

**STATE OF VERMONT
SECRETARY OF STATE
OFFICE OF PROFESSIONAL REGULATION
BOARD OF NURSING**

IN RE:	)	
Kathryn Butterly	)	Docket No. 2025- 112, 2025- 113
License No. 026.0138904	)	
License No. 101.0134433	)	

SUPERSEDING STIPULATION AND CONSENT ORDER

STIPULATION

NOW COME the State of Vermont, by and through State Prosecuting Attorney Rachel Heath, and Respondent Kathryn Butterly, by and through her attorney Timothy Belcher, Esq., who hereby Stipulate and Agree as follows:

Board Authority

1. The Vermont State Board of Nursing (the "Board") has authority to issue warnings or reprimands; suspend, revoke, limit, or condition current licenses; or prevent the renewal of lapsed licenses if, after disciplinary hearing, the Board finds that the Respondent has engaged in unprofessional conduct. 3 V.S.A. § 129(a); 3 V.S.A. § 129a; 3 V.S.A. § 814(d); 26 V.S.A. Chapter 28; the Administrative Rules of the Board of Nursing (the "ARBN"); and the Rules of the Office of Professional Regulation ("OPR Rules").

Stipulated Facts

2. Kathryn Butterly ("Respondent") of New Haven, Vermont is licensed by the State of Vermont as a Registered Nurse ("RN") under license number 026.0138904. This license was originally issued on May 2, 2019 and expires on March 31, 2027.
3. Respondent is also licensed by the State of Vermont as an Advanced Practice Registered Nurse (APRN) under license number 101.0134433. This license was originally issued on November 7, 2019 and expires on March 31, 2027.
4. On October 27, 2023, the State filed a Request for Summary Suspension in docket number 2023-156. Respondent accepted a stipulation to voluntarily indefinitely suspend her license, which the Board entered into order on November 13, 2023.
5. On November 20, 2023, the State filed a Specification of Charges in docket number 2023-156. The basis for the Specification of Charges was that Respondent had consumed alcohol while working as an RN in an emergency department and Respondent had acknowledged to an OPR investigator that she had an alcohol addiction.

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6. In docket number 2023-156, Respondent agreed to a stipulation and consent order that the Board accepted on February 14, 2024. Through this stipulation, Respondent admitted to the facts in the Specification of Charges.
7. In relevant part, the Order required Respondent to complete drug and alcohol conditions, and practice under on-site supervision for a minimum of one year of nursing practice, including monthly satisfactory employer reports.
8. On June 17, 2024, Respondent was working as an RN at the same facility as in docket number 2023-256.
9. On this date, Respondent was working in the emergency department.
10. Around 1:40 pm, Respondent was assigned to provide care to a young child who had dislocated his elbow.
11. At approximately 3:10 pm, the attending physician made a written order for one dose of 36.5 mg of ketamine, a Schedule III controlled substance.
12. Within a minute of this order, Respondent pulled a 500 mg vial of ketamine, from a PYXIS machine. This was the smallest vial of Ketamine available at the concentration the doctor ordered.
13. While Respondent was pulling the ketamine from the PYXIS machine, the attending physician asked Respondent to pull a second 36.5 mg dose for the patient in case an additional dose was needed.
14. Respondent filled two syringes each with 36.5 mg of ketamine.
15. At approximately 3:20 pm, Respondent administered the first 36.5 mg dose of ketamine to the patient.
16. Respondent subsequently disposed of the second dose of ketamine in the trash or sink because she was trying to quickly get the room ready for the next emergency patient.
17. Although Respondent asked someone to witness the wasting, the person whom Respondent claimed to have asked did not specifically recall witnessing Respondent waste the ketamine in the trash or sink.
18. Respondent did not document wasting this second dose of ketamine and likewise did not document a witness.
19. Under Facility policy, Respondent should have disposed of the second dose of ketamine in a wall mounted medication waste bin, which would have rendered the drug inaccessible.

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20. Respondent also failed to waste the remainder of the vial of ketamine before leaving the facility at the end of her shift.
21. Respondent then inadvertently took the vial with the remaining approximately 427 mg of ketamine home with her.
22. Upon discovering her error when she got home, Respondent did not contact anyone at the facility such as a supervisor, nor did she immediately return the vial of ketamine to the facility.
23. On June 18, 2024, the Pyxis software notified the pharmacy director that there was no waste associated with Respondent's Ketamine withdrawal.
24. The pharmacy director emailed Respondent and notified the nurse manager.
25. On June 18, 2024, Respondent returned for her next shift at approximately 1:00 pm. Respondent had not yet seen the email from the pharmacy director.
26. Approximately two hours after Respondent returned to work for her next shift, the emergency department nurse manager read her email from the pharmacy director and then went to Respondent and asked her for the vial of ketamine.
27. Respondent handed the nurse manager the vial containing the remainder of the ketamine.
28. Later that day, the nurse manager and a human resource (HR) representative asked Respondent what happened to the ketamine that the Pyxis software had notified as having not been wasted from the time of withdrawal until Respondent provided the vial to the nurse manager.
29. Respondent informed the nurse manager and HR representative that she had disposed of the second unused syringe of ketamine in a trash can or sink and locked the remaining vial in a medicine cabinet at the facility.
30. When video surveillance footage did not show Respondent locking the vial in the cabinet, the nurse manager and HR representative interviewed Respondent again on June 25, 2024.
31. During this second facility interview, Respondent ultimately admitted to taking home the vial of ketamine and not contacting her supervisor or the supervisor on duty to report the error.
32. As a result of this incident, Respondent's employment was terminated on July 3, 2024.
33. Respondent subsequently accepted employment as an RN at drug rehabilitation facility in Vergennes, Vermont.

