

Virginia State Police Drug Diversion Unit

Division Five - Chesapeake

Senior Special Agent Charles Misuna



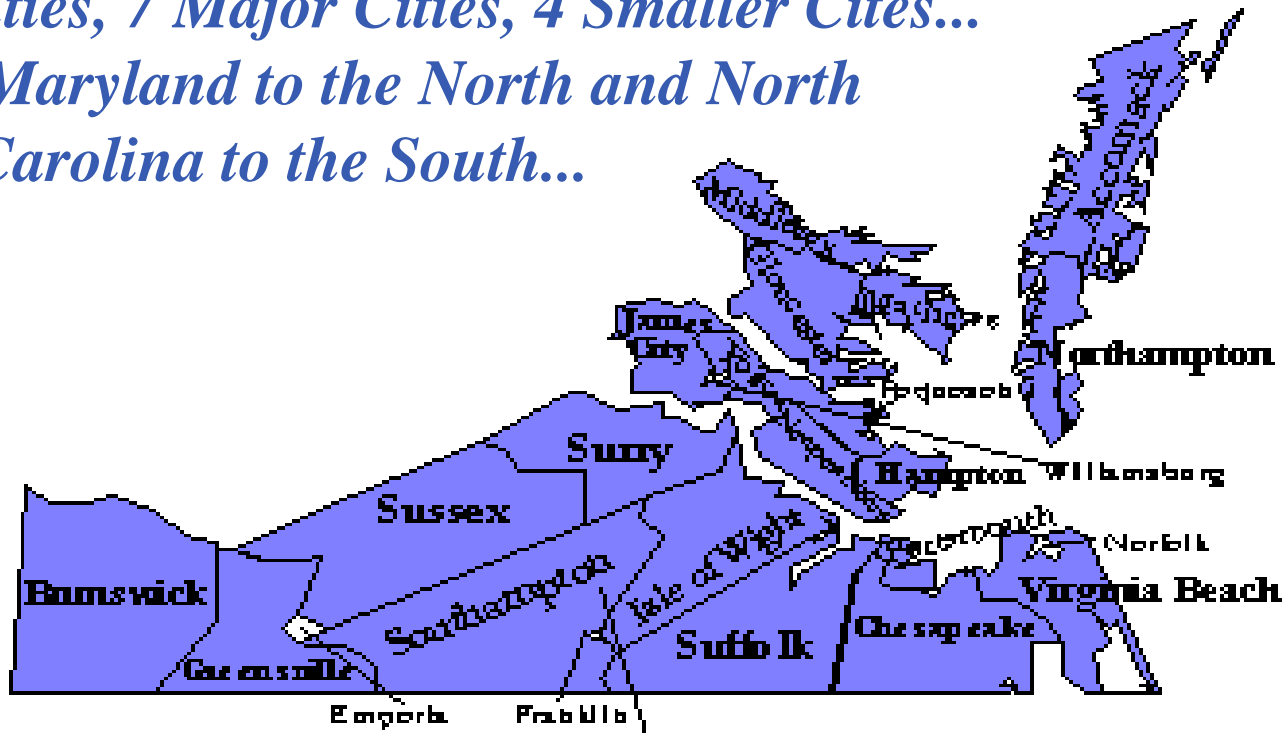
Field Division Map

7 Divisions



Bureau of Criminal Investigation Drug Enforcement Section Chesapeake Field Office

*13 Counties, 7 Major Cities, 4 Smaller Cities...
Border Maryland to the North and North
Carolina to the South...*



About the VSP Drug Diversion Unit

- Formed in 1987 as the result of a number of diversion complaints.
- Prior to the Drug Diversion Unit, no one was specifically trained in conducting diversion investigations.
- Currently, the Drug Diversion Unit is comprised of 21 investigators, 2 supervisors, and 1 criminal analyst.
- The unit currently conducts investigations into 60 percent of the complaints received. Due to the large number of complaints, investigations must be prioritized.
- Only VSP Drug Diversion Investigators have the authority under Title 54.1 of the Code of Va. to obtain certain records without a subpoena or search warrant.

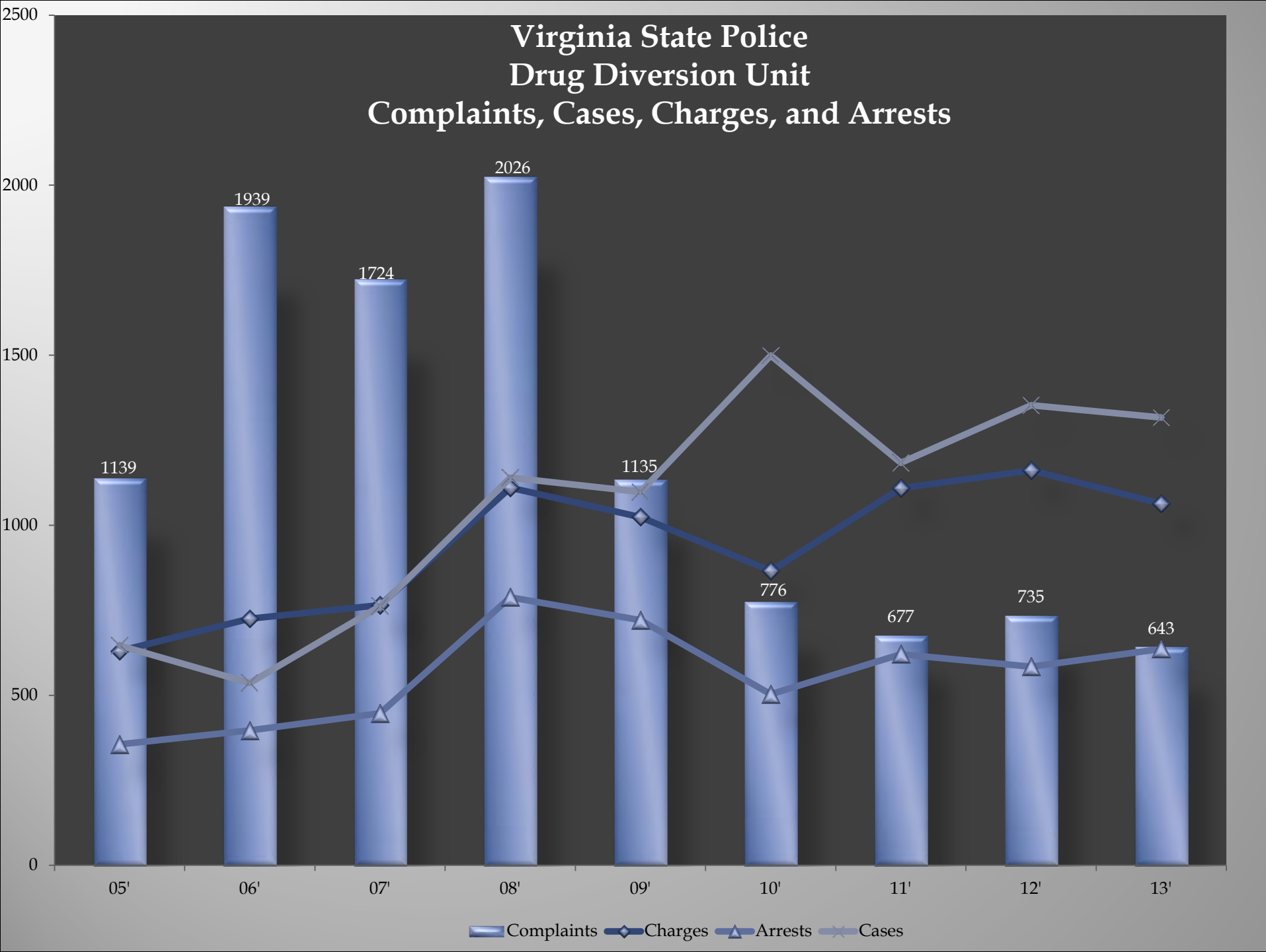
Purpose

To provide a background of drug diversion in the Tidewater area and to familiarize you with some of the scams and methods people use to obtain drugs by fraud.

