



STATE BOARD OF PHARMACY

800 SW Jackson, Suite 1414
Topeka, Kansas 66612-1244
www.pharmacy.ks.gov (785)296-4056

**INSPECTION:
Distributor- Nonprescription
Form I-06**

INSPECTION INFORMATION

Distributor Name: _____ Registration Number: _____

Date: _____

FACILITY INFORMATION

- Yes No N/A Registration displayed: State
- Yes No N/A Drugs stored per manufacturer—K.A.R. 68-15-4
- Yes No N/A No outdated, mislabeled, or adulterated drugs—K.S.A. 65-1634 & K.S.A. 65-657(a)(b)
- Yes No N/A No prescription medication on premises—K.S.A. 65-1626(uu)
- Yes No N/A Adequate lighting, ventilation, temperature, sanitation, humidity, space, equipment, & security—
K.S.A. 65-625 & K.S.A. 65-656(o)
- Yes No N/A Free from infestation by insects, rodents, birds, or vermin of any kind—K.S.A. 65-656(m) & K.S.A. 65-668(a)
- Yes No N/A Drug products fully prepared by the manufacturer (commercial packaging)—K.A.R. 68-15-2(a)
- Yes No N/A Products sold to vendors, not consumers, patients, or end users—K.A.R. 68-15-2

COMMENTS