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34. On or about January 15, 2025, an OPR Case Manager received an unsatisfactory employer report indicating Respondent had made the following medication errors.
35. First, on December 16, 2024, after Patient 1 refused her Suboxone medication, Respondent did not document that the medication was not given or refused and furthermore did not inform the provider.
36. The following day, December 17, 2024, Respondent gave this same patient twice the prescribed dose of Suboxone.
37. Separately, on January 8, 2025, Respondent sent Patient 2 home with medications that were for another resident.
38. While discharging Patient 2, Respondent grabbed multiple bags of medications she believed to be Patient 2's and handed the medication to a recovery assistant staff member, not realizing one of those bags was for another patient.
39. Respondent failed to check all of the bags and failed to check inside the bags to confirm the medications were correct.
40. Respondent likewise failed to review the medications with Patient 2 before providing the medication to the recovery assistant staff member.
41. Later in the evening, a nurse went to give a different patient their medications, at which time the nurse discovered Respondent had sent those medications home with Patient 2.

Violation One: 3 V.S.A. §129a(b)(1) Failure to practice competently by reason of any cause on a single occasion or on multiple occasions may constitute unprofessional conduct, whether actual injury to a client, patient, or customer has occurred. Failure to practice competently includes: (1) Performance of unsafe or unacceptable patient or client care.

42. Paragraphs 2 through 41 above are incorporated herein.
43. Vermont law requires registered nurses to practice competently by providing safe and acceptable patient care.
44. Paragraphs 29 through 34 above demonstrate that Respondent performed unsafe or unacceptable patient care by failing to document that a patient had refused her suboxone dose, providing twice the prescribed dose of suboxone to that patient and not informing the provider, and by sending a patient home with medications that were not hers.
45. The act(s), omission(s), Respondent has committed unprofessional conduct in violation of 3 V.S.A. § 129a(b)(1).

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Violation Two: 3 V.S.A. §129a(b)(2) Failure to practice competently by reason of any cause on a single occasion or on multiple occasions may constitute unprofessional conduct, whether actual injury to a client, patient, or customer has occurred. Failure to practice competently includes: (2) failure to conform to the essential standards of acceptable and prevailing practice.

46. Paragraphs 2 through 41 above are incorporated herein.
47. The essential standards of acceptable and prevailing practice require that an RN meet the patient's five rights of medication administration: the right patient, the right drug, the right dose, the right route, and the right time.
48. Paragraphs 2 through 41 above demonstrate that on multiple occasions, Respondent's practice fell below the essential standards of acceptable and prevailing practice when she failed to ensure that she satisfied patients' five rights of medication administration.
49. The essential standards of acceptable and prevailing practice require that an RN properly waste medication.
50. Paragraphs 16 through 22 above demonstrate that Respondent's practice fell below the essential standards of acceptable and prevailing practice when she failed to properly waste ketamine first by wasting the second dose of ketamine in the trash or sink, not documenting a witness to the wasting, and by subsequently taking home the vial with the remaining ketamine instead of properly wasting the medication before the end of her shift.
51. The essential standards of acceptable and prevailing practice require that an RN provide honesty to employers when they review a nurse's conduct.
52. Paragraphs 22 through 30 above demonstrate that Respondent's practice fell below the essential standards of acceptable and prevailing practice when she initially informed her employer that she had locked the ketamine in a cabinet at the Facility, instead of informing them that she had taken the ketamine home with her.
53. The essential standards of acceptable and prevailing practice for a registered nurse require that an RN properly document medication administration, including refusals.
54. Paragraph 35 above demonstrates that Respondent's practice fell below the essential standards of acceptable and prevailing practice when she failed to document that a patient had refused her dose of suboxone.

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55. The act(s), omission(s), and/or circumstance(s) described above constitute grounds for discipline because the Respondent has committed unprofessional conduct in violation of 3 V.S.A. § 129a(b)(2).

Violation Three: 3 V.S.A. § 129a(a)(4) Failing to comply with an order of the board or violating any term or condition of a license restricted by the board.

56. Paragraphs 2 through 41 above are incorporated herein.
57. As an RN and APRN, Respondent is required to comply with any orders issued against her licenses.
58. Paragraphs 34 through 41 demonstrate Respondent failed to comply with the February 2024 Order when an unsatisfactory employer report was submitted to the Case Manager.
59. The act(s), omission(s), and/or circumstance(s) described above constitute grounds for discipline because the Respondent has committed unprofessional conduct in violation of 3 V.S.A. § 129a(a)(4).

Violation Four: 3 V.S.A. § 129a(a)(15) Failing to exercise independent professional judgment in the performance of licensed activities when that judgment is necessary to avoid action repugnant to the profession.

