

**STATE OF VERMONT
BOARD OF NURSING**

In re: Jessica Larson
License No. 026-27533

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Docket No. 2010-21

Decision on Sanction

Participating Board Members:

Ellen W. Leff, RN, Chair
Donarae Metcalf, LPN
De-Ann Welch, LPN
William G. White, Jr.
Deborah Robinson, RN
Jeanine Carr, RN
Kenneth Bush, RN

Appearances:

for Petitioner, State of Vermont: Betsy Ann Wrask, Esq.
for Respondent: Theodore A. Parisi, Jr., Esq.

Presiding Officer: George K. Belcher

**FINDINGS OF FACT, CONCLUSIONS OF LAW,
AND ORDER**

The Vermont Board of Nursing held a hearing in the above matter on June 14, 2010 at the National Life Building in Montpelier, Vermont.

Background

The State and Respondent have entered a Stipulation. The Board accepted the Stipulation of facts at its last meeting on May 10, 2010 and Respondent's license was summarily suspended. That order was dated May 11, 2010 and entered on May 14, 2010. The parties agreed that the Board shall determine if the Facts stipulated to constitute unprofessional conduct, and if so, what sanction is to be imposed. The Stipulation shall be attached to this Decision.

Findings of Fact

Based on the Stipulation and the arguments and presentation of parties, the Board finds as follows:

1. Respondent is licensed as a registered nurse and is therefore subject to the regulatory authority of this Board. 3 V.S.A. §§ 129, 129a, 26 V.S.A. § 1582(a), the Administrative Rules of the Board of Nursing, and the Rules of the Office of Professional Regulation. §§ 1595 and 1598, the Administrative Rules of the Board of Nursing, and the Rules of the Office of Professional Regulation.
2. The Board adopts the facts as set forth and stipulated to by the State and Respondent in paragraphs 2 through 8 of the Stipulation and Consent Order.

Conclusions of Law

1. We conclude that Ms. Larson has committed unprofessional conduct in violation of:
 - a. 26 V.S.A. Sec. 1582(a)(3) (Is unable to practice nursing by reason of any cause);
 - b. 26 V.S.A. Sec. 1582(a)(7) (Engaged in conduct of a character likely to deceive, defraud, or harm the public);
 - c. 3 V.S.A. Sec. 129a(b)(1) and (2) (Failure to practice competently by reason of any cause on a single occasion or on multiple occasions. 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 practice); and
 - d. 3 V.S.A. Sec. 129a(a)(3) (Failure to comply with provisions of federal or state statutes or rules governing the practice of the profession).

For the violations above, to protect the public, health, safety and welfare, the following sanction is necessary.

Order

Ms. Larson's license shall be **indefinitely suspended**. The Board will not entertain a motion for reinstatement until at least November 14, 2010.

Before applying for reinstatement, Ms. Larson must meet the following conditions:
Within forty-five (45) days of requesting reinstatement:

- 1) Ms. Larson shall obtain an independent evaluation report by a licensed professional specializing in drug and alcohol abuse, pre-approved by the Board or its designee;
- 2) The results of the report with the drug and alcohol independent evaluator must indicate that Ms. Larson does not present a risk to the safety, health, or welfare of her potential patients; and

3) Ms. Larson must submit to the Board or its designee the results of a minimum of three (3) random urine analyses administered by a person who has been pre-approved by the Board or its designee, and analyzed by a lab pre-approved by the Board or its designee which is qualified to analyze samples for forensic purposes.

4) The results of the random urinalyses shall be negative. Failure to appear for, refusal to provide, adulteration of, dilution of, or tampering with a sample for any urine analysis shall cause that screen to be presumed to be positive.

Ms. Larson's license shall not be reinstated until these prerequisites are met.

License Conditions

(1) Re-issuance of License

When Ms. Larson has shown successful completion of the reinstatement conditions above, her license shall be reinstated as "conditioned." The conditions set forth below shall remain with Ms. Larson's license until further Order of the Board.

(2) Length of time of Conditions Imposed

These conditions shall remain in place until Ms. Larson has completed all conditions ordered. Ms. Larson shall be subject to the conditions until Ms. Larson completes a **minimum of three (3) years** of supervised practice in which she works at least forty (40) hours every two (2) weeks as a licensed registered nurse. Part time employment of less than forty (40) hours every two (2) weeks shall be credited on a pro-rated basis. Ms. Larson shall be prohibited from working more than forty (40) hours per week.