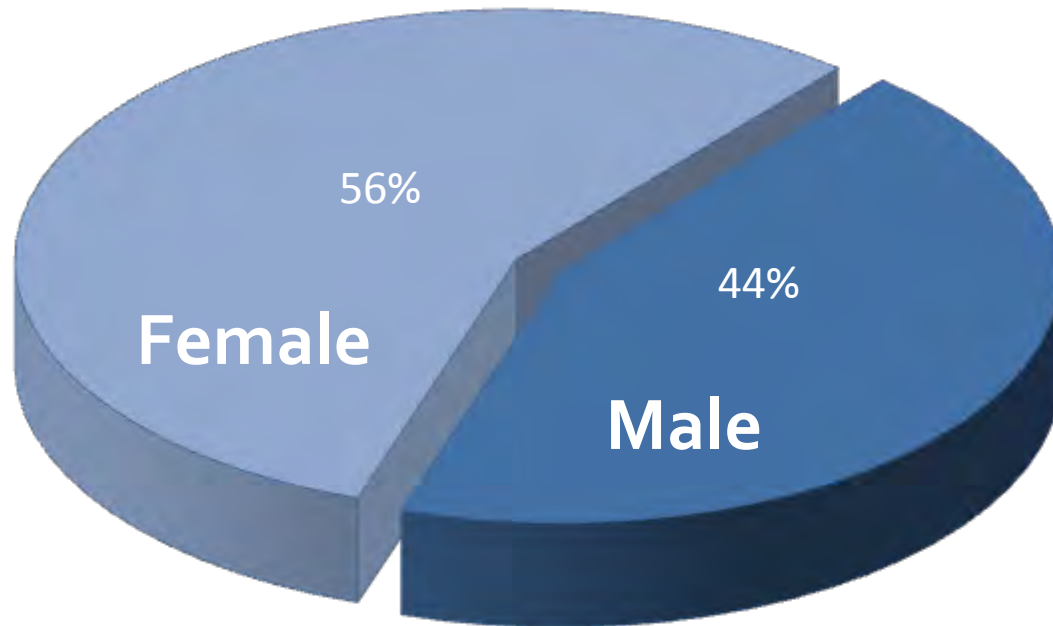


VSP DDU

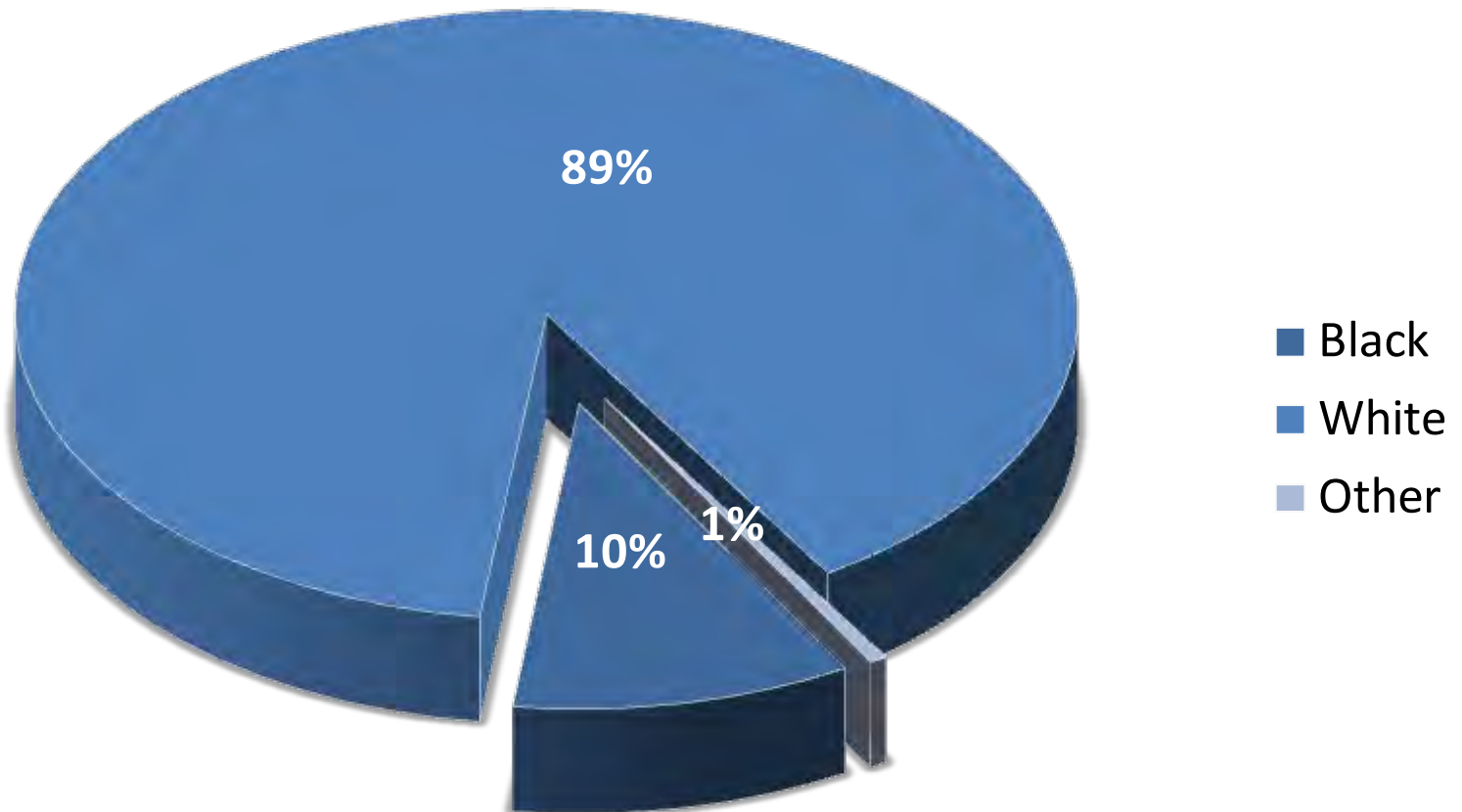
Virginia State Police Drug Diversion Unit Complaints, Cases, Charges, and Arrests