60. Paragraphs 2 through 41 above are incorporated herein.
61. Under Vermont law, an RN and APRN must exercise independent professional judgment in the performance of licensed activities when such judgment is necessary to avoid action repugnant to the profession.
62. Paragraphs 2 through 41 above demonstrate that Respondent failed to exercise independent professional judgment in the performance of licensed activities when such judgment is necessary to avoid action repugnant to the profession when she failed to inform a supervisor she had taken the vial of ketamine home with her as soon as she discovered her error, failed to immediately inform a supervisor upon her return to work the following day, and by initially lying to her employer about taking the ketamine home with her.
63. The act(s), omission(s), and/or circumstance(s) described above constitute grounds for discipline because Respondent committed unprofessional conduct in violation of 3 V.S.A. § 129a(a)(15).

Understandings

64. Respondent admits the facts above are true and that the conditions below are necessary to protect the public.

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65. Respondent understands that the Nursing Board must review and accept the terms of the Consent Order. If the Board rejects any portion, the entire Stipulation and Consent Order shall be null and void.
66. Respondent specifically waives any claims that any disclosures made to the full Board during its review of this agreement have prejudiced her rights to a fair and impartial hearing in future hearings if this agreement is not accepted by the Board.
67. Respondent has read and reviewed this entire document and agrees that it contains the entire agreement between the parties.
68. Respondent is not under the influence of any drugs or alcohol at the time she signs this Stipulation and Consent Order.
69. Respondent voluntarily enters into this agreement after the opportunity to consult with legal counsel and is not being coerced by anyone into signing this Stipulation and Consent Order.
70. Respondent voluntarily waives her right to a contested hearing before the Board of Nursing and waives any right to appeal from this Stipulation and Consent Order.
71. Respondent agrees that the Order set forth below may be entered by the Board.

ORDER

Based on the Stipulation above, it is **ORDERED AND ADJUDGED** as follows:

- A. The Board of Nursing hereby **REPRIMANDS** Respondent's licenses.
- B. The Board of Nursing hereby **CONDITIONS** Respondent's licenses commencing with the date of entry of this Stipulation and Consent Order. The conditions will be as follows:
 1. Prior Order. This Order supersedes and replaces the prior Board Order of February 14, 2024, D-2023-156.
 2. Re-issuance of License. Upon the commencement of these conditions, Respondent shall be issued a license labeled "conditioned."
 3. License Renewal. This Order does not automatically extend the license and Respondent must comply with the requirements for license renewal.
 4. Length of Time of Conditions Imposed. The conditions shall remain in place until Respondent has completed all conditions ordered. Respondent shall be subject to the conditions until Respondent completes a minimum of **two years** of supervised RN or APRN practice in which Respondent works at least forty (40) hours every two (2) weeks as an RN or APRN. Part time hours of fewer than forty (40) hours every two (2) weeks shall be credited on a prorated basis. Respondent shall be

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prohibited from working more than forty (40) hours per week. **All hours that Respondent completed in compliance with the original Order in D-2023-156 shall be credited towards Respondent's compliance with this order.**

5. Monitoring. The Office of Professional Regulation, through the Enforcement Case Manager, shall be responsible for monitoring Respondent's compliance with these Conditions. All reports or correspondence regarding compliance with these conditions shall be submitted to the Case Manager in accordance with the Conditions listed below.
6. Completion of Substance Abuse Counseling, Treatment Plan, Treatment Reports and Recovery Groups. **Respondent shall engage in individual substance abuse counseling with a pre-approved counselor (the "Treating Professional") and comply with the substance abuse treatment plan until the Treating Professional certifies in writing that such counseling is no longer necessary and Respondent successfully petitions for a modification of these conditions.** Within ten (10) days of the date of entry of this Order, Respondent shall provide a copy of this Stipulation and Consent Order to the Treating Professional and inform him/her of Respondent's conditional license status and the accompanying conditions. Respondent shall cause the Treating Professional to submit to the Case Manager, on forms provided by the Case Manager, acknowledgement of receipt of the Stipulation and Consent Order along with Respondent's current treatment plan.

Respondent shall authorize the Treating Professional to submit monthly reports on forms issued by the Case Manager. Respondent shall authorize the Treating Professional to provide all information requested, either orally or in writing, at any time during the period this Consent Order is in effect.

If Respondent is prescribed medication as part of substance abuse counseling and treatment, Respondent's monthly treating professional reports must also indicate Respondent's current dosage and whether Respondent is appropriately taking the medication as prescribed. Respondent must continue to take such medications as prescribed, until the Treating Professional certifies in writing that such medication is no longer necessary.

In the event Respondent's medications are monitored by someone other than the approved Treating Professional, Respondent shall cause the prescribing provider to certify in writing, at intervals determined by the Case Manager, whether Respondent is appropriately taking the medication as prescribed. Respondent must continue to take such medications as prescribed until the prescribing provider certifies in writing that such medication is no longer necessary.

7. Self-Help Recovery Groups. Respondent shall participate as recommended by Respondent's Treating Professional in substance abuse recovery group(s). If such participation is recommended, Respondent shall submit quarterly reports documenting attendance on forms issued by the Case Manager.

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8. Random Drug and Alcohol Testing. Respondent shall submit to random drug and alcohol testing through the designated entity. All testing shall be done on a random, unannounced basis and analyzed by a lab qualified to analyze samples for forensic purposes. All specimens collected for tests shall be collected in an observed setting. All tests shall be negative.