(3) Completion of Substance Abuse Counseling and Treatment Plan

If recommended by the evaluating professional identified in the conditions for reinstatement, paragraph 1, Ms. Larson shall enter into and continue substance abuse counseling with a treating professional pre-approved by the Board until the treating professional shall certify in writing to the Board that such counseling is no longer necessary. Ms. Larson shall enter into and comply with the substance abuse treatment plan approved by the Board and the treating professional.

(4) Notification to Treating Professional

Ms. Larson shall provide a copy of this Order to the treating professional and cause the treating professional to inform the Board, in writing on professional letterhead, of receipt of the Order and the treating professional's ability to comply with the conditions related to treatment and with all other terms of this Order.

(5) Reports from Treating Professional

(a) Ms. Larson shall authorize and cause the treating professional to submit to the Board evidence of satisfactory progress with the treatment plan during the effective period of this Order. The first report is due commencing one month after the date of the

commencement of the conditions. Subsequent reports are due **monthly** thereafter.

(b) Ms. Larson shall authorize the treating professional to provide all information requested by the Board of Nursing, or its designee, either orally or in writing, at any time during the period this Order is in effect.

(6) Participation in Recovery Group(s)

If recommended by the treating professional, Ms. Larson shall participate in substance abuse recovery group(s), and shall submit **quarterly** reports to the Board documenting such attendance on forms issued by the Board.

(7) Random Drug and Alcohol Testing

(a) Ms. Larson shall submit to random substance abuse screenings at the request of the Board or its designee. Ms. Larson shall designate a person, who has been pre-approved by the Board or its designee, to administer random substance abuse screens. All testing shall be done on a random, unannounced basis and be analyzed by a laboratory which is qualified to analyze samples for forensic purposes and which is approved by the Board. All urine specimens collected for tests shall be collected in an observed setting. All screens shall be negative.

(b) 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.

(8) Abstain from Drug and Alcohol Use

Ms. Larson shall abstain completely abstain from the consumption or possession of alcohol and drugs with the exception of drugs as outlined in Paragraph 9 for the duration of this Order.

(9) Drug Use Exception

(a) Ms. Larson shall not take controlled substances unless necessary. Ms. Larson may take scheduled/controlled medications lawfully prescribed for a bona fide illness or condition by a physician, dentist, or nurse practitioner whose identity shall be made known to the Board in writing by Ms. Larson within forty-eight (48) hours of the establishment of the practitioner/patient relationship. Ms. Larson shall ensure that the physician, dentist or nurse practitioner informs the board, in writing and on appropriate letter head, of knowledge of Ms. Larson's substance abuse issue(s) within one (1) week of entering into the practitioner / patient relationship. Ms. Larson shall inform the Board in writing of all scheduled/controlled medications prescribed, including the name of the prescribing practitioner, within forty-eight (48) hours of receiving the prescription.

(b) The Board or its designee may request at any time that the practitioner document the

continued necessity for the prescribed scheduled/controlled medication during the term of this Order for a period greater than fourteen (14) days, but if so, then the conditions herein may be revoked by the Board.

(c) Ms. Larson shall keep a written record of all medications taken, including over the counter drugs, and produce such record upon the request of the Board or its designee.

(10) Notification to Employers/Nursing School

(a) **Employer** Ms. Larson shall provide a copy of this Order to all employers in any current or future setting in which Ms. Larson practices as a registered nurse and inform them of the conditional license status.

Within ten (10) days of the date of entry of this Order or of any subsequent employment, Ms. Larson shall cause Ms. Larson's immediate supervisor to write on the employer's letterhead to the Vermont Board of Nursing acknowledging receipt of this Order and acknowledging the employer's ability to comply with the conditions required by this Order.

(b) **Nursing School** Should Ms. Larson attend a nursing program which has a clinical portion that involves actual patient care, Ms. Larson shall provide a copy of this Order to the Program Director. Ms. Larson shall cause the Program Director to write to the Board on school letterhead acknowledging receipt of the Order and the ability of the program to comply with the terms of this Order during Ms. Larson's clinical experience.