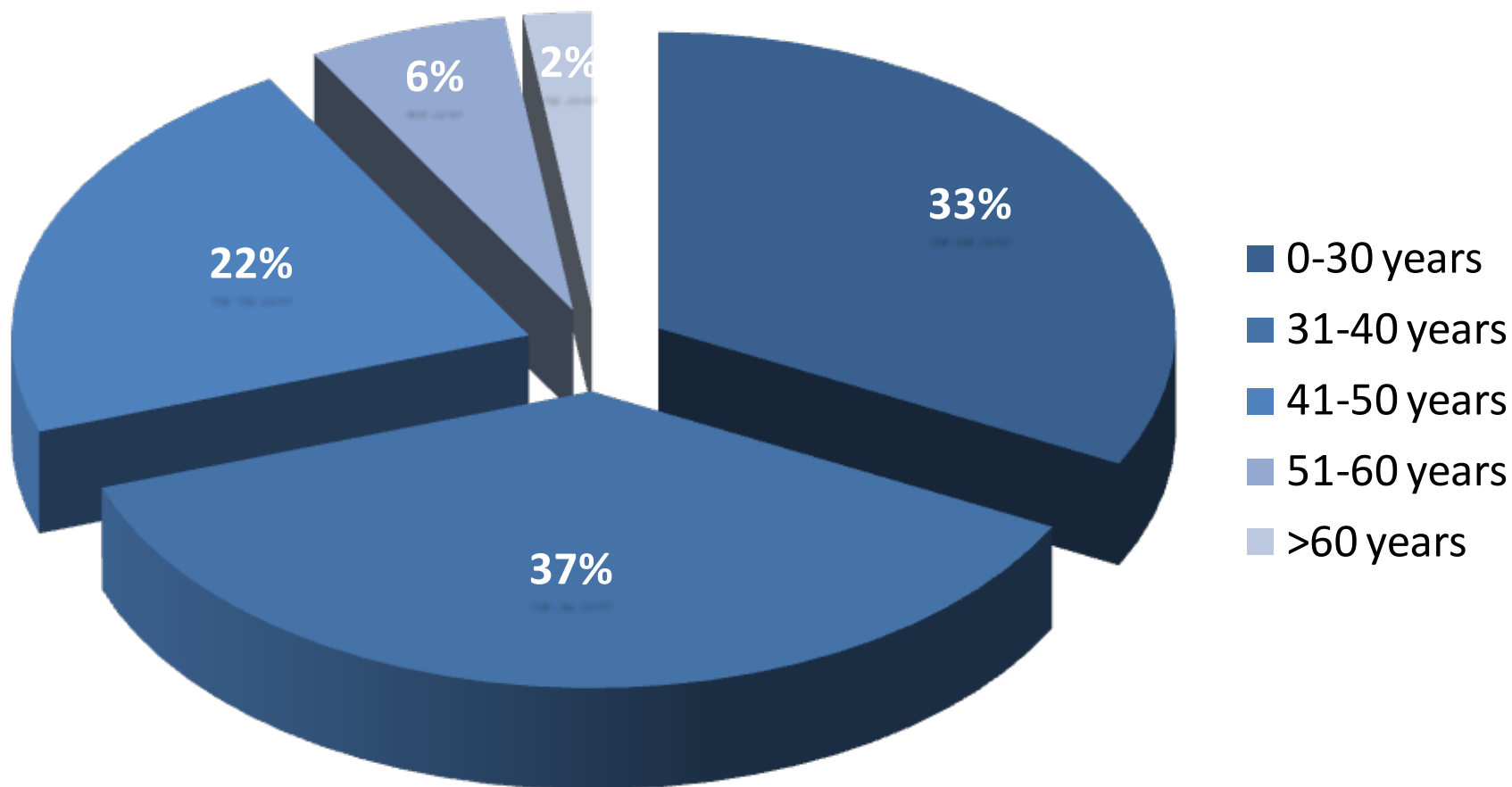
Arrest Demographics by Gender (Va. State Police 1988-2013)



Arrest Demographics by Race (Va. State Police 1988-2013)



Arrest Demographics by Age (Va. State Police 1988-2013)