Failure to appear for, refusal to provide, adulteration of, dilution of, or tampering with a sample for any test shall cause that test result to be presumed positive. Any positive test result shall constitute a violation of this Order. Failure to check in to determine whether Respondent is selected for testing on any given day, regardless of whether Respondent is actually selected that day, may be considered a violation of this Order.

Respondent may, after 18 months of compliance, petition for removal of this condition. Time in which Respondent complied with this condition in OPR docket D-2023-156 shall be credited towards Respondent's compliance with this order. In her petition, Respondent must demonstrate that she can safely practice without this condition. Respondent must include support from her treating professional, employer, and/or other sources. The State may consent or object to her petition, and the Board may conduct a hearing on the petition.

9. Abstain from Drug and Alcohol Use. Respondent shall abstain completely from the consumption or possession of alcohol and drugs.
10. Drug Use Exception. Respondent may take scheduled/controlled medications lawfully prescribed for a bona fide illness or condition by a health care practitioner disclosed to the Board in writing by Respondent within forty-eight (48) hours of the prescription. Respondent's health care practitioner shall inform the Board, in writing and on appropriate letterhead, of knowledge of Respondent's conditional license status within seven (7) days of entering the practitioner/patient relationship. Additionally, the practitioner shall inform the Board of all scheduled/controlled medications prescribed – and the anticipation of how long such prescriptions will need to be taken – within seven (7) days of the prescription.

The Board or its designee may request that the practitioner document the necessity for the prescribed scheduled/controlled medications or other medications known to have abuse potential. It is not anticipated that Respondent would be prescribed scheduled/controlled medication during the term of this Consent Order for a period greater than fourteen (14) days, but if so, then the conditions herein may be revoked by the Board.

Respondent shall provide the Case Manager with a current medication list of any medications taken on a scheduled or as-needed basis on forms issued by the Case Manager within seven (7) days of the date of reinstatement and shall update this list within forty-eight (48) hours of any change in these medications.

11. Notification to Employers/Educational Programs. Respondent shall provide a copy of this Stipulation and Consent Order to all employers in any current or

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future setting in which Respondent practices the profession and inform them of Respondent's conditional license status. Within ten (10) days of the date of entry of this Consent Order or of any subsequent employment in the profession, Respondent shall cause Respondent's immediate supervisor to submit to the Case Manager an employer agreement form, acknowledging receipt of the Stipulation and Consent Order and the ability to comply with the conditions in the Consent Order.

In the event Respondent is attending an educational program which has a clinical portion that involves actual patient care, Respondent shall provide a copy of the Stipulation and Consent Order to the Program Director. Respondent shall cause the Program Director to submit to the Case Manager a program agreement form provided by the Case Manager, acknowledging receipt of the Stipulation and Consent Order and the ability of the program to comply with the conditions in the Consent Order during the clinical experience.

12. Practice Under Supervision. Respondent shall practice as an RN or APRN only in a setting where Respondent is supervised for the entire shift by an APRN, Doctor of Osteopathy (DO), Doctor of Medicine (MD), or Physician's Assistant (PA) if practicing as an APRN, or by an APRN or RN if practicing as an RN. The level of supervision required is **On-Site Supervision**. **On-Site Supervision means the supervisor is present in the same facility as Respondent.**
13. Reports from Employers/Program Director. Within one (1) month of the date of reinstatement or within one (1) month of the commencement of employment in the profession and monthly thereafter, Respondent shall cause every nursing employer Respondent has worked for during the month to submit to the Case Manager an evaluation of Respondent's work performance and attendance during that month. In the event Respondent is attending an educational program in the profession, Respondent shall cause the Program Director to submit to the Case Manager, on a monthly basis, a written evaluation of Respondent's performance and attendance. These reports shall be submitted in writing on forms issued by the Case Manager. All employer reports shall indicate satisfactory performance (i.e. consistently meeting all standards of practice of the profession) and attendance.
14. Required Coursework. Respondent shall, at her own expense and within ninety (90) days of the date of entry of this Stipulation and Consent Order, successfully complete (i.e., receive a passing score, if applicable) the following coursework, or equivalent pre-approved by the Enforcement Case Manager.
 - i. Upholding the Standard: Professional Accountability in Nursing, from International Center for Regulatory Scholarship, 4.5 hours, and available here:

<https://catalog.icrsncsbn.org/browse/public/continuing-ed/nurses/courses/upholding-the-standard-sp24>

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- ii. Righting a Wrong – Ethics & Professionalism in Nursing, from International Center for Regulatory Scholarship, 3 hours, and available here:

<https://catalog.icrsncsbn.org/browse/public/continuing-ed/nurses/courses/righting-a-wrong-sp24>

- iii. Documentation: The Legal Side, from Relias Academy, 1 hour, available here:

<https://reliasacademy.com/rls/store/courses/documentation-the-legal-side/ /A-product-c1395728>

- iv. A minimum of 4 hours of coursework in stress management and/or nurse well-being. Respondent must seek pre-approval of this coursework from the Case Manager.

*Respondent must provide satisfactorily completed workbooks (if any) and certificates of completion to the Case Manager. Coursework may not be counted toward any continuing education requirement of licensure.