(11) Reports from Employers/Program Director

Within one (1) month of the date of entry of this Order and monthly thereafter, Ms. Larson shall cause every employer Ms. Larson has worked for during the relevant period as a registered nurse to submit to the Board an evaluation of Ms. Larson's performance during that period. This report shall be on forms issued by the Board.

(12) Practice Under Supervision:

Ms. Larson shall practice only in a setting where Ms. Larson has direct supervision for the entire shift by a licensed registered nurse in good standing.

(13) Administration of Medications

(a) Ms. Larson is prohibited from administering any controlled substances. This condition may be removed only by Ms. Larson filing a petition with the Board after she has worked as a registered nurse for twelve (12) weeks of at least forty (40) hours every two weeks (or the part time equivalent) after the date of reinstatement of her license.

(b) In any such petition, Ms. Larson must demonstrate to the satisfaction of the Board, that she can safely and competently administer such medications. In any such petition, Ms. Larson must include appropriate support from the treating professional and employer

or nursing school administrator and a description of the documentation and inventory control procedures in place.

(c) The removal of this prohibition shall not automatically result in reinstatement of all medication privileges. The Board may gradually restore those privileges through intermediary steps it deems appropriate.

(14) Types of Employment Prohibited

Ms. Larson shall not work for a nurse registry, traveling nurse agency, float-pool, home health care agency, temporary nursing employment agency or as a personal care provider during the effective period of this Order.

(15) Interview with Board or its Designee.

Ms. Larson shall appear in person for interviews with the Board or its designee upon request.

(16) Out-of-State Practice

Out-of-state practice can be credited toward fulfillment of this Order only if Ms. Larson shall first obtain prior approval from this Board for out-of-state practice. If Ms. Larson fails to obtain prior approval before practicing out-of-state, none of the out of state practice time will be credited toward fulfillment of this terms of this Order. The Board will approve out-of-state practice so long as Ms. Larson can still comply with the provisions of this Order.

(17) Notification of Place of Employment, Personal Address, Telephone Number

Within 5 days of the entry of this Order, Ms. Larson shall notify the Board in writing, of her current place of employment, personal address, and telephone number. Ms. Larson shall further notify the Board, in writing, withing forty-eight (48) hours of any change of employment, personal address, or telephone number.

(18) Notification to Other States

In the event that Ms. Larson is licensed in any other state(s), Ms. Larson must, within thirty (30) days, inform the nursing licensing board there of the conditioned status of Ms. Larson's license in Vermont. Failure to provide such notification will constitute a violation of this Order.

(19) License Renewal

If Ms. Larson's license expires while this Order remains in effect, this Order does not automatically extend the license. To continue to practice Ms. Larson must timely apply for renewal, pay the applicable fee, and demonstrate that all renewal requirements have been satisfied.

(20) Release of Information Forms

This Order requires Ms. Larson to authorize substance abuse treating providers to report to the Board or its designee and provide information verbally or in written form and to discuss Ms. Larson and all treatment rendered. This Order requires that any and all information from Ms. Larson's treatment providers be provided to Office of Professional Regulation investigators. Information acquired by the Board, its designees, or the Office of Professional Regulation investigators may be used for further prosecution, if it is determined that the terms of this Order, or any rules or laws governing the practice of nursing have been violated.

(21) Costs

Ms. Larson shall bear all costs of complying with this Order.

(22) Violation of this Order

If Ms. Larson violates the terms of this Order in any respect, the Board, after giving Ms. Larson notice and an opportunity to be heard, may rescind or modify this Order and impose additional appropriate disciplinary sanctions. If a complaint of unprofessional conduct is made against Ms. Larson during the term of this Order, the Order shall be automatically extended until the unprofessional conduct matter is concluded.

(23) Completion of Conditional License Period

(a) After the conditional license period, Ms. Larson may petition the Board to remove any and all license conditions. Ms. Larson must present proof that all terms of this Order have been met. Ms. Larson must also present proof of successful substance abuse rehabilitation. Ms. Larson must demonstrate to the satisfaction of the Board that she poses no danger to the public or the practice of nursing and that Ms. Larson can safely and competently perform her licensed duties.

(b) Notwithstanding any provision above, Ms. Larson must continue to meet all Board of Nursing requirements for maintaining a license, license renewal, and license reinstatement.

