

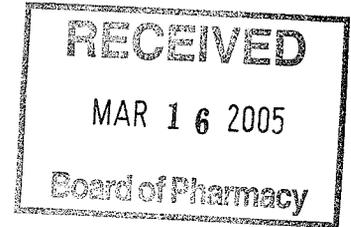
IN THE MATTER OF  
AUGUSTINE DURSO, P.D.  
LICENSE NO. 09953

\*  
\*  
\*

BEFORE THE MARYLAND  
STATE BOARD OF  
PHARMACY

\* \* \* \* \*

**CONSENT ORDER OF REINSTATEMENT**



**Background**

On February 10, 2005, Augustine Durso (the “Respondent”) submitted a Petition for Reinstatement to the Board of Pharmacy (the “Board”) for reinstatement of his license to practice pharmacy. On February 16, 2005, Mr. Durso appeared before a quorum of the Board to present his case in support of reinstatement and to answer questions posed by the Board regarding his ability to practice pharmacy in a safe and ethical manner.

Mr. Durso’s license was summarily suspended by the Board on October 26, 2004, based on his diversion of Oxycontin CR from St. Agnes Cancer Center Pharmacy and his addiction to controlled dangerous substances. The Board held a show cause hearing on November 17, 2004, to allow Mr. Durso the opportunity to show cause why he did not pose an imminent threat to the public’s health, safety and welfare. On November 18, 2004, the Board voted to continue the summary suspension of Mr. Durso’s license but permitted Mr. Durso to petition the Board for reinstatement no earlier than February 1, 2005. The Board further conditioned any reinstatement upon the receipt of a satisfactory substance abuse evaluation and a written recommendation from the Pharmacists Education and Assistance Committee (“PEAC”).

**FINDINGS OF FACT**

1. Mr. Durso has been fully compliant with the terms of his PEAC contract. PEAC supports the reinstatement of Mr. Durso’s license.

2. Mr. Durso has completed a substance abuse treatment and education program at Emmorton Treatment Services.
3. Mr. Durso continues to attend "professional" AA meetings, therapy, and submit to random urine screenings pursuant to the terms of his PEAC contract.

### CONCLUSIONS OF LAW

Mr. Durso has demonstrated full compliance with his PEAC contract and has otherwise demonstrated that he is capable of practicing pharmacy in a safe and ethical manner with the conditions set forth below.

### ORDER

Based on an affirmative vote of the Board, it is this 16TH day of MARCH, 2005, hereby:

**ORDERED** that Mr. Durso's license to practice pharmacy be reinstated *PROVIDED* that he first submit evidence of completion of 30 continuing education credits within the last 24 months; and be it further,

**ORDERED** that upon reinstatement, Mr. Durso's license shall be immediately placed on INDEFINITE PROBATION, subject to the following conditions:

1. Mr. Durso shall continue his contract with PEAC which contract shall include:
  - A. authorization for release of PEAC records, including therapy records, to the Board;
  - B. random full urinalysis at least weekly;
  - C. continuation of therapy;
  - D. requirement of Board approval prior to any change or modification to the PEAC contract;

- E. requirement that PEAC submit quarterly progress reports to the Board; and
  - F. requirement that PEAC notify the Board of any incident of non-compliance with the PEAC contract, this Consent Order, or treatment, within two (2) business days of the occurrence;
2. Mr. Durso may practice only in an oncology pharmacy;
  3. Mr. Durso may not have access to controlled dangerous substances;
  4. Mr. Durso may not practice more than 40 hours per week;
  5. Mr. Durso shall insure that his pharmacy supervisor submits to the Board quarterly progress reports;
  6. Mr. Durso shall provide the pharmacy employer with a copy of this Consent Order and insure that the attached verification form is completed by the employer and returned to the Board prior to commencing employment; and be it further

**ORDERED** that Mr. Durso's failure to abide by the terms of his PEAC contract or his removal from or voluntary cessation of the PEAC program shall be deemed a violation of the conditions of probation set forth herein; and be it further,

**ORDERED** that in the event the Board finds for any good faith reason that Mr. Durso has relapsed, has violated any of the conditions of probation herein, or in the event that the Board finds for any good faith reason that Mr. Durso has committed a violation of Title 12 of the Health Occupations Article or regulations adopted thereunder, the Board may immediately suspend Mr. Durso's license prior to a hearing; and be it further,

**ORDERED** that Mr. Durso may petition the Board for modification of the terms of probation after one (1) year provided that he has been compliant with all of the terms of probation; and be it further,

**ORDERED** that Mr. Durso may petition the Board for release from probation after two (2) years provided that he has been compliant with all of the terms of probation; and be it further,

**ORDERED** that this is a final order of the Maryland Board of Pharmacy and as such is a public document pursuant to the Maryland Annotated Code, State Government Article, Section 10-617(h).

Date

3/16/05

Melvin Rubin

Melvin Rubin, P.D.  
President, Board of Pharmacy

**CONSENT**

1. By signing this Consent, I hereby admit to the truth of the findings contained herein and agree to be bound by the foregoing Consent Order and its conditions.
2. By this Consent, I submit to the foregoing Consent Order as a resolution of this matter. By signing this Consent, I waive any rights I may have had to contest the findings and determinations contained in this Consent Order.
3. I acknowledge the legal authority and the jurisdiction of the Board to enter and enforce this Consent Order.
4. I sign this Consent Order freely and voluntarily, after having had the opportunity to consult with counsel. I fully understand the language, meaning, and effect of this Consent Order.

Date

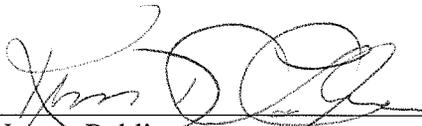
3/15/2005

Augustine Durso P.D.

Augustine Durso, P.D.

**STATE OF MARYLAND**  
**COUNTY/CITY OF** Spoford :

I hereby certify that on this 15 day of March, 2005, before me, a Notary Public of the State of Maryland and County/City aforesaid, personally appeared AUGUSTINE DURSO, and made an oath in due form that the foregoing Consent was his voluntary act and deed.

  
\_\_\_\_\_  
Notary Public  
My commission expires: March 26, 2005

**Kim D. La Plume**  
**Notary Public State Of Maryland**  
**My Commission Expires March 26, 05**

**PHARMACY EMPLOYER VERIFICATION FORM**

[TO BE COMPLETED BY PHARMACY EMPLOYER]

I hereby acknowledge that I am in receipt of a copy of the Consent Order of Reinstatement, dated \_\_\_\_\_, pertaining to the pharmacist's license of AUGUSTINE DURSO.

I further acknowledge that I have read and understand the terms and restrictions placed upon Mr. Durso's ability to practice pharmacy.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Pharmacy