

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

IN RE:)
DAVID G. DUMAS)
License No. 026.0080829)

Docket No. 2015-134

STIPULATION AND CONSENT ORDER

NOW COMES the State of Vermont, by and through State Prosecuting Attorney Elizabeth A. Jarvis, and the Respondent, David G. Dumas, represented by Robert J. Kaplan, Esq., who 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. §1582; 26 V.S.A. §1584; the Administrative Rules of the Board of Nursing (the "ARBN"); and the Rules of the Office of Professional Regulation.

Stipulated Facts

2. David G. Dumas (the "Respondent") of Fairfax, Vermont is licensed by the State of Vermont as a Registered Nurse under license number 026.0080829. This license was originally issued on or about September 7, 2011, and expires on or about March 31, 2017.
3. During the relevant time period, Respondent was employed as a Registered Nurse at Northwestern Medical Center (the "Facility"), located in Saint Albans, Vermont.
4. The Facility uses Omnicell dispensing machines for authorized staff to make medication withdrawals for patients. There are three Omnicell machines in the emergency department.
 - a. The Facility pharmacy fills the machine with the medication and authorized staff logs into the machine, indicates the drug type and quantity to be withdrawn, and the patient it is being withdrawn for.
 - b. Incomplete transactions register as a Null Transaction.

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c. If the patient name is not known, authorized staff can use the code for "floor charge" in the patient name category.

5. On or about March 30, 2015, RN P.S. dispensed a "take home" bottle of Oxycodone/APAP ("Percocet") to patient M.R. M.R. returned to the hospital a short time later to report that the tablets in the bottle he was given were not Percocet. RN J.D. confirmed that the tablets were actually 500 milligram acetaminophen.
6. On or about March 31, 2015, Pharmacy Manager J.C. inventoried the Omnicell machines and in addition to the bottle patient M.R. returned, discovered the following:
 - a. 6 Percocet "take home" bottles contained 500 milligram acetaminophen tablets instead of Percocet in the Immediate Care Omnicell dispensing machine ("IC"). Each bottle contained 4 tablets.
 - b. 2 Percocet "take home" bottles contained 500 milligram acetaminophen tablets instead of Percocet in the Emergency Department 1 Omnicell dispensing machine ("ED1"). Each bottle contained 4 tablets.
 - c. 3 Percocet "take home" bottles contained 500 milligram acetaminophen tablets instead of Percocet in the Emergency Department 2 Omnicell dispensing machine ("ED2"). Each bottle contained 4 tablets.
7. On or about March 31, 2015, a Null Transaction report was run on each of the three Omnicell dispensing machines in the emergency department for the time period between October 1, 2014, and March 30, 2015. There were 26 Null Transactions during this date range. Respondent was responsible for 20 of them.
 - a. On or about February 6, 2015, Respondent had one null transaction on ED2 for Percocet under patient name "floor charge."
 - b. On or about February 11, 2015, Respondent had one null transaction on ED2 for Percocet under patient name "floor charge."
 - c. On or about February 11, 2015, Respondent had two null transactions on IC for Percocet under patient name "floor charge."
 - d. On or about February 12, 2015, Respondent had two null transactions on IC for Percocet under patient name "floor charge."
 - e. On or about February 22, 2015, Respondent had two null transactions on IC for Percocet under patient name "floor charge."
 - f. On or about February 24, 2015, Respondent had one null transaction on ED1 for Percocet under patient name "floor charge."

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- g. On or about February 25, 2015, Respondent had one null transaction on ED2 for Percocet under Patient Five.
 - h. On or about February 26, 2015, Respondent had one null transaction on ED2 for Percocet under patient name "floor charge."
 - i. On or about March 6, 2015, Respondent had one null transaction on IC for Percocet under patient name "floor charge."
 - j. On or about March 7, 2015, Respondent had one null transaction on IC for Percocet under patient name "floor charge."
 - k. On or about March 10, 2015, Respondent had one null transaction on ED2 for Percocet under patient name "floor charge."
 - l. On or about March 22, 2015, Respondent had one null transaction on IC for Percocet under Patient Four.
 - m. On or about March 24, 2015, Respondent had one null transaction on IC for Percocet under Patient One.
 - n. On or about March 24, 2015, Respondent had one null transaction on ED1 for Percocet under Patient One.
 - o. On or about March 26, 2015, Respondent had one null transaction on ED2 for Percocet under Patient Two.
 - p. On or about March 26, 2015, Respondent had two null transactions on ED2 for Percocet under Patient Three.
8. On or about April 2, 2015, Investigator John Lewis interviewed the Respondent. The Respondent admitted the following:
- a. On or about the beginning of February 2015, the Respondent began taking Percocet from the Omnicell machines for his personal use.
 - b. The Respondent would replace the Percocet tablets with acetaminophen.
 - c. The Respondent estimated he exchanged acetaminophen for Percocet approximately ten times from three different Omnicell machines in the emergency department, but acknowledged he may have done this more than 10 times.
 - d. The Respondent would record his access under the "floor charge" patient name, but would occasionally use a patient's name.