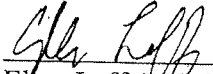
APPEAL RIGHTS

This is a final administrative determination by the Vermont Board of Nursing. A party aggrieved by a final decision of a board may appeal this decision by filing a written Notice of Appeal with the Director of the Office of Professional Regulation, Vermont Secretary of State, Office of Professional Regulation, National Life Bldg., North, FL2, Montpelier, Vermont 05620-3402 within 30 days of the entry of this Order.

If an appeal is filed, the Director of the Office of Professional Regulation shall assign the case to an appellate officer. The review shall be conducted on the basis of the record created before the board. In cases of alleged irregularities in procedure before the board, not shown in the record, proof on that issue may be taken by the appellate officer. 3 V.S.A. §§ 129(d) and 130a.

To request a stay of the Board's decision, please refer to the attached stay instructions.

Vermont Board of Nursing

By: 
Ellen Leff, RN, Chair

Date June 18, 2010

OFFICE OF PROFESSIONAL REGULATION

DATE OF ENTRY: 6/23/10

Fair Hearing

**STATE OF VERMONT
BOARD OF NURSING**

In re: Jessica Larson
License No. 026-27533

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Docket No. 2010-21

Decision on Stipulation and Summary Suspension Request

Participating Board Members:

Ellen W. Leff, RN, Chair
Alan Weiss
Sandra Norton, LNA
Donarae Metcalf, LPN
De-Ann Welch, LPN
William G. White Jr.
Deborah Robinson, RN

Appearances:

for Petitioner, State of Vermont: Betsy Ann Wrask
for Respondent: Theodore A. Parisi, Jr. (Because of Board delay, Mr. Parisi was unable to participate at the hearing)

Presiding Officer: Larry S. Novins

**FINDINGS OF FACT, CONCLUSIONS OF LAW,
AND SUMMARY SUSPENSION ORDER**

The Vermont Board of Nursing held a hearing in the above matter on May 10, 2010 at the National Life Building in Montpelier, Vermont.

Background

The State and Ms. Larson have entered a Stipulation. The Board accepted the Stipulation. The parties have left for the Board's determination 1) whether the facts stipulated to constitute unprofessional conduct, and 2) if they do, what is the appropriate sanction.

Findings of Fact

Based on the Stipulation and representations of the parties, the Board finds as follows:

1. Ms. Larson is licensed as a registered nurse and is therefore subject to the regulatory authority of this Board. 3 V.S.A. §§ 129, 129a, 26 V.S.A. § 1582(a), the Administrative Rules of the Board of Nursing, and the Rules of the Office of Professional Regulation.
2. We adopt the facts as set forth and stipulated to by the State and Ms. Larson in paragraphs

- 2 through 8 of the Stipulation which is attached to this Decision.
3. The facts stipulated to by the parties imperatively require emergency action for the public health, safety, and welfare.

Conclusions of Law

The State's Request for a Summary Suspension is supported by the evidence presented through the Stipulation. The Board concludes that the allegations in the Request for Summary Suspension have been established to the necessary degree. There is an imperative need to take emergency action. 3 V.S.A. § 814(c).

Order

The State's Request for Summary Suspension is **Granted**. Ms. Larson's license is summarily suspended pending proceedings for revocation or other action. These proceedings shall be promptly instituted and determined. 3 V.S.A. § 814(c).

This matter shall be set for a Disposition Hearing at the Board's June 14, 2010 meeting. At that time the Board will determine whether the Stipulated Facts constitute unprofessional conduct. If they do, the Board will then determine the appropriate sanction.

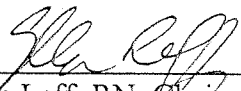
APPEAL RIGHTS

This is a final administrative determination by the Vermont Board of Nursing. A party aggrieved by a final decision of a board may appeal this decision by filing a written Notice of Appeal with the Director of the Office of Professional Regulation, Vermont Secretary of State, Office of Professional Regulation, National Life Bldg., North, FL2, Montpelier, Vermont 05620-3402 within 30 days of the entry of this Order.

If an appeal is filed, the Director of the Office of Professional Regulation shall assign the case to an appellate officer. The review shall be conducted on the basis of the record created before the board. In cases of alleged irregularities in procedure before the board, not shown in the record, proof on that issue may be taken by the appellate officer. 3 V.S.A. §§ 129(d) and 130a.

