

BEFORE THE NORTH CAROLINA BOARD OF PHARMACY

In the Matter of:)
)
Scott Duncan Crawford) VOLUNTARY SURRENDER
License No. 10060) OF LICENSE FOR CAUSE

Scott Duncan Crawford was issued license number 10060 by the North Carolina Board of Pharmacy on August 1, 1988, such license being active until December 31, 2012.

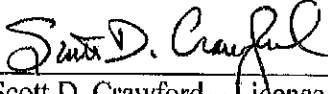
Mr. Crawford admits that while working as a licensed pharmacist with Mission Cancer Infusion Services Pharmacy, Permit #11136, located at 21 Hospital Drive, Third Floor, Asheville, North Carolina 28801, he committed acts that give the Board sufficient cause to revoke his license to practice pharmacy in North Carolina.

Considering that, Mr. Crawford voluntarily surrenders his license to practice pharmacy in North Carolina. The surrender of the license is made voluntarily and without pressure, coercion, or the threat of force being made against him. As a result of the voluntary surrender, Mr. Crawford shall not be present in any North Carolina pharmacy in any capacity other than as a customer/patient, with a valid prescription from a treating physician, unless and until the Board issues any further order.

Mr. Crawford understands and accepts that, at any point in the future, he may petition for reinstatement by submitting a request to the Board of Pharmacy, in writing. Upon a request for reinstatement, the Board will determine within sixty (60) days when it will schedule a hearing on the request for reinstatement. That hearing will be scheduled at the Board's discretion. There is no presumption, guarantee or other implication intended within this document that the Board will reinstate the license.

The decision will be made by the Board based on consideration of all available evidence presented at a formal hearing before the Board. The license will not be returned until and unless the Board issues a reinstatement order after any formal hearing.

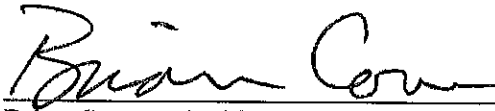
This the 12th day of November, 2012.



Scott D. Crawford – License No. 10060

CERTIFICATE OF SERVICE

I certify that on this the 12 day of November, 2012, I hand served a copy of the
Voluntary Surrender upon Respondent Scott Duncan Crawford License No. 10060.

A handwritten signature in black ink that reads "Brian Coon". The signature is written in a cursive style with a horizontal line underneath it.

Brian Coon, MA, CSAC
Director of Clinical Program Services
Pavillon
241 Pavillon Place
Mill Spring, N.C. 28756