufacturers of radioactive drugs. Any person, firm or hospital compounding, mixing, deriving, repackaging or otherwise preparing a radioactive drug for use, other than in the medical facility of which it may be physically attached, shall be licensed as a manufacturer.

Pharm 102 Minimum standards. Proof of adequate space and equipment for storage, manipulation, manufacture, compounding, dispensing, safe handling and disposal of radioactive material must be submitted to and approved by the board before a pharmacy license is issued by the board.

Compliance with all laws and regulations of the U.S. Nuclear Regulatory Commission and other applicable Federal and State agencies shall be deemed minimal compliance with this section and further requirements, as the board in its opinion finds necessary and proper for health and safety in the production, compounding, dispensing and use of radioactive drugs, may be imposed as a condition of licensure. A pharmacy exclusively handling radioactive materials may be exempt from the building and equipment standards of Pharm 7 through 11 if the board finds it is in the public interest.

Pharm 103 Pharmacists handling radioactive drugs. A pharmacist handling radioactive drugs must be competent in the preparation, handling, storage, receiving, dispensing, disposition and pharmacology of radioactive drugs. He must have completed a nuclear pharmacy course and/or acquired experience in programs approved by the board. Education and experience in non-approved programs may be accepted if, in the opinion of the board, such programs provide a level of competence substantially the same as approved programs.

Pharm 104 Pharmacist-in-charge. A pharmacy handling radioactive drugs shall not function without having a pharmacist who is competent in the preparation, handling, storage, receiving, dispensing, disposition and pharmacology of radioactive drugs in charge of the licensed premises. All personnel performing tasks within such pharmacy shall be under the immediate and direct supervision of the pharmacist competent in handling radioactive drugs.

Pharm 105 Acquisition, storage and distribution of radioactive drugs. Only radioactive drugs which are approved by the US Food and Drug Administration or which are investigational drugs having IND or NDA status may be dispensed by a nuclear pharmacy.

All radioactive materials shall be kept locked and secure from unauthorized personnel.

Radioactive drugs shall not be transferred, distributed or dispensed to any person or firm not licensed or authorized to receive or possess such drugs.

Pharm 106 Recordkeeping. Pharmacists handling radioactive drugs shall maintain records of acquisition and disposition of all radioactive drugs for a period of not less than two (2) years.

In the case of investigational radioactive drugs such pharmacy records shall include an investigators protocol for the preparation of radioactive drugs, a copy of the Human Use Committee Approval, a copy of the approved patient consent form, and a letter from the manufacturer-"sponsor" indicating the physican requesting the radioactive drug is a qualified investigator; and such other records as good professional practice would dictate.

Additional records shall be maintained as required by any other statute or regulation of any federal or state agency.

Chapter Nine: Pleading, Practice and Procedure

Pharm 111 Definitions as used in these rules:

A. "Board" means the Minnesota Board of Pharmacy;

B. "Hearing" includes a joint hearing of the board and any other administrative agency;

C. "License" means any license, permit, certificates of registration or other grant of authority, issued or subject to suspension or revocation by the board;

D. "Revocation or Suspension" of license includes refusal to renew the same.

Pharm 112 How proceedings initiated. Proceedings to revoke or suspend licenses may be initiated in one of two ways, except insofar as any order of suspension or revocation which may be issued pursuant to a statute not requiring hearing.

A. On a verified complaint by an individual or an agency required by law to enforce the law in question, filed with the Board of Pharmacy;

B. By the board on its own motion whenever its investigation discloses probable grounds for disciplinary action. The board president or secretary may act for the board in initiating proceedings under this section.

Pharm 113 Procedure upon filing of complaint. All complaints received pursuant to the provisions of Rule Pharm 112 shall be dealt with in accordance with the requirements of Minn. Stat. § 214.10.

Pharm 114 Style of pleadings. All pleadings, notices, orders, and other papers filed in such proceedings shall be captioned "BEFORE THE MINNESOTA BOARD OF PHARMACY", and shall be entitled "IN THE MATTER OF THE SUSPENSION OR REVOCATION OF THE _____ OF _____ RESPONDENT." The party whose license is involved shall be known and designated as the "Respondent".

Pharm 115 Form of charges. If the alleged offense is a continuing one, its general nature and the approximate time covered shall be stated in the complaint or notice of hearing, if a specific incident is relied on, it shall be alleged with such particularity as to time, place and circumstances, as may be necessary to enable the respondent to prepare his defense; and in either case the offense may be alleged in the language of the statute or rule claimed to have been violated. Separate charges shall be stated in separate paragraphs and numbered consecutively.