To request a stay of the Board's decision, please refer to the attached stay instructions.

Vermont Board of Nursing

By: 
Ellen Leff, RN, Chair

Date May 11, 2010

OFFICE OF PROFESSIONAL REGULATION

DATE OF ENTRY: 5/14/10

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

IN RE:

JESSICA KRISTIN LARSON

License No. 026.0027533

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Docket No. 2010-21

STIPULATION AND CONSENT ORDER

STIPULATION

NOW COME the State of Vermont, by and through State Prosecuting Attorney BetsyAnn Wrask, and the Respondent, Jessica Kristin Larson, RN, 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; the Administrative Rules of the Board of Nursing (the "ARBN"); and the Rules of the Office of Professional Regulation.

Statement of Facts

2. Jessica Kristin Larson (the "Respondent") of Fair Haven, Vermont is licensed by the State of Vermont as a Registered Nurse under license number 026.0027533. This license was originally issued on or about August 29, 2002 and is currently set to expire on or about March 31, 2011.
3. At all times relevant, Respondent was employed as a Registered Nurse at Rutland Regional Medical Center (the "Facility"), located in Rutland, Vermont.
4. On or about March 23, 2010 in an interview with State Investigator Steve Kennedy, Respondent advised that on or about February 19, 2010, she had been placed on administrative leave from the Facility for diverting narcotics.
5. On or about March 30, 2010 in an interview with Investigator Kennedy, Facility Director of Human Resources D.T. stated that pursuant to an OmniCell (computerized drug dispensing system) high user report regarding Respondent, the Facility conducted an internal investigation which revealed that there were approximately thirty-two (32) discrepancies in Respondent's removal of narcotics from OmniCell and her documentation of administration of these narcotics. D.T.

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Prosecuting Attorney
Office of
Professional Regulation
9 Baldwin Street
Montpelier, VT
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stated that on or about February 19, 2010 in a meeting among D.T., Respondent, and Director of Surgical Care S.R., the Respondent admitted to taking regulated drugs from the Facility without authorization.

6. A review of the discrepancies found by the Facility are enumerated in part below:
- a. On or about January 1, 2010 at 12:54 p.m., Respondent withdrew from the OmniCell one (1) Oxycodone/Acetaminophen ("Percocet") tablet for Patient C.E. Respondent did not document administering this narcotic to C.E. in the Medication Administration Record (the "MAR"). C.E. was discharged from the Facility at 1:00 on this date.
 - b. On or about January 1, 2010 at 1:22 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient S.W. Respondent only documented administering one (1) Percocet tablet to S.W. in the MAR.
 - c. On or about January 10, 2010 at 8:07 a.m., Respondent withdrew from the OmniCell one (1) Percocet tablet for Patient R.M. Respondent did not document administering this narcotic to R.M. in the MAR.
 - d. On or about January 10, 2010 at 9:57 a.m., Respondent withdrew from the OmniCell one (1) Percocet tablet for Patient R.M. Respondent did not document administering this narcotic to R.M. in the MAR.
 - e. On or about January 13, 2010 at 8:14 a.m., Respondent withdrew from the OmniCell one (1) Percocet tablet for Patient C.B. Respondent did not document administering this narcotic to C.B. in the MAR.
 - f. On or about January 13, 2010 at 11:09 a.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient M.R. Respondent only documented administering one (1) Percocet tablet to M.R. at 11:10 a.m. in the MAR.
 - g. On or about January 13, 2010 at 4:37 p.m., Respondent withdrew from the OmniCell one (1) Percocet tablet for Patient C.B. Respondent did not document administering this narcotic to C.B. in the MAR. C.B. was discharged from the Facility at 4:42 p.m. on this date.
 - h. On or about January 13, 2010 at 6:21 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient M.R. Respondent did not document administering these tablets to M.R. in the MAR. M.R. was discharged from the Facility at 6:31 p.m. on this date.
 - i. On or about January 14, 2010, Respondent was not assigned to Patient E.C. On this date at 1:07 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient E.C. Respondent did not document administering these tablets

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to E.C. in the MAR. E.C. was discharged from the Facility on this date at 1:22 p.m.