- 15. Required Essay. Respondent shall, within thirty (30) days of completing all required coursework, complete and submit a reflective essay that is responsive to the violations set forth above. Respondent should consider what she has learned in the required coursework and may conduct additional research. Respondent shall reflect on the strategies she will engage in for wellbeing and stress management. This essay must be approved in advance by the Case Manager and completed to the Case Manager's satisfaction.
- 16. Types of Employment Prohibited. Respondent shall not work in a supervisory role. Respondent shall not work for a nurse registry, traveling nurse agency, float-pool, home health care agency, temporary nursing employment agency, or as a private duty nurse or personal care provider requiring a nursing or nursing assistant license during the effective period of this Consent Order.
- 17. Interview with the Board or its Designee. Respondent shall appear in person for interviews with the Board or its designee upon request.
- 18. Out-of-State Practice. Before any out-of-state practice can be credited toward fulfillment of these terms and conditions, Respondent shall first obtain approval from the Board or its designee. The Board will approve out-of-state practice provided Respondent can still comply with the requirements of this Consent Order. If Respondent receives discipline on a professional license held in another state during the conditioned period, Respondent must inform the Board of such, in writing, within ten (10) days of receiving such discipline.

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19. Notification of Place of Employment/Personal Address/Telephone Number. Within ten (10) days of the date of entry of this Consent Order, Respondent shall notify the Board, in writing, of Respondent's current place of employment, personal address, and telephone number. Respondent shall further notify the Board, in writing, within forty-eight (48) hours of any change in employment (including resignation or termination), personal address, or telephone number.
20. Notification to Other States. In the event Respondent is licensed as a RN and/or APRN in any other state(s), Respondent must inform the licensing board of the state(s) in which Respondent is licensed of the conditional status of Respondent's Vermont license within thirty (30) days of the date of entry of this Order.
21. Release of Information Forms. This Order requires Respondent to authorize drug and/or alcohol treatment providers to report information in verbal and/or written format and/or to discuss Respondent and any and all treatment rendered to Respondent for drugs and/or alcohol with the Board or its designee. Any and all of this information may be provided to the Office of Professional Regulation investigators, and that the information may be used for further prosecutions if so warranted or if the Office of Professional Regulation determines that said information violates the terms of this Order or any rules or laws governing the profession of nursing.

Respondent is entitled to revoke this consent at any time. However, any revocation shall be considered a violation of this Order. This consent expires when the conditions are removed from Respondent's nursing license.

This Stipulation and Consent Order shall itself constitute a valid written consent pursuant to the requirements of 42 C.F.R. § 2.31. Respondent understands that Respondent's treatment provider may require Respondent's to sign a separate and distinct consent meeting the requirements of 42 C.F.R. § 2.31.

22. Costs. Respondent shall bear all costs of complying with this Consent Order.
23. Violation of this Order. If Respondent violates this Order the Board, after giving Respondent notice and an opportunity to be heard, may rescind or modify this Order and impose additional appropriate disciplinary actions. If a complaint of unprofessional conduct is made against Respondent during the term of this Order, this Order shall be automatically extended until the unprofessional conduct matter is concluded.
24. Completion of Conditional License Period. Respondent shall submit a petition to the Docket Clerk to remove any and all conditions on Respondent's license. The State will assent to or oppose Respondent's petition. The Board will conduct a hearing if necessary. Respondent bears the burden and must present proof that Respondent has fully complied with the terms of this Order and these conditions are no longer necessary to protect the public.

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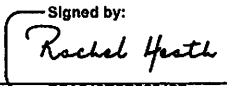
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- C. Notwithstanding any provision above, the Respondent must continue to meet all Nursing Board requirements for maintaining a license, license renewal and license reinstatement.
- D. This Stipulation and Consent Order is a matter of public record and may be reported to other licensing authorities as provided in 3 V.S.A. § 129(a).
- E. This Stipulation and Consent Order applies to all licenses this Board issues to Respondent, including future licenses, as provided in 3 V.S.A. § 129(I).
- F. This Stipulation and Consent Order will remain part of Respondent's licensing file and may be used for purposes of determining sanctions in any future disciplinary matter.

AGREED TO:

STATE OF VERMONT
SECRETARY OF STATE

Dated: 8/5/2025

By: 
Rachel Heath
Prosecuting Attorney

RESPONDENT

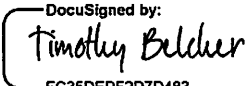
Dated: 8/5/2025

By: 
Kathryn Butterly

APPROVED AS TO FORM:

ATTORNEY FOR RESPONDENT

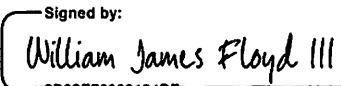
Dated: 8/14/2025

By: 
Timothy Belcher, Esq.

APPROVED AND SO ORDERED:

VERMONT BOARD OF NURSING

Dated: 9/8/2025

By: 
Chairperson

Date of Entry: 9/9/2025

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License No. 026.0138904	)	
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1. The Vermont State Board of Nursing (the "Board") has authority to issue warnings or reprimands; suspend, revoke, limit, or condition current licenses; or prevent the renewal of lapsed licenses if, after disciplinary hearing, the Board finds that the Respondent has engaged in unprofessional conduct. 3 V.S.A. § 129(a); 3 V.S.A. § 129a; 3 V.S.A. § 814(d); 26 V.S.A. Chapter 28; the Administrative Rules of the Board of Nursing (the "ARBN"); and the Rules of the Office of Professional Regulation ("OPR Rules").