Pharm 116 Order for and notice of hearing. Notices of hearing shall be addressed to the respondent at his last known past office address and shall be subject to the Administrative Procedures Act Minn. Stat. § 15.01 et seq., and the Rules for Contested Cases of the Office of Hearing Examiners, Minnesota Rules HE 201-222.

Pharm 117 Service and filing of papers. Unless otherwise provided by law, all orders, notices and other papers may be served by the secretary or the board by first class, certified, or registered mail addressed to the party at his last known post office address, or to his attorney of record. Papers required to be filed with the board may be mailed to the following address: 717 Delaware Street, SE, #351, Minneapolis, Minnesota 55414.

Pharm 118 Deficiency reports. The pharmacist-in-charge of any pharmacy wherein deficiencies are noted upon inspection by the board or its staff shall, within 30 days of receiving notice of such deficiency, submit in writing to the board the steps taken or proposed to eliminate the deficiency. Failure to submit such report or to eliminate such deficiency shall be grounds for the institution of disciplinary action by the board.

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OFFICIAL NOTICES

EQC Monitor Environmental Quality Council

Notice of Actions Taken at the January 21, 1977 Meeting

1. In the matter of the Environmental Assessment on a Potlatch proposal for timber harvest in the Boundary Waters Canoe Area, postponed decision to February 8, 1977 in order to give more time for review.

2. Determined no Environmental Assessment is required on the proposed Fort Snelling Visitor Center. The project will be reviewed through the Critical Areas program.

3. Postponed discussion to February 8, 1977 on Northern States Power's request to begin preliminary construction at its Sherco 3 and 4 sites.

(End of EQC Monitor)

Department of Public Safety

Administration of the Intoxicating Liquor Act

Cancellation of Hearing and Notice of Intent to Solicit Outside Opinion

On January 17, 1977, notice was published in the *State Register* that a public rule making hearing would be held in the above-entitled matter in Conference Room D, Veterans Service Building, Saint Paul, Minnesota, commencing on February 17, 1977. On January 14, 1977, notice of intention to hold such a hearing was also sent by United States mail to representatives of associations or other interested groups or persons who have registered their names with the Secretary of State for that purpose.

Notice is hereby given that the scheduled rule making hearing is postponed and, pursuant to the provisions of Minn. Stat. § 15.0412, subd. 6 (Supp. 1975), in order to afford an opportunity to obtain outside information or opinions relating to the proposed amended rules, an information hearing shall be held in Conference Room D, Veterans Service Building (Fifth Floor), 20 West 12th Street and Columbus Avenue, Saint Paul, Minnesota, on February 17, 1977, commencing at 9:00 a.m., and continuing until all persons have had an opportunity to be heard.

For purposes of seeking outside information or opinions, the proposed rules published in the *State Register* on January 17, 1977, shall be considered draft proposed rules. A copy of said rules may be obtained upon request from Diane Hamilton, Department of Public Safety, 210 Transportation Building, Saint Paul, Minnesota 55155, and will be available at the scheduled public hearing.

The draft proposed rules relate to the transfer of responsibilities to the Department of Revenue, distiller and winer representatives, price filing by manufacturers, wholesalers and importers, sales by importers to wholesalers on an equal basis, price discounts to retailers, minimum proof of distilled spirits, advertising, brand label registration, discontinued brands, and standards of fill for wine, intoxicating liquor and malt beverages.

Written or oral views will also be accepted until February 25, 1977. Written views may be sent to Diane Hamilton, Department of Public Safety, 210 Transportation Building, Saint Paul, Minnesota 55155.

Any written material received by the Department of Public Safety or submitted at the information hearing, as well as the hearing record, will become part of the rule making hearing record when that proceeding is held at a later date.

Edward G. Novak
Commissioner

Minnesota State Retirement System

Board of Directors Meeting

Regular quarterly meeting of the Board of Directors, Minnesota State Retirement System, will be held on Friday, February 18, 1977, at 9:00 A.M. in the office of the System, 529 Jackson Street, St. Paul, Mn.

Errata

1. 1 S.R. 1084: insert "Effective January 4, 1977" after "B. Allen Clutter, Executive Director".

2. 1 S.R. 1098: add "the same geographic area; or" after "and will affect" at MEQC25E.1.a.

3. 1 S.R. 1101: change "the" to "that" at MEQC26C., 6th line.

4. 1 S.R. 1107: change "EIs" to "EIS" at MEQC30D.

5. 1 S.R. 1120: change "lake" to "lakes" at #5.

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Attn: Edward Burdick, Chief Clerk
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