***VIRGINIA STATE POLICE
DRUG DIVERSION ARRESTS BY RACE
2001-2013***

OF ARRESTS

350
300
250
200
150
100
50
0

2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013

YEAR

BLACK WHITE OTHER

103

89

84

129

163

188

208

217

189

215

307

260

264

7

16

7

5

13

34

25

22

36

17

41

47

51

3

1

0

0

0

1

0

1

0

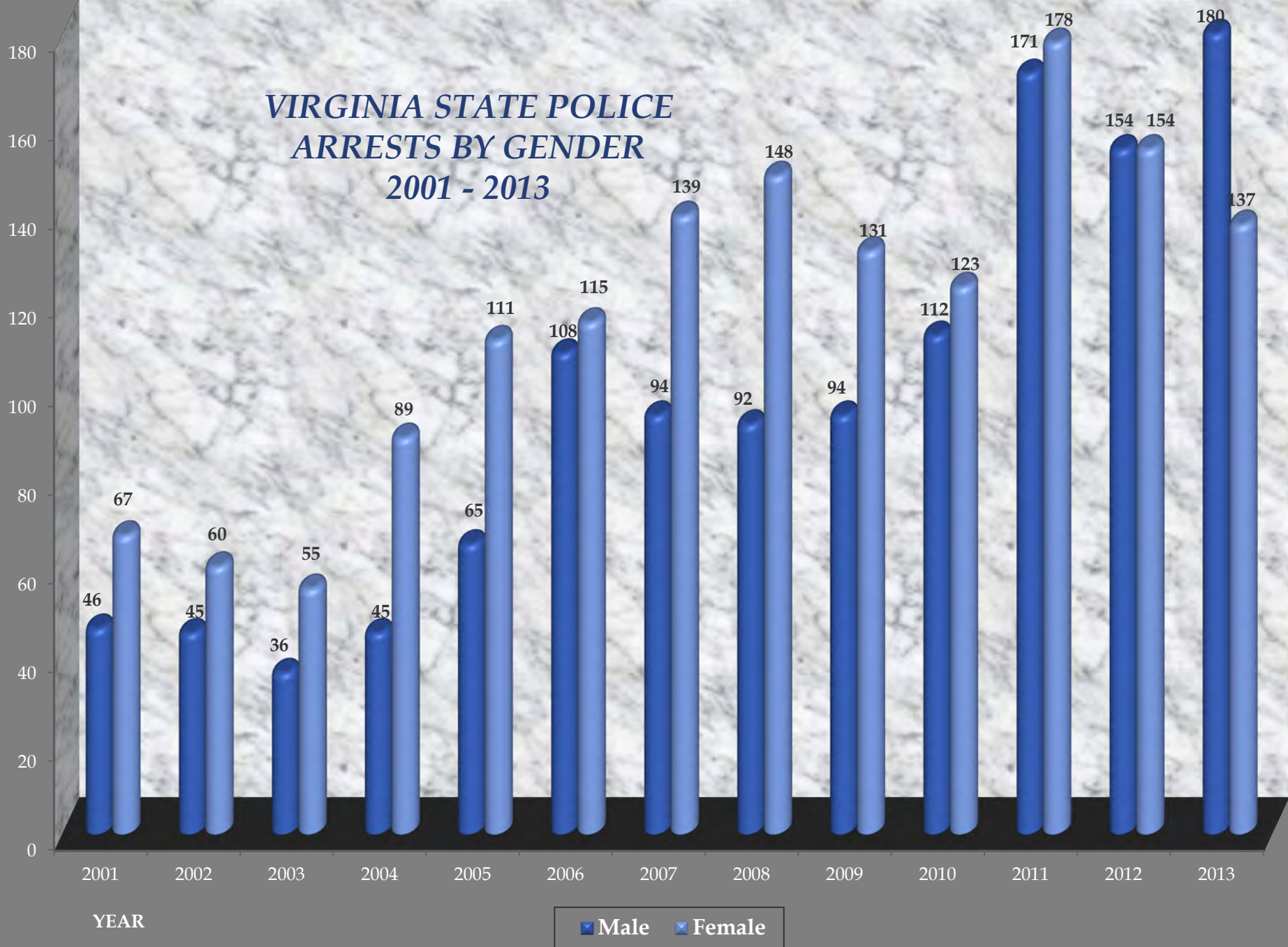
3

1

2

***VIRGINIA STATE POLICE
ARRESTS BY GENDER
2001 - 2013***

OF ARRESTS



***VIRGINIA STATE POLICE
DRUG DIVERSION
ARRESTS BY AGE
2001 -2013***

OF ARRESTS

180

160

140

120

100

80

60

40

20

0

YEAR

2001

2002

2003

2004

2005

2006

2007

2008

2009

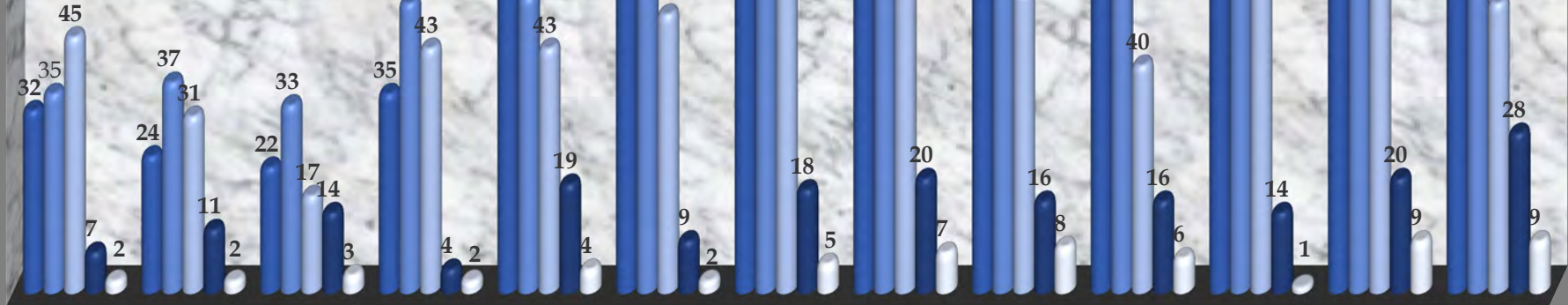
2010

2011

2012

2013

0-30 31-40 41-50 51-60 >60



Medical Examiner's Office 2013 Statistics

- 465 deaths in Virginia caused by Prescription Drugs
- 90 deaths in the tidewater region
- 244 deaths in Virginia caused by Illegal (Street) Drugs
- 73 deaths in the tidewater region



Medical Examiner's Office 2013 Statistics

- 137 deaths in Virginia caused by mixed category
- 33 in the tidewater region



VSP DDU

FENTANYL, HYDROCODONE, METHADONE, AND OXYCODONE DEATHS (N=386)

Prescription drug deaths are significant causes of injury and death in Virginia accounting for at least 42.3% of all drug/poison deaths. Fentanyl, hydrocodone, methadone, and oxycodone (FHMO) were found to be partly or wholly responsible for 42.3% of drug only deaths. Nearly fifty-five percent of FHMO deaths were male and 89.6% were white.

- Once again, oxycodone was the most commonly used FHMO resulting in death ; this even with the reformulation of Oxycontin®
- The western portion of the state had 33.9% of all the FHMO cases in Virginia

NOTE: The FHMO tables and figures represent drug/poison deaths in which one or a combination of the FHMO drugs caused or contributed to death; but other drugs/poisons may also have caused death.

Figure 5.12 OCME FHMO, Prescription Drug, and Total Drug/Poison Deaths by Year, 1999-2013