Stipulated Facts

2. Kathryn Butterly ("Respondent") of New Haven, Vermont is licensed by the State of Vermont as a Registered Nurse ("RN") under license number 026.0138904. This license was originally issued on May 2, 2019 and expires on March 31, 2025.
3. Respondent is also licensed by the State of Vermont as an Advanced Practice Registered Nurse (APRN) under license number 101.0134433. This license was originally issued on November 7, 2019 and expires on March 31, 2025.
4. During the relevant time, Respondent worked as an RN in the emergency department for a facility in Middlebury, Vermont.
5. On September 8, 2023, at approximately 2:00 am while on duty at the facility, Respondent poured a hard seltzer into her cup and drank some. Respondent then left the break room.
6. Another co-worker came into the break room after Respondent left, and smelled alcohol in the room.

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7. The co-worker asked Respondent to return to the break room and confronted her about the alcohol she could smell.
8. Respondent admitted to having drank alcohol that night.
9. The co-worker reported Respondent to management, who sent her home. The co-worker drove Respondent home.
10. Respondent did not provide any care to patients after having consumed alcohol.
11. Shortly thereafter, Respondent was placed on leave.
12. In an interview with an OPR investigator on October 17, 2023, Respondent acknowledged she has had an addiction to alcohol for the past 3 or 4 years.
13. Respondent further informed the investigator that she had completed an inpatient treatment program and was working on getting into an outpatient treatment program. Respondent also stated she was working with her longtime therapist to find a therapist who works specifically on alcohol addiction.
14. The State filed a Request for Summary Suspension in this matter on October 27, 2023. The Board entered an order of Voluntary Indefinite Suspension on November 13, 2023.
15. Respondent completed an independent evaluation in the month of January 2024. The evaluator did not note any concerns and found that Respondent is stable and is ready to re-enter the nursing profession. The evaluator recommended Respondent continue with her recovery programing. Respondent also completed three urinalyses that all tested negative for drugs or alcohol.

Violation One: 26 V.S.A. § 1582(a)(3) Engaging in conduct of a character likely to deceive, defraud, or harm the public.

16. Paragraphs 2 through 15 above are incorporated herein.
17. As an RN and APRN, Respondent is required to refrain from engaging in conduct of a character likely to deceive, defraud, or harm the public.
18. Paragraphs 2 through 15 demonstrate that Respondent engaged in conduct of a character likely to deceive, defraud, or harm the public when she consumed alcohol while on duty as an RN.
19. The act(s), omission(s), and/or circumstance(s) described above constitute grounds for discipline because Respondent committed unprofessional conduct of a character likely to deceive, defraud, or harm the public in violation of 26 V.S.A. § 1582(a)(3).

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Violation Two: 3 V.S.A. § 129a(a)(5) Practicing the profession when medically or psychologically unfit to do so.

20. Paragraphs 2 through 15 above are incorporated herein.
21. As an RN and APRN, Respondent is required to not practice the profession when medically or psychologically unfit to do so.
22. Paragraphs 2 through 15 above demonstrate that Respondent practiced as an RN when medically or psychologically unfit to do so because her alcohol addiction was such that she was unable to refrain from drinking alcohol at work.
23. The act(s), omission(s), and/or circumstance(s) described above constitute grounds for discipline because the Respondent has committed unprofessional conduct in violation of 3 V.S.A. § 129a(a)(5).

Violation Three: 3 V.S.A. § 129a(a)(15) Failing to exercise independent professional judgment in the performance of licensed activities when that judgment is necessary to avoid action repugnant to the profession.

24. Paragraphs 2 through 15 above are incorporated herein.
25. Under Vermont law, an RN and APRN must exercise independent professional judgment in the performance of licensed activities when such judgment is necessary to avoid action repugnant to the profession.
26. Paragraphs 2 through 15 above demonstrate that Respondent failed to exercise independent professional judgment in the performance of licensed activities when such judgment is necessary to avoid action repugnant to the profession when she drank alcohol while on duty as an RN.
27. The act(s), omission(s), and/or circumstance(s) described above constitute grounds for discipline because Respondent committed unprofessional conduct in violation of 3 V.S.A. § 129a(a)(15).

Understandings

28. Respondent admits the facts above are true and the conditions below are necessary to protect the public.
29. Respondent understands that the Board must review and accept the terms of the Consent Order. If the Board rejects any portion, the entire Stipulation and Consent Order shall be null and void.
30. Respondent specifically waives any claim that any disclosures made to the Board during review of this agreement have prejudiced Respondent's right to a fair and

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impartial hearing if this agreement is not accepted and proceeds to a hearing on the merits before the same Board.

31. Respondent has read and reviewed this entire document and agrees it contains the entire agreement between the parties.
32. Respondent is not under the influence of any drugs or alcohol at the time of signing this Stipulation and Consent Order.
33. Respondent voluntarily enters into this agreement after the opportunity to consult with legal counsel and is not being coerced by anyone into signing this Stipulation and Consent Order.
34. Respondent voluntarily waives the right to a contested hearing before the Board and waives any right to appeal from this Stipulation and Consent Order.
35. Respondent understands that she is responsible for all compliance costs associated with this Stipulation and Consent Order.
36. Respondent agrees the Board may enter the Order set forth below.

