

TENNESSEE BOARD OF PHARMACY

*Newsletter to Promote Pharmacy
and Drug Law Compliance.*

Compounding Rules

The Tennessee Board of Pharmacy held a rulemaking hearing on April 1, 2026, regarding the addition of rules surrounding ambulatory surgery treatment centers and changes to compounding regulations. After public comments and amendments, these rules were approved by the Board and are awaiting approval by the attorney general. Once approved,

an effective date will be given, and a hearing before the Joint Government Operations Committee will be scheduled. If approved, the Board will not enforce the regulations for a period of one calendar year, ensuring that the pharmacy community has time to implement any necessary changes.

X-Waiver DEA Registration Numbers Should Not Be Entered Into the CSMD

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The Controlled Substance Monitoring Database (CSMD) staff has become aware of pharmacies continuing to enter and submit X-Waiver Drug Enforcement Administration (DEA) registration numbers after Congress eliminated

the "DATA-Waiver Program" in 2023. Submission of "X DEA numbers" leads to inaccurate data collection, and pharmacists should ensure that only standard DEA registration numbers are submitted to CSMD.



Potential Alpha-Gal Syndrome Increase

According to [data](#) accumulated by Centers for Disease Control and Prevention, emergency room visits due to tick bites have risen sharply this summer. Although not all tick bites are associated with alpha-gal syndrome (AGS), an increase in AGS is expected. Most cases of AGS in Tennessee are linked to the lone star tick, a small

brown tick with a characteristic white spot on its back. AGS typically triggers allergic reactions to the alpha-gal sugar molecule, which, in addition to red meat, can also be present in numerous prescription and over-the-counter (OTC) medications due to common ingredients such as gelatin and magnesium stearate. Screening

medications for this population can present challenges in a pharmacy due to software limitations that necessitate manual excipient review. Symptoms are generally delayed after allergen exposure and can include hives, facial swelling, and anaphylaxis. If AGS is confirmed, it must be [reported](#) to the Tennessee Department of Health.

2026 Legislative Update

Several key pieces of legislation were passed in 2026 that affect pharmacy practice in the state of Tennessee. A comprehensive list can be found on the Board's [website](#) under "Policies, Rules, Statutes." A few highlights include the following:

- [Public Chapter 647](#)
Prohibits individuals who are developing or deploying an artificial intelligence system from advertising that it can act as a qualified mental health professional
- [Public Chapter 748](#)
Prohibits health care providers from asking certain listed gender-related questions to a minor without a parent being fully informed and without written consent from a parent. The questions must directly relate to the diagnosis or treatment being evaluated at that time.
- [Public Chapter 755](#)
Allows physician assistants to delegate the medication administration of certain drugs to certified medical assistants
- [Public Chapter 789](#)
Clarifies that if marijuana is rescheduled or deleted as a controlled substance (CS) under federal law, the commissioner of mental health and substance abuse services is prohibited from rescheduling or deleting marijuana under state law, unless the

Tennessee General Assembly has established a regulatory framework for marijuana

- [Public Chapter 880](#)
Changes references to the National Precursor Log Exchange to an "electronic sales tracking system," as well as removes pharmacist counseling requirements for OTC pseudoephedrine or ephedrine. While initially introduced, it did **not** change the pseudoephedrine limits.
- [Public Chapter 884](#)
Expands the scope of practice of athletic trainers to allow some health care procedures, including the subcutaneous, intramuscular, or intravenous injection of some medications
- [Public Chapter 922](#)
Requires inpatient hospitals to offer an influenza immunization to patients ages 50 years and older between October 1 and March 1 and offer a pneumococcal immunization to all patients ages 50 years and older
- [Public Chapter 935](#)
Allows physicians and podiatrists to prescribe medications, including CS, to their own self or immediate family in "short-term, minor, or acute emergency situations," as well as in situations for immediate family where there are no other physicians or podiatrists within 30 miles

2026 Legislative Update

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- **Public Chapter 947**
Allows physicians to prescribe epinephrine prescriptions in the name of a school
- **Public Chapter 955**
Amends eligibility requirements for licensure related to citizenship
- **Public Chapter 994**
Enacts the Regulatory Freedom Act of 2026, which makes changes to the rulemaking process, including the requirement for a “fiscal impact statement”
- **Public Chapter 1111**
Amends who can own, operate, control, or direct the operation of a pharmacy

Short-Dated Products

The Board staff reminds registrants that certain liquid medications have a shortened expiration date once the seal is broken and should be marked with a new date of expiration. Among the most common items being found in pharmacies is

aripiprazole oral solution that indicates that the drug can only be used for six months after opening, but not beyond the original expiration date, if shorter than the six-month period. Additionally, oxcarbazepine suspensions only have a seven-

week expiration date once the seal is broken, and topiramate solution must be discarded 90 days after opening. This list is not exhaustive, and pharmacists should check the labeling of products on their shelves.

Governor Lee Appoints Pharmacists Melissa Boruff and Katie Cox to the Board

Governor Bill Lee appointed Dr Melissa Boruff of Sweetwater, TN, to the Board in December 2025. Dr Boruff is a 1995 graduate from Samford University with a background in community pharmacy

practice. She currently practices at Vonore Drug Family Wellness Center and Tellico Drugs Family Wellness Center. Governor Lee also appointed Dr Katie Cox of Knoxville, TN, to the Board in August 2026. Dr Cox is

a 2016 graduate from the University of Tennessee College of Pharmacy and currently serves as the pharmacy manager for the Walgreens Specialty Pharmacy in Knoxville.

