

**BEFORE THE INDIANA
BOARD OF PHARMACY
CAUSE NUMBER: 2012 IBP 0061**

**IN THE MATTER OF THE INDIANA
PHARMACY TECHNICIAN
CERTIFICATION RENEWAL
APPLICATION OF:

ALEX URBANSKI, C.PH.T.
CERTIFICATION NUMBER: 67017285A.**

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DECISION ON RENEWAL APPLICATION

Alex Urbanski made a personal appearance before the Indiana Board of Pharmacy ("Board") on July 9, 2012, in Room C of the Conference Center of the Indiana Government Center South, 302 West Washington Street, Indianapolis, Indiana, concerning his application to renew his certification as a pharmacy technician.

The Board, after considering the file and statements of the Applicant, votes 6- 0-1 to place his certification on probation.

BACKGROUND

1. The Applicant, whose mailing address is 8859 Mossy Rock Drive, Zionsville, IN 46077, applied to renew his certification as a pharmacy technician in 2012.
2. The Applicant revealed that in May 2012 he was convicted of operating a vehicle while intoxicated. As a consequence of the conviction, he will be on probation for one year.
3. Applicant has demonstrated to the Board that he is able to practice with reasonable skill and safety to the public provided he complies with the probationary terms set out below. He agrees to those terms.

TERMS AND CONDITIONS

Based upon the foregoing Information, the Board imposes the following Terms and Conditions on the Applicant's certification:

1. The Applicant's certification as a pharmacy technician will be renewed on **INDEFINITE PROBATION**. He may apply to have the probation withdrawn from his certification after the completion of his criminal probation.

2. The Applicant's practice as a pharmacy technician shall be governed by the following **TERMS AND CONDITIONS**:

a) **CONTACT INFORMATION:** Applicant must keep the Board apprised of the following information in writing and update it as necessary:

1. Current home address, mailing address, e-mail address, and residential telephone number.
2. Current place of employment, employment telephone number, employment e-mail address, and name of supervisor.
3. Occupation and work schedule, including number of hours worked per week.

b) Applicant shall provide a copy of all Board orders imposing discipline or limiting practice to any pharmacy employer or treating physician who shall sign and return a copy of such orders to the Board within ten (10) days of employment or receipt of this order.

c) Applicant shall immediately notify the Board in writing of any discipline incurred in other states during the duration of the probation; including criminal or licensing charges pending.

d) Applicant shall not violate any laws regulating the practice of being a pharmacy technician and shall comply with the terms of his criminal probation.

3. The failure of Applicant to comply with the terms of this decision may subject his to a show cause hearing and the imposition of further sanctions.

ISSUED, this 18 day of July, 2012.

INDIANA BOARD OF PHARMACY

By: 
Frances L. Kelly
Executive Director
Indiana Professional Licensing Agency

NOTICE OF RIGHT TO PETITION FOR REVIEW OF THIS DECISION

You may petition for review of this decision under Ind. Code § 4-21.5-3-7. The petition must be filed with the Indiana Board of Pharmacy in writing, identifying the reasons for review and demonstrating that you have been aggrieved or adversely affected by the Board's decision. The petition for review must be filed no later than eighteen days from the issuance of this decision unless such date is a Saturday, a Sunday, a legal holiday under state statute or a day the Indiana Professional Licensing Agency's offices are closed during regular business hours in which case the deadline would be the first day which is not a Saturday, a Sunday, a legal holiday under state statute or a day the Indiana Professional Licensing Agency's offices are closed during regular business hours.

If your petition for review is timely filed and review granted, you will receive notification of an administrative hearing. You or your representative must be present at that hearing. You have the right to be represented by an attorney at your own expense. A deputy attorney general may be present to represent the state of Indiana. As petitioner, you will have the burden of proving that the Board's decision is incorrect.

CERTIFICATE OF SERVICE

I certify that a copy of the Decision on Renewal Application has been duly served upon:

Alex Urbanski
8859 Mossy Rock Drive
Zionsville, IN 46077
Service by U.S. Mail

Alex Urbanski
3805 Campus Suites Drive
Apartment 327-A
West Lafayette, IN 47906
Service by U.S. Mail

7/19/12
Date


Greg Pachmayr

Indiana Board of Pharmacy
Indiana Government Center South
402 West Washington St., Room W072
Indianapolis, IN 46204
Phone: 317-234-2067
Fax: 317-233-4236
Email: pla4@pla.in.gov

Explanation of Service Methods

Personal Service: by delivering a true copy of the aforesaid document(s) personally.

Service by U.S. Mail: by serving a true copy of the aforesaid document(s) by First Class U.S. Mail, postage prepaid.

Service by Email: by sending a true copy of the aforesaid document(s) to the individual's electronic mail address.