ORDER

Based on the Stipulation above, it is **ORDERED AND ADJUDGED** as follows:

- A. The Board of Nursing hereby **CONDITIONS** the Respondent's licenses for a **MINIMUM OF ONE YEAR**, commencing on the date of reinstatement. The **CONDITIONS** shall be as follows:
 1. Re-issuance of License. Upon the commencement of these conditions and the renewal of Respondent's licenses, Respondent shall be issued licenses labeled "conditioned."
 2. Length of Time of Conditions Imposed. The conditions shall remain in place until Respondent has completed all conditions ordered. Respondent shall be subject to the conditions until Respondent completes a **minimum of one year** of supervised RN or APRN practice in which Respondent works at least forty (40) hours every two (2) weeks as an RN or APRN. Part time hours of fewer than forty (40) hours every two (2) weeks shall be credited on a prorated basis. Respondent shall be prohibited from working more than forty (40) hours per week.
 3. Monitoring. The Office of Professional Regulation, through the Enforcement Case Manager, shall be responsible for monitoring Respondent's compliance with these Conditions. All reports or correspondence regarding compliance with these conditions shall be submitted to the Case Manager in accordance with the Conditions listed below.

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4. Completion of Substance Abuse Counseling, Treatment Plan, Treatment Reports and Recovery Groups. Respondent shall engage in individual substance abuse counseling with a pre-approved counselor (the "Treating Professional") and comply with the substance abuse treatment plan until the Treating Professional certifies in writing that such counseling is no longer necessary and Respondent successfully petitions for a modification of these conditions. Within ten (10) days of the date of entry of this Order, Respondent shall provide a copy of this Stipulation and Consent Order to the Treating Professional and inform him/her of Respondent's conditional license status and the accompanying conditions. Respondent shall cause the Treating Professional to submit to the Case Manager, on forms provided by the Case Manager, acknowledgement of receipt of the Stipulation and Consent Order along with Respondent's current treatment plan.

Respondent shall authorize the Treating Professional to submit monthly reports on forms issued by the Case Manager. Respondent shall authorize the Treating Professional to provide all information requested, either orally or in writing, at any time during the period this Consent Order is in effect.

If Respondent is prescribed medication as part of substance abuse counseling and treatment, Respondent's monthly treating professional reports must also indicate Respondent's current dosage and whether Respondent is appropriately taking the medication as prescribed. Respondent must continue to take such medications as prescribed, until the Treating Professional certifies in writing that such medication is no longer necessary.

In the event Respondent's medications are monitored by someone other than the approved Treating Professional, Respondent shall cause the prescribing provider to certify in writing, at intervals determined by the Case Manager, whether Respondent is appropriately taking the medication as prescribed. Respondent must continue to take such medications as prescribed until the prescribing provider certifies in writing that such medication is no longer necessary.

5. Self-Help Recovery Groups. Respondent shall participate as recommended by Respondent's Treating Professional in substance abuse recovery group(s). If such participation is recommended, Respondent shall submit quarterly reports documenting attendance on forms issued by the Case Manager.
6. Random Drug and Alcohol Testing. Respondent shall submit to random drug and alcohol testing through the designated entity. All testing shall be done on a random, unannounced basis and analyzed by a lab qualified to analyze samples for forensic purposes. All specimens collected for tests shall be collected in an observed setting. All tests shall be negative.

Failure to appear for, refusal to provide, adulteration of, dilution of, or tampering with a sample for any test shall cause that test result to be presumed positive. Any positive test result shall constitute a violation of this Order. Failure to check in to determine whether Respondent is selected for testing on any given day, regardless of whether Respondent is actually selected that day, may be considered a violation

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of this Order.

7. Abstain from Drug and Alcohol Use. Respondent shall abstain completely from the consumption or possession of alcohol and drugs.
8. Drug Use Exception. Respondent may take scheduled/controlled medications lawfully prescribed for a bona fide illness or condition by a health care practitioner disclosed to the Board in writing by Respondent within forty-eight (48) hours of the prescription. Respondent's health care practitioner shall inform the Board, in writing and on appropriate letterhead, of knowledge of Respondent's conditional license status within seven (7) days of entering the practitioner/patient relationship. Additionally, the practitioner shall inform the Board of all scheduled/controlled medications prescribed – and the anticipation of how long such prescriptions will need to be taken – within seven (7) days of the prescription.

The Board or its designee may request that the practitioner document the necessity for the prescribed scheduled/controlled medications or other medications known to have abuse potential. It is not anticipated that Respondent would be prescribed scheduled/controlled medication during the term of this Consent Order for a period greater than fourteen (14) days, but if so, then the conditions herein may be revoked by the Board.

Respondent shall provide the Case Manager with a current medication list of any medications taken on a scheduled or as-needed basis on forms issued by the Case Manager within seven (7) days of the date of reinstatement and shall update this list within forty-eight (48) hours of any change in these medications.