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9. On or about April 2, 2105, the Respondent gave Investigator Lewis an acetaminophen bottle containing 5 round white tablets with the numerals "512" on one side of each tablet. Respondent located this bottle in his private vehicle. Pharmacy Manager J.C. identified these tablets as Percocet.

Violations

10. 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:
- a. 3 V.S.A §129a(a)(7) (Willfully making or filing false reports or records in the practice of the profession; willfully impeding or obstructing the proper making or filing of reports or records or willfully failing to file the proper reports or records);
 - b. 3 V.S.A §129a(b)(1) and (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: (1) performance of unsafe or unacceptable patient or client care; or (2) failure to conform to the essential standards of acceptable and prevailing practice);
 - c. 3 V.S.A. §129a(a)(3) (Failure to comply with provisions of federal or State statutes or rules governing the practice of the profession);

Understandings

11. Respondent acknowledges that the facts above are true and that the conditions set out in the Consent Order below are appropriate and necessary to protect the public.
12. 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.
13. Respondent specifically waives any claims that any disclosures made to the full Board during its review of this agreement have prejudiced Respondent's rights to a fair and impartial hearing if this agreement is not accepted by the Board and proceeds to a contested hearing.
14. Respondent has read and reviewed this entire document and agrees that it contains the entire agreement between the parties.
15. Respondent is not under the influence of any drugs or alcohol at the time Respondent signs this Stipulation and Consent Order.

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16. 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.
17. Respondent voluntarily waives Respondent's right to a contested hearing before the Board of Nursing and waives any right to appeal from this Stipulation and Consent Order.
18. 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 **REINSTATES and CONDITIONS** the Respondent's license for a **MINIMUM OF THREE (3) YEARS, commencing on the date of entry of this order.** The **CONDITIONS** shall be as follows:
 1. Re-issuance of License. Upon the commencement of these conditions, Respondent shall be issued a license 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 three (3) years** of supervised nursing in which Respondent works at least forty (40) hours every two (2) weeks as a nurse. 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. Completion of Substance Abuse Counseling, Treatment Plan, Treatment Reports and recovery groups. Respondent shall enter into and continue substance abuse counseling and comply with substance abuse treatment plan until the pre-approved treating professional certifies in writing to the Board that such counseling is no longer necessary. Respondent shall provide a copy of his Psychological and Substance Use Assessment, dated September 10, 2015, and completed by Dr. Richard Root, EdD, ABPP, to his treating professional.

Respondent shall authorize Respondent's treating professional to submit to the Board **monthly** reports on forms issued by the Board. Respondent shall authorize Respondent's treating professional to provide all information requested by the Nursing Board, either orally or in writing, at any time during the period this Consent Order is in effect.

Respondent shall also participate as recommended by Respondent's treating professional in substance abuse recovery group(s), and shall submit **quarterly** reports documenting such attendance on forms issued by the Board.

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4. Random Drug and Alcohol Testing. Respondent shall submit to random drug and alcohol screenings at the request of the Board or its designee for a **minimum of two (2) years**. Respondent shall designate a person or entity that has been pre-approved by the Board or its designee to administer random drug and alcohol screens. All testing shall be done on a random, unannounced basis and analyzed by a lab qualified to analyze samples for forensic purposes and approved by the Board. All urine specimens collected for tests shall be collected in an observed setting. All screens shall be negative.

Failure to appear for, refusal to provide, adulteration of, dilution of, or tampering with a sample for any urine screen shall cause that screen to be presumed positive. Any positive screen shall constitute a violation of this Order.

