



TEXAS STATE BOARD OF PHARMACY

333 Guadalupe Street, Suite 3-600 ★ Austin, Texas 78701
 512-305-8000 ★ www.tsbp.state.tx.us

APPLICATION TO ALLOW PHARMACY TECHNICIANS TO VERIFY THE ACCURACY OF ANOTHER PHARMACY TECHNICIAN (TECH-CHECK-TECH)

PHARMACY INFORMATION			
NAME OF HOSPITAL			LICENSE NUMBER
ADDRESS OF HOSPITAL		CITY	STATE
PHARMACIST-IN-CHARGE INFORMATION			
FIRST NAME	MIDDLE	LAST	LICENSE NUMBER
NAME AND REGISTRATION NUMBER OF PHARMACY TECHNICIANS (attach additional pages if necessary)			
PHARMACY TECHNICIAN NAME			REGISTRATION NUMBER
ANTICIPATED DATE OF BEGINNING TECH-CHECK-TECH PROGRAM			

Please note the pharmacy may not allow pharmacy technicians to check the work of other pharmacy technician until an amended license is issued.

Attach documentation that the pharmacy has an ongoing clinical pharmacy program including a detailed description of the clinical activities performed by the pharmacists. An ongoing clinical pharmacy is a program in which pharmacists provide direct focused, medication-related care for the purpose of optimizing patients' medication therapy and achieving definite outcomes, and includes one or more of the following activities:

- A. prospective medication therapy consultation, selection, and adjustment;
- B. monitoring laboratory values and therapeutic drug monitoring;
- C. identifying and resolving medication-related problems; and
- D. disease state management.

THE APPROVAL FOR A TECH-CHECK-TECH PROGRAM WILL EXPIRE IN CONJUNCTION WITH THE PHARMACY LICENSE. YOU MUST REQUEST CONTINUATION OF THE APPROVAL WITH THE PHARMACY'S BIENNIAL RENEWAL APPLICATION.

I hereby attest that the information on this form, as well as the information on any attachment(s) to this form, is true and correct to the best of my knowledge and the information is given of my own free will. I agree that any misstatement(s) and/or omission(s) will constitute violation of the Texas Pharmacy Act, and may subject me to disciplinary action by the board.

Signature of Pharmacist-in-Charge

Date