- j. On or about January 14, 2010, Respondent was not assigned to Patient E.R. On this date at 1:07 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for E.R. Respondent did not document administering these tablets to E.R. in the MAR. E.R. was discharged from the Facility on this date at 1:10 p.m.
- k. On or about January 14, 2010 at 2:48 p.m., Respondent withdrew from the OmniCell one (1) Percocet tablet for Patient Y.M. in two (2) separate transactions, for a total of two (2) Percocet tablets being withdrawn. Respondent only documented in the MAR that she administered one (1) tablet to Y.M. at 2:50 p.m. on this date.
- l. On or about January 19, 2010 at 10:36 a.m., Respondent withdrew from the OmniCell two (2) Hydrocodone/APAP 5/500 mg (Vicodin) tablets for Patient A.P. Respondent documented an administration of this narcotic to A.P. in the MAR, but did not specify the amount of narcotic administered.
- m. On or about January 19, 2010 at 5:22 p.m., Respondent withdrew from the OmniCell two (2) Hydrocodone/APAP 5/500 mg (Vicodin) tablets for Patient A.P. Respondent documented in the MAR that she administered these two (2) tablets to A.P. at 5:20 p.m. on this date; however, A.P. was discharged from the Facility at 5:28 p.m. on this date.
- n. On or about January 19, 2010 at 5:31 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient H.G. Respondent only documented in the MAR that she administered one (1) tablet to H.G. at 5:35 p.m. on this date.
- o. On or about January 21, 2010 at 10:04 a.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient A.V. Respondent only documented in the MAR that she administered one (1) tablet to A.V. at 10:10 a.m. on this date.
- p. On or about January 21, 2010 at 10:05 a.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient S.R. Respondent only documented in the MAR that she administered one (1) tablet to S.R. at 10:10 a.m. on this date.
- q. On or about January 21, 2010 at 1:48 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient A.V. Respondent only documented in the MAR that she administered one (1) tablet to A.V. at 1:50 p.m. on this date.
- r. On or about January 21, 2010, Respondent documented in the MAR that she administered one (1) Percocet tablet to Patient A.V. at 3:30 p.m. on this date. However, there is no corresponding OmniCell withdrawal for this documented administration.

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- s. On or about January 21, 2010 at 3:55 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient S.R. Respondent only documented in the MAR that she administered one (1) tablet to S.R. at 4:00 p.m. on this date.
- t. On or about January 23, 2010 at 9:06 a.m., Respondent withdrew from the OmniCell one (1) Percocet tablet for Patient S.R. Respondent did not document administering this narcotic to S.R. in the MAR.
- u. On or about January 26, 2010 at 8:01 a.m., Respondent withdrew from the OmniCell one (1) Percocet tablet for Patient W.B. Respondent did not document administering this narcotic to W.B. in the MAR.
- v. On or about January 26, 2010, Respondent was not assigned to Patient J.R. On this date at 9:47 a.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for J.R. Respondent only documented in the MAR that she administered one (1) tablet to J.R. at 9:50 a.m. on this date.
- w. On or about January 26, 2010 at 2:12 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient W.B. Respondent only documented in the MAR that she administered one (1) tablet to W.B. at 2:15 p.m. on this date.
- x. On or about January 26, 2010 at 6:51 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient W.B. Respondent only documented in the MAR that she administered one (1) tablet to W.B. at 6:55 p.m. on this date.
- y. On or about January 29, 2010 at 8:33 a.m., Respondent withdrew from the OmniCell one (1) Percocet tablet for Patient W.B. Respondent did not document administering this narcotic to W.B. in the MAR.
- z. On or about January 29, 2010 at 2:33 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient W.B. Respondent only documented in the MAR that she administered one (1) tablet to W.B. at 2:40 p.m. on this date.
- aa. On or about January 29, 2010 at 5:48 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient C.C. Respondent documented in the MAR an administration of this narcotic to C.C. at 5:50 p.m. on this date, but did not specify the amount of narcotic administered.
- bb. On or about February 7, 2010 at 3:15 p.m., Patient M.O.'s pain scale was documented as zero. On this date at 4:32 p.m., Respondent withdrew from the OmniCell two (2) Hydromorphone (Dilaudid) 2 mg tablets for Patient M.O. Respondent did not document the administration of these tablets in the MAR. M.O. was discharged from the Facility at 4:40 p.m. on this date.