5. Abstain from Drug and Alcohol Use. Respondent shall abstain completely from the consumption or possession of alcohol and drugs.
6. 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 health care practitioner shall inform the Board, in writing and on appropriate letterhead, of knowledge of Respondent's substance abuse issue(s) within seven (7) days of entering into 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 Board with a current medication list of any medications taken on a scheduled or as-needed basis on forms issued by the Board within seven (7) days of the date of reinstatement, as well as at the request of the Board or the Board's representative. The Respondent shall provide the Board or the Board's representative with an updated this list within forty-eight (48) hours of any change in these medications

7. Individual Psychotherapy. Respondent shall engage in individual psychotherapy and comply with the recommendations of his treating professional until that treating professional certifies in writing to the Board that such counseling is no longer necessary. Respondent shall provide a copy of his Psychological and Substance Use

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Assessment, dated September 10, 2015, and completed by Dr. Richard Root, EdD, ABPP, to his treating professional.

Respondent shall authorize Respondent's treating professional to submit to the Board **quarterly** reports on forms issued by the Board. Respondent shall authorize Respondent's treating professional to provide all information requested by the Nursing Board, either orally or in writing, at any time during the period this Consent Order is in effect.

8. Notification to Employers/Nursing School. Respondent shall provide a copy of this Stipulation and Consent Order to all employers in any current or future setting in which Respondent practices as a nurse 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 nursing employment, Respondent shall cause Respondent's immediate supervisor to submit to the Board an employer agreement form approved by the Board, 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 a nursing 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 Board a nursing program agreement form approved by the Board, acknowledging receipt of the Stipulation and Consent Order and the ability of the program to comply with the conditions in the Consent Order during clinical experience.

9. Reports from Employers/Program Director. Within one (1) month of the date of reinstatement or within one (1) month of the commencement of nursing employment and **monthly** thereafter, Respondent shall cause every nursing employer Respondent has worked for during the month to submit to the Board an evaluation of Respondent's work performance and attendance during that month. Moreover, on a **quarterly** basis, these reports shall include the results of the employer's medication audits of Respondent's medication administration and practices. In the event Respondent is attending a nursing program, Respondent shall cause the Program Director to submit to the Board, 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 Board. All employer reports shall indicate satisfactory performance (ie., consistently meeting all standards of nursing practice) and attendance.
10. Practice Under Supervision. Respondent shall practice as a nurse only in a setting where Respondent has direct supervision for the entire shift by a licensed registered nurse that is in good standing with the Board.
11. Administration of Medications. Respondent is prohibited from administering any controlled substances. This condition may be removed only by Respondent filing a

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petition with the Board after Respondent has worked as a nurse for six (6) months for at least forty (40) hours every two weeks (or the part time equivalent) after the date of reinstatement.

In any such petition, Respondent must demonstrate, to the satisfaction of the Nursing Board or its designee, that Respondent can safely and competently administer such medications. Respondent must include appropriate support from Respondent's treating professional and employer or nursing school administrator and a description of the documentation and inventory control procedures in place.

The removal of this prohibition shall not automatically result in the reinstatement of all medication privileges. The Board may gradually restore those privileges through whatever intermediary steps it determines are appropriate.

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. The Board will approve out-of-state nursing practice so long as Respondent can still comply with the provisions of this Consent Order. If Respondent receives discipline on a nursing 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 that Respondent is licensed in nursing in any other state(s), Respondent must inform the nursing licensing board of the state(s) in which Respondent is licensed of the conditional status of Respondent's Vermont nursing license within thirty (30) days of the date of entry of this Order.
17. License Renewal. This Order does not automatically extend the license and Respondent must comply with the requirements for license renewal.

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18. 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.