Rebecca Moak Selected as the 2026 Kendall Matthew Lynch Award Winner

Dr Rebecca Moak was selected by the Board as the Kendall Matthew Lynch Award for Excellence in Public Health and Regulation recipient for 2026. This award recognizes those individuals whose efforts to protect public health and safety have greatly

furthered the goals and objectives of the Board. Dr Moak began as a pharmacist investigator in 2011, serving close to 15 years before her retirement in early 2026. She was among the first group of pharmacist investigators that went through

sterile compounding training and helped lead efforts in educating pharmacists and pharmacy technicians across the state, which has drastically changed the culture around patient safety in Tennessee.

Depyrogenation of Glassware in Sterile Compounding

Investigators remind sterile compounders who utilize glassware, metal, or other such containers in compounded sterile product preparation that according to United States Pharmacopeia <797>,

Section 10.1 Depyrogenation, “dry heat depyrogenation *must* be used to render glassware, metal, and other thermostable containers and components pyrogen free . . . Items that are not thermostable must be

depyrogenated by multiple rinses with sterile, nonpyrogenic water.” Lack of proper equipment is not sufficient cause to use the rinse method.

Insanitary Condition Requirement

In addition to the Board’s requirement in Tennessee Compilation of Rules and Regulations (TCRR) 1140-01-.13 that the pharmacy practice site shall be “maintained in a clean, sanitary,

orderly and well-lighted condition,” the **Federal Food, Drug, and Cosmetic Act**, states that a drug is adulterated “if it has been prepared, packed, or held under insanitary conditions whereby it may have been

contaminated with filth . . .” Pharmacy staff must ensure cleanliness of the pharmacy space in order to comply with this regulation.

Inspection Deficiencies

Investigators would like to remind pharmacists in charge (PICs) of the requirement in TCRR 1140-03-.14(10) that the PIC “shall maintain a current registry of individuals employed at the pharmacy practice site performing the functions of a pharmacy technician.” This list

of pharmacy technicians must be kept current and available for review by investigators. In addition, TCRR 1140-02-.02(1)(a) states that “an affidavit signed by both the applicant and employer attesting that the applicant has read and understands the laws and rules

relative to pharmacy technicians and the practice of pharmacy in Tennessee” is required. Further, “a copy of this affidavit shall be retained at the applicant’s place of employment.”

Supporting the Well-Being of Tennessee’s Pharmacy Professionals: TNPSQ and TPRN

The Board’s commitment to enhancing the quality of life, health, and safety for the citizens of Tennessee means recognizing that the well-being of pharmacists and pharmacy technicians is essential to the overall health of the communities they serve. Pharmacy professionals in Tennessee face challenges such as high stress, demanding

workloads, and risks for substance use. Recognizing the need for support, Tennessee offers the Tennessee Professional Screening Questionnaire (TNPSQ) to pharmacy personnel through the Tennessee Pharmacy Recovery Network (TPRN).

TNPSQ is a confidential, voluntary questionnaire designed to help

Tennessee professionals, including pharmacists, pharmacy technicians, and student pharmacists, assess well-being and mental health services. TNPSQ provides access to personalized information, recommendations, and options for next steps from licensed mental health professionals who understand the pressures of health care

Supporting the Well-Being of Tennessee's Pharmacy Professionals: TNPSQ and TPRN

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work. The program is anonymous, confidential, and free. Find out more and get started at the [TNPSQ website](#).

The TPRN is contracted by the Board to provide peer-to-peer assistance

for pharmacy professionals dealing with substance use disorders. If pharmacists, pharmacy technicians, or student pharmacists need help with addiction or know an associate who does, they should contact

Dr Nancy Hooper, director of TPRN and Well-Being Services, by phone at 615/256-3023 or by email at nancy@tprn.org. An informational link, which includes a reporting form, is located on the [TPRN website](#).

Disciplinary Actions

For disciplinary actions taken against registrants licensed with the Board and other health-related boards, click [here](#).

Board Meeting Schedule

The Board extends an open invitation for all registrants and the general public to attend its public meetings at 665 Mainstream Drive, Nashville, TN 37243. The meetings are currently scheduled to begin at 9 AM CT. It is advised to check for schedule changes on the Board's website under the "Calendar, Members, Minutes" tab. These meetings are also live-streamed and recorded, with minutes available after approval from the Board.

To view the Tennessee Board of Pharmacy website, click [here](#).

Tennessee Board of Pharmacy Members

- Dr Marty Blane – President, Pharmacist Member
 - Dr Rebecca Leinart – Vice President, Pharmacist Member
 - Dr M. Kyle Phillips – Pharmacist Member
 - Dr Brooke Mills – Pharmacist Member
 - Dr David Brown – Pharmacist Member
 - Dr Melissa Boruff – Pharmacist Member
 - Dr Katie Cox – Pharmacist Member
 - Ms Nichole Foster – Technician Member
 - Mr Jake Bynum – Consumer Member
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- Dr Lucy Shell – Executive Director

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