7. Respondent admits that she diverted narcotics from the Facility for her own personal use.

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05609-1107

8. Respondent has been cited to appear in Rutland District Court on or about May 17, 2010 for the offense of Regulated Drug Fraud or Deceit, in violation of 18 V.S.A. § 4223(a)(3) and (c).

Charges

9. The State contends that the act(s), omission(s), and/or circumstance(s) described above constitute grounds for discipline because allegedly the Respondent has committed unprofessional conduct in violation of:
- a. 26 V.S.A. § 1582(a)(3) (Is unable to practice nursing competently by reason of any cause);
 - b. ARBN Chapter 4, Rule IV(II)(B)(1) and (2) ("Inability to practice nursing competently" includes: (1) performance of unsafe or unacceptable patient care; and (2) failure to conform to the essential standards of acceptable and prevailing practice);
 - c. ARBN Chapter 4, Rule IV(II)(C) ("Any cause" includes, but is not limited to, reasons of physical or mental disability or use of drugs, narcotics, chemicals, or any other type of materials);
 - d. 26 V.S.A. § 1582(a)(5) (Is habitually intemperate or is addicted to the use of habit-forming drugs);
 - e. 26 V.S.A. § 1582(a)(7) (Engages in conduct of a character likely to deceive, defraud, or harm the public) which includes diverting supplies, equipment, or drugs for personal or other unauthorized use pursuant to ARBN Chapter 4, Rule IV(II)(D)(4);
 - f. 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); and
 - g. 3 V.S.A. § 129a(a)(3) (Failing to comply with provisions of federal or state statutes or rules governing the practice of the profession).
10. The Respondent disputes the State's position and shall have the opportunity to argue that the agreed-upon facts do not constitute unprofessional conduct for any and/or all of the Charges above.

Understandings

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11. Respondent admits the facts above are true.
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 her rights to a fair and impartial hearing in future hearings if this agreement is not accepted by the Board.
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 she signs this Stipulation and Consent Order.
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 her right to a hearing on the facts before the Board of Nursing and waives any right to appeal from this Stipulation and Consent Order. The Respondent and the State shall each be able to have a hearing on whether the facts constitute unprofessional conduct and if so, the appropriate sanction/disposition.
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 parties have not reached agreement as to the sanction required, if any, as a result of the alleged unprofessional conduct described above.** The parties leave the sanction if any to be determined by the Board of Nursing at the time of the disposition hearing.
- B. 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).
- C. 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.
- D. The Board shall hear the disposition hearing at their next meeting, scheduled for Monday, June 14, 2010.

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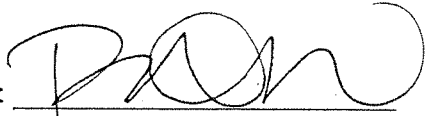


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AGREED TO:

Dated: 5.10.10

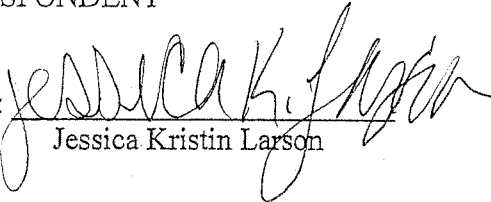
STATE OF VERMONT
SECRETARY OF STATE

By: 

Betsy Ann Wrask
State Prosecuting Attorney

JESSICA KRISTIN LARSON
RESPONDENT

Dated: 5-6-10

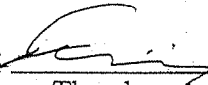
By: 

Jessica Kristin Larson

APPROVED AS TO FORM:

ATTORNEY FOR RESPONDENT

Dated: 5-6-10

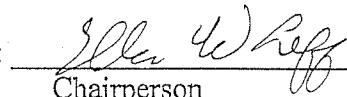
By: 

Theodore A. Parisi, Jr., Esq.