19. Costs. Respondent shall bear all costs of complying with this Consent Order.
20. 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.
21. Completion of Conditional License Period. Respondent must petition the Board, or its designee, to remove any and all conditions on Respondent's license. Respondent must present proof that Respondent has fully complied with the terms of this Order. Respondent must also present proof of successful substance abuse rehabilitation, that Respondent poses no danger to the public or the practice of nursing, and that Respondent can safely and competently perform the duties of a licensed nurse.
- 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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AGREED TO:

Dated: 10/9/15

STATE OF VERMONT
SECRETARY OF STATE

By: Elizabeth A. Jarvis
Elizabeth A. Jarvis
State Prosecuting Attorney

DAVID G. DUMAS
RESPONDENT

Dated: 10/8/2015

By: David G. Dumas
David G. Dumas

APPROVED AS TO FORM ONLY:

ROBERT J. KAPLAN, ESQ.
ATTORNEY FOR RESPONDENT

Dated: 10/8/15

By: Robert J. Kaplan, Esq.
Robert J. Kaplan, Esq.

APPROVED AND SO ORDERED:

VERMONT BOARD OF NURSING

Dated: 10/12/15

By: Chairperson
Chairperson

Date of Entry: 10/12/15

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

IN RE:)
DAVID G. DUMAS) Docket No. 2015-134
License No.: 026.0080829)

VOLUNTARY INDEFINITE SUSPENSION STIPULATION

NOW COME the State of Vermont, by and through State Prosecuting Attorney Elizabeth A. Jarvis, and the Respondent, David G. Dumas, who stipulate and agree as follows:

1. To moot summary suspension proceedings under 3 V.S.A. § 814(c) in the matter captioned above, the State and Respondent request that license no. 026.0080829 be voluntarily suspended, for an indefinite period, pending adjudication on the merits.
2. Proceedings on the merits shall be promptly instituted and determined.
3. Respondent understands that this agreement is a matter of public record and that this suspension pending adjudication on the merits may be reported to other licensing authorities as provided in 3 V.S.A. 129(a)(6).

ORDER

The Vermont Board of Nursing hereby suspends license no. 026.0080829 pending adjudication on the merits of the matter captioned above.

AGREED TO:

STATE OF VERMONT
SECRETARY OF STATE

Dated: 5/8/2015

By: Elizabeth A. Jarvis
Elizabeth A. Jarvis
State Prosecuting Attorney

DAVID G. DUMAS
RESPONDENT

Dated: 5/8/2015

By: David G. Dumas
David G. Dumas

APPROVED AS TO FORM:

ATTORNEY FOR RESPONDENT

STATE OF VERMONT



Prosecuting Attorney
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Montpelier, VT
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Dated: 5/8/2015

APPROVED AND SO ORDERED:

Dated: 5-11-2015

Date of Entry: 5/12/15

By: [Signature]
Robert J. Kaplan, Esq.

VERMONT BOARD OF NURSING

By: [Signature]
Chairperson

STATE OF VERMONT



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

IN RE:
DAVID G. DUMAS
License No. 026.0080829

)
)

Docket No. 2015-134

REQUEST FOR SUMMARY SUSPENSION

Board Authority

1. The Vermont Board of Nursing (the "Board") has jurisdiction to investigate and adjudicate allegations of unprofessional conduct committed by Nurses pursuant to 3 V.S.A. §§ 129, 129a; 26 V.S.A. Chapter 28; the Administrative Rules of the Board of Nursing ("ARBN"); and the Rules of the Office of Professional Regulation.
2. The Board of Nursing is authorized by 3 V.S.A. § 814 to summarily suspend the license of a nurse when it finds that the public health, safety, or welfare imperatively requires emergency action.

Statement of Facts

3. David G. Dumas (the "Respondent") of Fairfax, Vermont is licensed by the State of Vermont as a Registered Nurse under license number 026.0080829. This license was originally issued on or about September 7, 2011, and expires on or about March 31, 2017.
4. During the relevant time period, Respondent was employed as a Registered Nurse at Northwestern Medical Center (the "Facility"), located in Saint Albans, Vermont.
5. The Facility uses Omnicell dispensing machines for authorized staff to make medication withdrawals for patients. There are three Omnicell machines in the emergency department.
 - a. The Facility pharmacy fills the machine with the medication and authorized staff logs into the machine, indicates the drug type and quantity to be withdrawn, and the patient it is being withdrawn for.
 - b. Incomplete transactions register as a Null Transaction.
 - c. If the patient name is not known, authorized staff can use the code for "floor charge" in the patient name category.