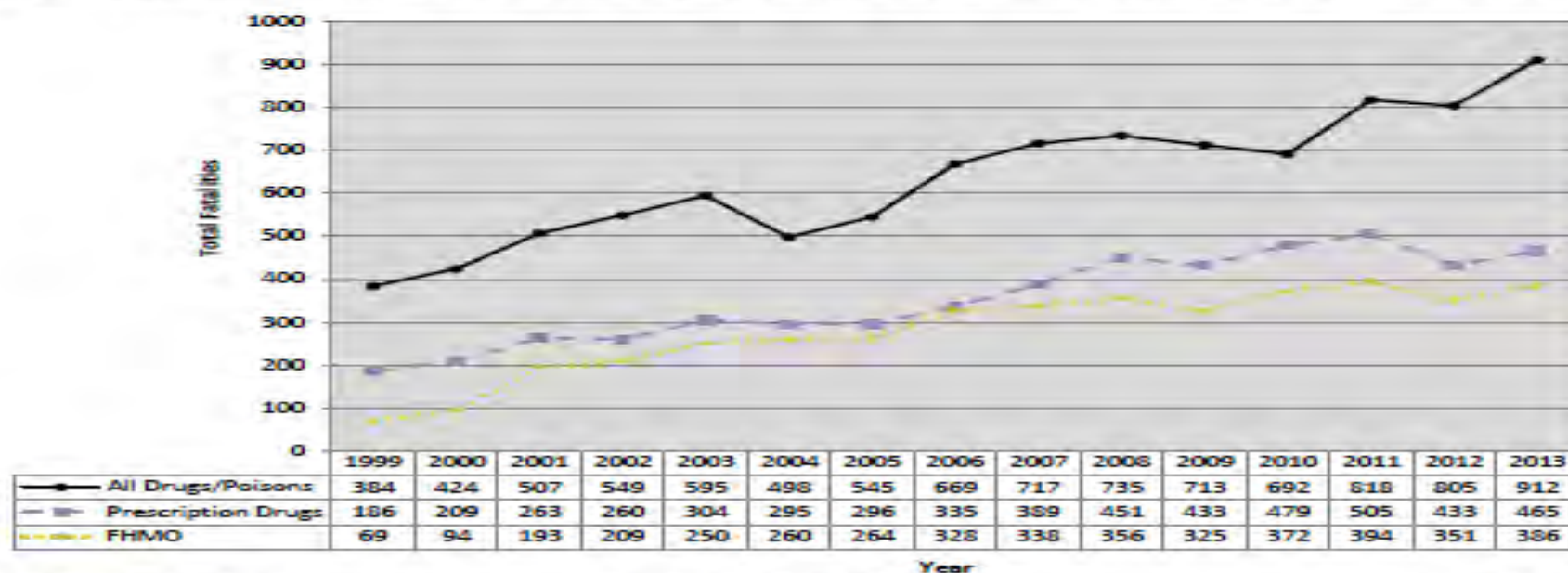


Table 5.10 Total Number of OCME Drug/Poison Deaths by FHMO Combination, 2013

FHMO Combination	Total
Fentanyl	77
Fentanyl and Hydrocodone	4
Fentanyl, Hydrocodone, and Methadone	1
Fentanyl, Hydrocodone, and Oxycodone	1
Fentanyl and Methadone	5
Fentanyl, Methadone, and Oxycodone	1
Fentanyl and Oxycodone	13
Hydrocodone	45
Hydrocodone and Methadone	3
Hydrocodone, Methadone, and Oxycodone	1
Hydrocodone and Oxycodone	14
Methadone	71
Methadone and Oxycodone	22
Oxycodone	128
Total FHMO Deaths	386
Non-FHMO Drug/Poison Combinations	526
TOTAL DRUG/POISON DEATHS	912

Table 5.11 Total Number of OCME Drug/Poison Deaths by FHMO Combination and District, 2013

FHMO Combination	Central	Northern	Tidewater	Western	Total
Fentanyl	13	15	26	23	77
Fentanyl and Hydrocodone	0	2	0	2	4
Fentanyl, Hydrocodone, and Methadone	0	0	1	0	1
Fentanyl, Hydrocodone, and Oxycodone	0	0	0	1	1
Fentanyl and Methadone	0	2	2	1	5
Fentanyl, Methadone, and Oxycodone	0	0	0	1	1
Fentanyl and Oxycodone	1	4	1	7	13
Hydrocodone	2	11	13	19	45
Hydrocodone and Methadone	2	0	0	1	3
Hydrocodone, Methadone, and Oxycodone	0	0	1	0	1
Hydrocodone and Oxycodone	2	5	1	6	14
Methadone	26	15	14	16	71
Methadone and Oxycodone	3	6	8	5	22
Oxycodone	31	33	15	49	128
TOTAL FHMO DRUG/POISON DEATHS	80	93	82	131	386

Table 5.12 Total Number of OCME Drug/Poison Deaths by FHMO Combination and Race/Ethnicity, 2013

FHMO Combination	Asian	Black	Hispanic	Other	White	Total
Fentanyl	0	8	2	1	66	77
Fentanyl and Hydrocodone	0	0	0	0	4	4
Fentanyl, Hydrocodone, and Methadone	0	0	0	0	1	1
Fentanyl, Hydrocodone, and Oxycodone	0	1	0	0	0	1
Fentanyl and Methadone	0	0	0	0	5	5
Fentanyl, Methadone, and Oxycodone	0	0	0	0	1	1
Fentanyl and Oxycodone	1	1	0	0	11	13
Hydrocodone	0	2	1	2	40	45
Hydrocodone and Methadone	0	1	0	0	2	3
Hydrocodone, Methadone, and Oxycodone	0	0	0	0	1	1
Hydrocodone and Oxycodone	0	2	0	0	12	14
Methadone	1	6	0	0	64	71
Methadone and Oxycodone	0	1	0	0	21	22
Oxycodone	0	8	1	1	118	128
TOTAL FHMO DRUG/POISON DEATHS	2	30	4	4	346	386

Table 5.13 Total Number of OCME Drug/Poison Deaths by FHMO Combination and Gender, 2013

FHMO Combination	Female	Male	Total
Fentanyl	27	50	77
Fentanyl and Hydrocodone	3	1	4
Fentanyl, Hydrocodone, and Methadone	0	1	1
Fentanyl, Hydrocodone, and Oxycodone	1	0	1
Fentanyl and Methadone	1	4	5
Fentanyl, Methadone, and Oxycodone	0	1	1
Fentanyl and Oxycodone	5	8	13
Hydrocodone	22	23	45
Hydrocodone and Methadone	3	0	3
Hydrocodone, Methadone, and Oxycodone	1	0	1
Hydrocodone and Oxycodone	7	7	14
Methadone	31	40	71
Methadone and Oxycodone	8	14	22
Oxycodone	65	63	128
TOTAL FHMO DRUG/POISON DEATHS	174	212	386

Figure 5.13 Total Number and Rate of OCME FHMO Combination Deaths by Age Group, 2013

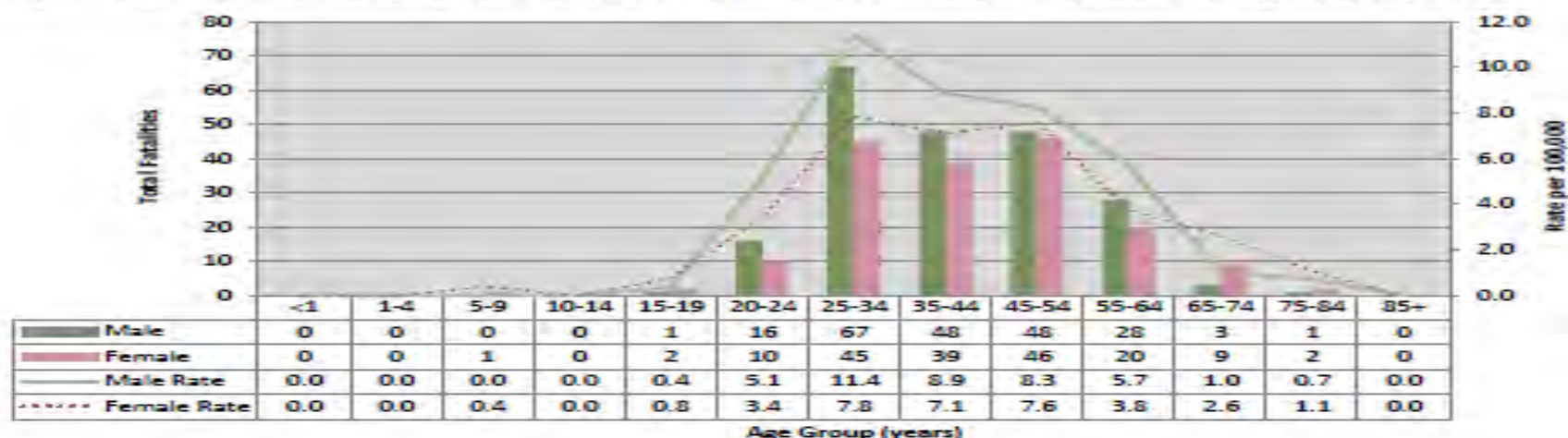


Table 5.14 Total Number of OCME Drug/Poison Deaths by FHMO Combination and Whether Alcohol Caused Death, 2013

FHMO Combination	Whether Alcohol Caused Death			Total
	Yes	No	Contributed	
Fentanyl	15	62	0	77
Fentanyl and Hydrocodone	0	4	0	4
Fentanyl, Hydrocodone, and Methadone	0	1	0	1
Fentanyl, Hydrocodone, and Oxycodone	0	1	0	1
Fentanyl and Methadone	0	5	0	5
Fentanyl, Methadone, and Oxycodone	0	1	0	1
Fentanyl and Oxycodone	1	12	0	13
Hydrocodone	6	37	2	45
Hydrocodone and Methadone	1	2	0	3
Hydrocodone, Methadone, and Oxycodone	0	1	0	1
Hydrocodone and Oxycodone	0	14	0	14
Methadone	11	59	1	71
Methadone and Oxycodone	1	21	0	22
Oxycodone	20	106	2	128
TOTAL FHMO DRUG/POISON DEATHS	55	326	5	386

Note: This table represents FHMO deaths in addition to whether alcohol caused, contributed, or didn't play a role (or was not detected) in the death.