9. Notification to Employers/Educational Programs. Respondent shall provide a copy of this Stipulation and Consent Order to all employers in any current or future setting in which Respondent practices the profession and inform them of Respondent's conditional license status. Within ten (10) days of the date of entry of this Consent Order or of any subsequent employment in the profession, Respondent shall cause Respondent's immediate supervisor to submit to the Case Manager an employer agreement form, acknowledging receipt of the Stipulation and Consent Order and the ability to comply with the conditions in the Consent Order.

In the event Respondent is attending an educational program which has a clinical portion that involves actual patient care, Respondent shall provide a copy of the Stipulation and Consent Order to the Program Director. Respondent shall cause the Program Director to submit to the Case Manager a program agreement form provided by the Case Manager, acknowledging receipt of the Stipulation and Consent Order and the ability of the program to comply with the conditions in the Consent Order during the clinical experience.

10. Practice Under Supervision. Respondent shall practice as an RN or APRN only in a setting where Respondent is supervised for the entire shift by an APRN if practicing as an APRN, or by an APRN or RN if practicing as an RN. The level of

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supervision required is On-Site Supervision. On-Site Supervision means the supervising nurse is present in the same facility as Respondent.

11. Reports from Employers/Program Director. Within one (1) month of the date of reinstatement or within one (1) month of the commencement of employment in the profession and monthly thereafter, Respondent shall cause every nursing employer Respondent has worked for during the month to submit to the Case Manager an evaluation of Respondent's work performance and attendance during that month. In the event Respondent is attending an educational program in the profession, Respondent shall cause the Program Director to submit to the Case Manager, on a monthly basis, a written evaluation of Respondent's performance and attendance. These reports shall be submitted in writing on forms issued by the Case Manager. All employer reports shall indicate satisfactory performance (i.e. consistently meeting all standards of practice of the profession) and attendance.
12. Types of Employment Prohibited. Respondent shall not work in a supervisory role. Respondent shall not work for a nurse registry, traveling nurse agency, float-pool, home health care agency, temporary nursing employment agency, or as a private duty nurse or personal care provider requiring a nursing or nursing assistant license during the effective period of this Consent Order.
13. Interview with the Board or its Designee. Respondent shall appear in person for interviews with the Board or its designee upon request.
14. Out-of-State Practice. Before any out-of-state practice can be credited toward fulfillment of these terms and conditions, Respondent shall first obtain approval from the Board or its designee. The Board will approve out-of-state practice provided Respondent can still comply with the requirements of this Consent Order. If Respondent receives discipline on a professional license held in another state during the conditioned period, Respondent must inform the Board of such, in writing, within ten (10) days of receiving such discipline.
15. Notification of Place of Employment/Personal Address/Telephone Number. Within ten (10) days of the date of entry of this Consent Order, Respondent shall notify the Board, in writing, of Respondent's current place of employment, personal address, and telephone number. Respondent shall further notify the Board, in writing, within forty-eight (48) hours of any change in employment (including resignation or termination), personal address, or telephone number.
16. Notification to Other States. In the event Respondent is licensed as a RN and/or APRN in any other state(s), Respondent must inform the licensing board of the state(s) in which Respondent is licensed of the conditional status of Respondent's Vermont license within thirty (30) days of the date of entry of this Order.
17. Release of Information Forms. This Order requires Respondent to authorize drug and/or alcohol treatment providers to report information in verbal and/or written format and/or to discuss Respondent and any and all treatment rendered to Respondent for drugs and/or alcohol with the Board or its designee. Any and all

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of this information may be provided to the Office of Professional Regulation investigators, and that the information may be used for further prosecutions if so warranted or if the Office of Professional Regulation determines that said information violates the terms of this Order or any rules or laws governing the profession of nursing.

Respondent is entitled to revoke this consent at any time. However, any revocation shall be considered a violation of this Order. This consent expires when the conditions are removed from Respondent's nursing license.

This Stipulation and Consent Order shall itself constitute a valid written consent pursuant to the requirements of 42 C.F.R. § 2.31. Respondent understands that Respondent's treatment provider may require Respondent's to sign a separate and distinct consent meeting the requirements of 42 C.F.R. § 2.31.

18. Costs. Respondent shall bear all costs of complying with this Consent Order.
 19. Violation of this Order. If Respondent violates this Order the Board, after giving Respondent notice and an opportunity to be heard, may rescind or modify this Order and impose additional appropriate disciplinary actions. If a complaint of unprofessional conduct is made against Respondent during the term of this Order, this Order shall be automatically extended until the unprofessional conduct matter is concluded.
 20. Completion of Conditional License Period. Respondent shall submit a petition to the Docket Clerk to remove any and all conditions on Respondent's license. The State will assent to or oppose Respondent's petition. The Board will conduct a hearing if necessary. Respondent bears the burden and must present proof that Respondent has fully complied with the terms of this Order and these conditions are no longer necessary to protect the public.
- B. Notwithstanding any provision above, the Respondent must continue to meet all Board requirements for maintaining a license, license renewal and license reinstatement.
 - C. This Stipulation and Consent Order is a matter of public record and may be reported to other licensing authorities as provided in 3 V.S.A. §129(a).
 - D. This Stipulation and Consent Order will remain part of Respondent's licensing file and may be used for purposes of determining sanctions in any future disciplinary matter.

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