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6. On or about March 30, 2015, RN P.S. dispensed a "take home" bottle of Oxycodone/APAP ("Percocet") to patient M.R. M.R. returned to the hospital a short time later to report that the tablets in the bottle he was given were not Percocet. RN J.D. confirmed that the tablets were actually 500 milligram acetaminophen.
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 - b. 2 Percocet "take home" bottles contained 500 milligram acetaminophen tablets instead of Percocet in the Emergency Department 1 Omnicell dispensing machine ("ED1"). Each bottle contained 4 tablets.
 - c. 3 Percocet "take home" bottles contained 500 milligram acetaminophen tablets instead of Percocet in the Emergency Department 2 Omnicell dispensing machine ("ED2"). Each bottle contained 4 tablets.
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 - b. On or about February 11, 2015, Respondent had one null transaction on ED2 for Percocet under patient name "floor charge."
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 - e. On or about February 22, 2015, Respondent had two null transactions on IC for Percocet under patient name "floor charge."
 - f. On or about February 24, 2015, Respondent had one null transaction on ED1 for Percocet under patient name "floor charge."
 - g. On or about February 25, 2015, Respondent had one null transaction on ED2 for Percocet under Patient Five.

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- h. On or about February 26, 2015, Respondent had one null transaction on ED2 for Percocet under patient name "floor charge."
 - i. On or about March 6, 2015, Respondent had one null transaction on IC for Percocet under patient name "floor charge."
 - j. On or about March 7, 2015, Respondent had one null transaction on IC for Percocet under patient name "floor charge."
 - k. On or about March 10, 2015, Respondent had one null transaction on ED2 for Percocet under patient name "floor charge."
 - l. On or about March 22, 2015, Respondent had one null transaction on IC for Percocet under Patient Four.
 - m. On or about March 24, 2015, Respondent had one null transaction on IC for Percocet under Patient One.
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 - p. On or about March 26, 2015, Respondent had two null transactions on ED2 for Percocet under Patient Three.
9. On or about April 2, 2015, Investigator John Lewis interviewed the Respondent. The Respondent admitted the following:
- a. On or about the beginning of February 2015, the Respondent began taking Percocet from the Omnicell machines for his personal use.
 - b. The Respondent would replace the Percocet tablets with acetaminophen.
 - c. The Respondent estimated he exchanged acetaminophen for Percocet approximately ten times from three different Omnicell machines in the emergency department, but acknowledged he may have done this more than 10 times.
 - d. The Respondent would record his access under the "floor charge" patient name, but would occasionally use a patient's name.
10. On or about April 2, 2015, the Respondent gave Investigator Lewis an acetaminophen bottle containing 5 round white tablets with the numerals "512" on one side of each

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tablet. Respondent located this bottle in his private vehicle. Pharmacy Manager J.C. identified these tablets as Percocet.

Charges

11. The above acts and circumstances, alone or in combination, violate:
- a. 3 V.S.A. §129a(a)(7) (Willfully making or filing false reports or records in the practice of the profession; willfully impeding or obstructing the proper making or filing of reports or records or willfully failing to file the proper reports or records);
 - b. 3 V.S.A. §129a(b)(1) and (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: (1) performance of unsafe or unacceptable patient or client care; or (2) failure to conform to the essential standards of acceptable and prevailing practice);
 - c. 3 V.S.A. §129a(a)(3) (Failure to comply with provisions of federal or State statutes or rules governing the practice of the profession);
 - d. 26 V.S.A. §1582(a)(3) (Is unable to practice nursing competently by reason of any cause);
 - e. 26 V.S.A. §1582(a)(4) (Has willfully or repeatedly violated any of the provisions of this chapter);
 - f. 26 V.S.A. §1582(a)(5) (Is habitually intemperate or is addicted to the use of habit-forming drugs); and
 - g. 26 V.S.A. §1582(a)(7) (Engages in conduct of a character likely to deceive, defraud, or harm the public).

WHEREFORE, the State of Vermont respectfully requests that pursuant to 3 V.S.A. § 814(c), the Respondent's nursing license number 026.0080829 be summarily suspended, pending a hearing on the merits.

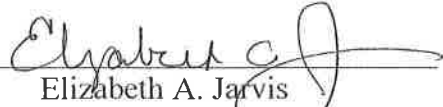
DATED at Montpelier, Vermont this 30th day of April, 2015.

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STATE OF VERMONT
SECRETARY OF STATE

By: 
Elizabeth A. Jarvis
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