The Typical Diverter



VSP DDU

Why do people get involved with diversion?

- To support a drug habit. Many times this habit is the result of a legitimate medical problem.
- To distribute pharmaceutical drugs:
 - For money
 - For illegal drugs



Characteristics of drug seekers..

While there is no typical person involved in drug diversion, there are characteristics that drug seekers display.



VSP DDU

Characteristics of drug seekers...

- Demanding...
- Vague and hard to diagnose complaints...
- No regular doctor...
- No insurance or insurance sometimes...
- Usually pays in cash...



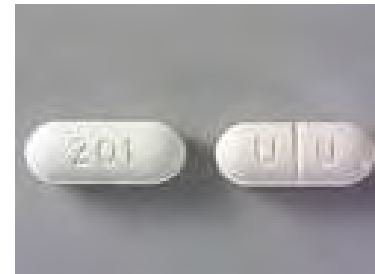
Characteristics of drug seekers...

- Fail to keep follow up appointments...
- Claims of stolen or lost prescriptions...
- Very assertive or overly friendly...
- Late or weekend visits to the pharmacy or doctor...



The most popular diverted drugs in Tidewater

- Hydrocodone



VSP DDU

The most popular diverted drugs in Tidewater

- Oxycodone



VSP DDU

The most popular diverted drugs in Tidewater

- Methadone



- Fentanyl



- Tramadol, Ultram



VSP DDU

The most popular diverted drugs in Tidewater

- Alprazolam (Xanax)



- Diazepam (Valium)



- Zolpidem (Ambien)



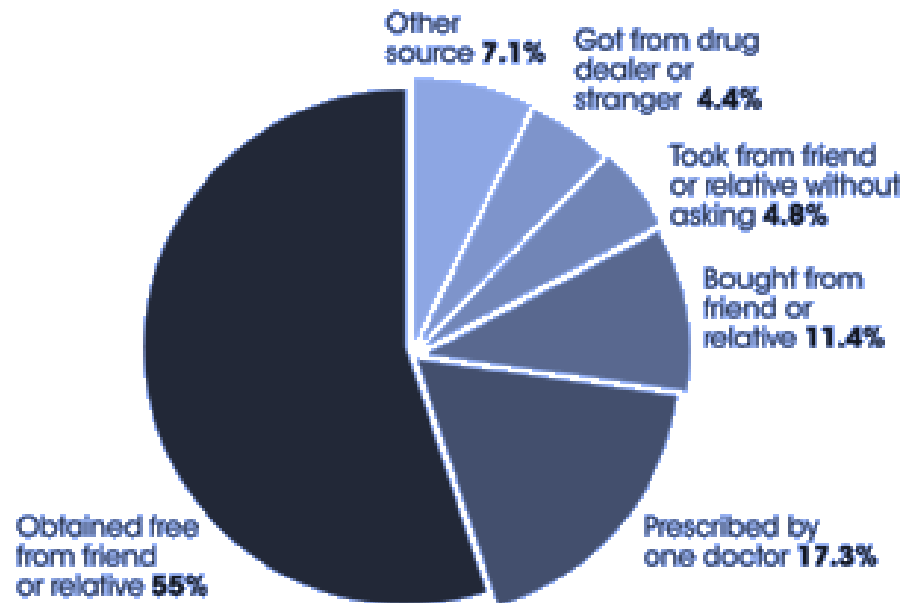
How do they do it?



VSP DDU

Sources

**People who abuse prescription painkillers
get drugs from a variety of sources⁷**



<http://www.cdc.gov/homeandrecreationalafety/rxbrief>



Methods of drug diversion...

- Forged, altered, fake call in prescriptions...
- Doctor shopping...
- Health facility diversions...
- Criminal practitioners...



MCHUMOR by T. McCracken



"I can tell this prescription is a phony.
The doctor's signature is legible."



VSP DDU

Fraudulent Prescriptions

Brought in
10-2-07 about
6:15pm

Department of Physical Medicine & Rehabilitation 757-446-5915
ANTONIO QUIDGLEY-NEVARES M 825 Fairfax Ave., Suite 646, Norfolk, VA 23507
VA0101231877 DEA #BQ8466509
Name Jason Goforth MRN 1611350
Address 1934 WINDERMERE, 103, VIRGINIA BEACH, VA 23455 DOB 04/16/1977

ROXYCODONE (oxycodone) 30 MG Tablet # 120

SIG: Quantity: (one hundred twenty)
TAKE 2 EVERY 8 HOURS For Chronic Pain

☐ Brand Medically Necessary

If neither box is marked, a Voluntary Formulary product must be dispensed.

Signature of Prescriber

CALL MD
to verify
copy signature
on script

Written: 09/07/2007

Refills Authorized 0 Times

Rx: 21696144 C-II

DEPARTMENT OF PHYSICAL MEDICINE & REHABILITATION

JOHN GILLMAN, MD

825 FAIRFAX AVE., SUITE 846
NORFOLK, VA 23507

DEA# FG0252560

VA 0101241705

(757) 446-5915

Name Emily Parker

DOB

Address

Date 9/12/08Rx Hydrocodone 15mgDisp: #120 (one hundred twenty)Sig: T p.o. 4-times perRefill 0 times

Brand Medically Necessary

Signature of Prescriber

7AIM4012083

EASTERN VIRGINIA MEDICAL SCHOOL

DEPARTMENT OF PHYSICAL MEDICINE AND REHABILITATION

JEAN E. SHELTON, M.D.

DEA # AS 6904228

MARIA A. De GUZMAN, M.D.

DEA # BD 6402686

WEI LI, M.D.

DEA # BL 7252240

ROBERT WALKER, M.D.

DEA # BW 7426283

CHRISTINE A. THOROGOOD, M.D.

DEA # BT 6749292

ANTONIO QUIDGLEY-NEVARES, M.D.

DEA # BQ 8466509

* JOHN GILLMAN, M.D.
DEA# FG 0252560KATRINA LESHNER, M.D.
DEA# BL 9654597

825 Fairfax Avenue Phone (757) 446-5915 Fax (757) 446-5089 Norfolk, Virginia 23507

Name

Age

Address

Date

Rx

☐ Label as to Contents

Refill 0 - 1 - 2 - 3 - 4 - PRN

☐ Brand Medically Necessary

Signature of Prescriber

M.D.

NORTHEASTERN OB/GYN, LTD.

Daniel S. Terryberry, M.D. BT3183516 Paul R. Moncia, M.D. BM9188372
E. Ashley Davis, CNM MD1274682

1141 North Road Street, Suite 1
Elizabeth City, North Carolina 27909
(252) 338-0101

Regional Medical Center
5200 North Croatan Highway
Kitty Hawk, North Carolina 27949

Name Jessie Murray

Address _____ Date 3/24/86

R

Percoet 5/325

1 po q 4hrs prn pain

0.3p ten

[Signature]
Product Selection Permitted M.D.

Dispense As Written M.D.

7571508-5063 03/24/86

NORTHEASTERN OB/GYN, LTD.

Daniel S. Terryberry, M.D. BT3183516 Paul R. Moncia, M.D. BM9188372
E. Ashley Davis, CNM MD1274682

1141 North Road Street, Suite 1
Elizabeth City, North Carolina 27909
(252) 338-0101

Regional Medical Center
5200 North Croatan Highway
Kitty Hawk, North Carolina 27949

Name Jessie Murray

Address 2713 Conrad Ave Date 3/24/86

R

Percoet 7.5/325

1 po q 4hrs prn pain

0.3p thirty

[Signature]
Product Selection Permitted M.D.

Dispense As Written M.D.

6161 Kempsville Circle, Suite 340
Diane LH Coltrin, MPH, MD, FACOG
DEA #BH3977470
Patricia G. Dudley, RN, MSN, FNP-C
Prescriptive Authority #0017138076
Stephanie S. Stephens, RN, MSN, WHNP
Prescriptive Authority #0017137660

Name Becky Quigley Date 07/12/07
Address 7-25-74 4327 TIDES COURT
☒ Label
Refill 0
☐ Brand Medically Necessary
Signature of Prescriber Michelle C. Dudley
If neither box is marked, a voluntary formulary product must be dispensed

DEA # AA2037754
GEO HERBERT AMBERMAN, M.D.
637 FIRST COLONIAL ROAD
SUITE B
VIRGINIA BEACH, VA 23451
457-437-5889

N-2 # 120
Becky Quigley
7-25-74 DATE 07-03-07
methadone 40mg
Take 4 x 5 a day for chronic pain (#120)
Signature of Prescriber [Signature] M.D.
25-Nov-05 DAY05 TR081108_100763422-80_2781_32241

Tidewater Orthopaedic Associates
 4000 Coliseum Dr. Suite 100 Hampton, VA 23666 757-827-2480
 12720 McManus Boulevard, Suite 101 Newport News VA 23602 757-874-1662



Name	HEAD, JOHN
Address	2410 YOUNGMAN ROAD CHESAPEAKE, VIRGINIA
Phone:	(757) 718-1938
Birth Date:	09/03/1934
Date	12/28/2007

	Drug Name	Form	MG or CC	NO.	SIG	Refills
1	Percocet	PO	5/325	120	2 po q 4 hours prn pain	0
2						
3						
4						
5						
6						
7						
8						

1 DRUGS TOTAL

Arthur D. Greene, MD

M.D.

James L Phillips MD DEA# AP5481356
 Arthur D Greene MD DEA# AG7852583
 Loel Z Payne MD DEA# BP4499225
 Colin M Kingston MD DEA# BK8208731
 Robert M Campolattaro MD DEA# BC8635786

Paul E Savas, MD DEA# BS5905825
 Michael E Higgins MD DEA# BH9136006
 Daniel L Lockwood PA-C DEA# ML1369140
 R. Scott Wallace PA-C DEA# MW1077987

Electronically signed and approved by physician

Label as to contents



Thomas E. Fithian, M.D. DEA# AF2546399
Jon H. Swenson, M.D. DEA# BS0515049
Anthony T. Carter, M.D. DEA# BC4489212
Daniel R. Cavazos, M.D. DEA# BC5129362
John W. Aldridge, M.D. DEA# BA7638375
Adrian T. Baddar, M.D. DEA# BB8492162
Tami E. Nagel, P.A.-C DEA # MN0816237
Sarah Bott, P.A.-C DEA # MB1232482

730 THIMBLE SHOALS BOULEVARD, SUITE 130 • NEWPORT NEWS, VA 23606
(757) 873-1554 (757) 223-9564 FAX

NAME _____

ADDRESS _____

DATE _____

Rx

DARVOCE T N100
T - T T 20 g PRN
#60 (SIXTY) 6 hrs.
9/18/07

Refill 2 times

- ☐ Brand Medically Necessary
☐ Dispense As Written

☐ Label

Signature of prescriber

If neither box is marked, a Voluntary Formulary product must be dispensed.

How do we stop it?



VSP DDU

Diversion Alert!

VIRGINIA STATE POLICE
DRUG
DIVERSION UNIT



P.O. Box 27472 * Richmond, VA 23261-7472

The Department of State Police has in existence a Diversion Alert Fax System (DAFS) which is designed to provide the pharmaceutical community with critical information needed to aid in the prevention of diversion activities.

If a practitioner discovers a prescription pad stolen, alterations to his/her prescriptions and/or the illegal use of a name or DEA number in order to obtain false telephone prescriptions, the practitioner should contact the State Police, Drug Diversion Unit (DDU).

Pharmacists can also provide similar information which will be verified before its inclusion in the system. DDU, through DAFS, will send a single page computer generated alert containing the critical information to all fax equipped pharmacies within the practitioner's county/city and surrounding jurisdictions.


DAFS is an additional tool that we can all utilize to help eliminate the unnecessary diversion of pharmaceutical drugs into our communities. The system will only be successful if you provide the appropriate information to the Virginia State Police for dissemination. The contact person is Drug Diversion Analyst, Euniquerca Reed. She may be contacted at 804-674-2779 between 8am and 4:30pm, Monday through Friday. During other times, please call the Virginia Drug Hot Line 1-800-553-DOPE (3673) and tell them this is a DAFS Request.

Help Make Your Community Diversion Free

Virginia Prescription Monitoring Program

VIRGINIA PMP

Welcome to Virginia's Prescription Monitoring Program. Please login to continue.



Username

Password

[Forgot/Reset Password?](#)

Not a member? [Register](#)

If you've lost your password, please contact the Support Line at either (804)367-4566 or pmp@dhp.virginia.gov

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Done Internet 100%

SAMPLE PMP REPORT:



Department of Health Professions

Phone: (804) 367-4566 Email: pmp@dhp.virginia.gov Fax: (804) 527-4470

Patient RX History Report

Date: 05-24-2012

Page: 1 of 2

This report may contain another person's controlled substance information. Please review the "Patients that Match Search Criteria" section located below to ensure all prescriptions belong to the requested individual.

Search Criteria: [REDACTED] Request Period '05/24/2011' To '05/24/2012'

Patients that match search criteria

Pt ID	Name	DOB	Address
-------	------	-----	---------

[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
------------	------------	------------	------------

Prescriptions

Fill Date	Product, Str, Form	Qty	Days	Pt ID	Prescriber	Written	Rx #	N/R	Pharm	Pay
04/02/2012	HYDROCODONE/APAP TABLETS, 10 MG;325 MG, TABLET	120	30	9977	WEA LE10	04/02/2012	1575154	N	BW6138312	01
03/02/2012	HYDROCODONE/APAP TABLETS, 10 MG;325 MG, TABLET	120	30	4292	WEA LE10	03/02/2012	1567214	N	BW6138312	
02/02/2012	HYDROCODONE/APAP TABLETS, 10 MG;325 MG, TABLET	120	30	9977	WEA LE10	02/02/2012	1559627	N	BW6138312	01
01/05/2012	HYDROCODONE/APAP TABLETS, 10 MG;325 MG, TABLET	90	22	9676	WEA LE10	01/05/2012	1551862	N	BW6138312	
12/14/2011	HYDROCODONE/APAP TABLETS, 10 MG;325 MG, TABLET	90	22	9676	SOB TH15	12/14/2011	1544381	N	BW6138312	



Simple ways to prevent diversion...

- Cooperation
- Know the law
- Use the PMP



Simple ways to prevent diversion...

- Treat prescription blanks like cash.
- Document, document, document...
- Initial patient questionnaires are a must.
- Communicate with pharmacists, other medical professionals and law enforcement.
- Ask for identification and make a copy for your files.
- Limit number of office staff who call in prescriptions.



Prescription Laws



“New laws, rules, regulations...sometimes I don’t know what to think of all this paperwork!”

Chap. 7 Crimes Involving Health and Safety

Art. 1 Drugs

§ 18.2-258.1. Obtaining drugs, procuring administration of controlled substances, etc., by fraud, deceit or forgery. --

A. It shall be unlawful for any person to obtain or attempt to obtain any drug or procure or attempt to procure the administration of any controlled substance or marijuana: (i) by fraud, deceit, misrepresentation, embezzlement, or subterfuge; or (ii) by the forgery or alteration of a prescription or of any written order; or (iii) by the concealment of a material fact; or (iv) by the use of a false name or the giving of a false address.

B. It shall be unlawful for any person to furnish false or fraudulent information in or omit any information from, or willfully make a false statement in, any prescription, order, report, record, or other document required by Chapter 34 of Title 54.1.

C. It shall be unlawful for any person to use in the course of the manufacture or distribution of a controlled substance or marijuana a license number which is fictitious, revoked, suspended, or issued to another person.

§ 18.2-258.1. Obtaining drugs, procuring administration of controlled substances, etc., by fraud, deceit or forgery. --

Con't

D. It shall be unlawful for any person, for the purpose of obtaining any controlled substance or marijuana, to falsely assume the title of, or represent himself to be, a manufacturer, wholesaler, pharmacist, physician, dentist, veterinarian or other authorized person.

E. It shall be unlawful for any person to make or utter any false or forged prescription or false or forged written order.

F. It shall be unlawful for any person to affix any false or forged label to a package or receptacle containing any controlled substance.

§ 18.2-258.1. Obtaining drugs, procuring administration of controlled substances, etc., by fraud, deceit or forgery. –

Con't

G. This section shall not apply to officers and employees of the United States, of this Commonwealth or of a political subdivision of this Commonwealth acting in the course of their employment, who obtain such drugs for investigative, research or analytical purposes, or to the agents or duly authorized representatives of any pharmaceutical manufacturer who obtain such drugs for investigative, research or analytical purposes and who are acting in the course of their employment; provided that such manufacturer is licensed under the provisions of the Federal Food, Drug and Cosmetic Act; and provided further, that such pharmaceutical manufacturer, its agents and duly authorized representatives file with the Board such information as the Board may deem appropriate.

H. Any person who shall violate any provision herein shall be guilty of a [Class 6 felony](#)

§ 8.01-399 Communications between physicians and patients

A. Except at the request or with the consent of the patient, no duly licensed practitioner of any branch of the healing arts shall be required to testify in any civil action, respecting any information which he may have acquired in attending, examining or treating the patient in a professional capacity.

C. This section shall not (i) be construed to repeal or otherwise affect the provisions of § 65.2-607 relating to privileged communications between physicians and surgeons and employees under the Workers' Compensation Act or (ii) apply to information communicated to any such practitioner in an effort unlawfully to procure a narcotic drug, or unlawfully to procure the administration of any such drug.

CHAPTER 882

An Act to amend and reenact § 54.1-3303 of the Code of Virginia, relating to prescription drugs.

Effective July 1, 2000

For purposes of this section, a bona fide practitioner-patient-pharmacist relationship is one in which a practitioner prescribes, and a pharmacist dispenses, controlled substances in good faith to his patient for a medicinal or therapeutic purpose within the course of his professional practice.

In addition, a bona fide practitioner-patient relationship means that the practitioner shall (i) ensure that a medical or drug history is obtained;
(ii) provide information to the patient about the benefits and risks of the drug being prescribed; (iii) perform or have performed an appropriate examination of the patient, either physically or by the use of instrumentation and diagnostic equipment through which images and medical records may be transmitted electronically; except for medical emergencies, the examination of the patient shall have been performed by the practitioner himself, within the group in which he practices, or by a consulting practitioner prior to issuing a prescription; and (iv) initiate additional interventions and follow-up care, if necessary, especially if a prescribed drug may have serious side effects.

§ 54.1-3405

Access to and copies of records; inspections

Any agent designated by the Superintendent of the Department of State Police to conduct drug diversion investigations **shall**, for the purpose of such investigations, also **be permitted access** at reasonable times to all such records relevant to a specific investigation and be allowed to inspect and copy such records.

If the original of any record is removed by any agent designated by the Superintendent of State Police, a receipt therefore shall be left with the person

Any information obtained by a designated State Police agent during an inspection under this section which constitutes evidence of a violation of any provision of this chapter shall be reported to the Department of Health Professions upon its discovery.

Any information obtained by an agent designated by the Board during an inspection under this section which constitutes evidence of a violation of Article 1 (§ 18.2-247 et seq.) of Chapter 7 of Title 18.2 shall be reported to the Department of State Police upon its discovery.

Case Examples

Subject H

- 37 year old male
- Chef
- Used his name and his mother's and deceased father's name to obtain over 200 fraudulent prescriptions
- Made prescriptions on his home computer
- Taking 30 pills a day

Case Examples

Subject E

- 48 year old female
- Secretary
- Calling in Hydrocodone under fictitious names
- Used her primary pharmacy and several others
- Husband was unaware of her addiction

Case Examples

Subject G

- 35 year old female
- Nurse
- Within three hours into orientation she diverted dilaudid and benadryl and injected it into her thigh

Case Examples

Subject B

- 21 year old female
- Pharmacy Technician
- Diverted over 11,000 hydrocodone

Case Examples

Subject R

- Receptionist, Ophthalmology Office
- 42 year old female
- Wrote over 40 prescriptions for Phentermine

Case Examples

Multiple Subjects

- Several prescriptions for Roxicodone were presented at the same time frame in Tidewater Area
- New Patients with distant addresses
- No identification
- Written by the same physician
- Floater pharmacy technician identified one of the suspects

Questions?



VSP DDU

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