APPROVED AND SO ORDERED:

VERMONT BOARD OF NURSING

Dated: 5-10-10

By: 

Chairperson

Date of Entry: 5/14/10
nu.larson.stip3

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

IN RE:

JESSICA KRISTIN LARSON
License No. 026.0027533

)
)
)

Docket No. 2010-21

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. Jessica Kristin Larson (the "Respondent") of Fair Haven, Vermont is licensed by the State of Vermont as a Registered Nurse under license number 026.0027533. This license was originally issued on or about August 29, 2002 and is currently set to expire on or about March 31, 2011.
4. At all times relevant, Respondent was employed as a Registered Nurse at Rutland Regional Medical Center (the "Facility"), located in Rutland, Vermont.
5. On or about March 23, 2010 in an interview with State Investigator Steve Kennedy, Respondent advised that in the week prior, she had been placed on administrative leave from the Facility for diverting narcotics. Respondent admitted that she had diverted Percocet from the Facility and had thereafter obtained treatment at the Brattleboro Retreat.
6. On or about March 30, 2010 in an interview with Investigator Kennedy, Facility Director of Human Resources D.T. stated that pursuant to an OmniCell (computerized drug dispensing system) high user report regarding Respondent, the Facility conducted an internal investigation which revealed that there were approximately thirty-two (32) discrepancies in Respondent's removal of narcotics from OmniCell and her documentation of administration of these narcotics. D.T. stated that on or about February 18, 2010 in a meeting among D.T., Respondent, and Director of Surgical Care S.R., the Respondent denied diverting any drugs from the

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Facility. However, D.T. advised that on or about February 19, 2010 in a second meeting among D.T., Respondent, and Director of Surgical Care S.R., the Respondent admitted to taking regulated drugs from the Facility without authorization.

7. A review of the discrepancies found by the Facility are enumerated in part below:

- a. On or about January 1, 2010 at 12:54 p.m., Respondent withdrew from the OmniCell one (1) Oxycodone/Acetaminophen ("Percocet") tablet for Patient C.E. Respondent did not document administering this narcotic to C.E. in the Medication Administration Record (the "MAR"). C.E. was discharged from the Facility at 1:00 on this date.
- b. On or about January 1, 2010 at 1:22 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient S.W. Respondent only documented administering one (1) Percocet tablet to S.W. in the MAR.
- c. On or about January 10, 2010 at 8:07 a.m., Respondent withdrew from the OmniCell one (1) Percocet tablet for Patient R.M. Respondent did not document administering this narcotic to R.M. in the MAR.
- d. On or about January 10, 2010 at 9:57 a.m., Respondent withdrew from the OmniCell one (1) Percocet tablet for Patient R.M. Respondent did not document administering this narcotic to R.M. in the MAR.
- e. On or about January 13, 2010 at 8:14 a.m., Respondent withdrew from the OmniCell one (1) Percocet tablet for Patient C.B. Respondent did not document administering this narcotic to C.B. in the MAR.
- f. On or about January 13, 2010 at 11:09 a.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient M.R. Respondent only documented administering one (1) Percocet tablet to M.R. at 11:10 a.m. in the MAR.
- g. On or about January 13, 2010 at 12:03 p.m., Respondent withdrew from the OmniCell two (2) Oxycodone 5mg tablets for Patient A.J. Respondent did not document administering these tablets to A.J. in the MAR. A.J. was discharged from the Facility at 12:15 p.m. on this date.
- h. On or about January 13, 2010 at 4:37 p.m., Respondent withdrew from the OmniCell one (1) Percocet tablet for Patient C.B. Respondent did not document administering this narcotic to C.B. in the MAR. C.B. was discharged from the Facility at 4:42 p.m. on this date.
- i. On or about January 13, 2010 at 6:21 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient M.R. Respondent did not document administering these tablets to M.R. in the MAR. M.R. was discharged from the Facility at 6:31 p.m. on this date.

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- j. On or about January 14, 2010, Respondent was not assigned to Patient E.C. On this date at 1:07 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient E.C. Respondent did not document administering these tablets to E.C. in the MAR. E.C. was discharged from the Facility on this date at 1:22 p.m.
- k. On or about January 14, 2010, Respondent was not assigned to Patient E.R. On this date at 1:07 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for E.R. Respondent did not document administering these tablets to E.R. in the MAR. E.R. was discharged from the Facility on this date at 1:10 p.m.
- l. On or about January 14, 2010 at 2:48 p.m., Respondent withdrew from the OmniCell one (1) Percocet tablet for Patient Y.M. in two (2) separate transactions, for a total of two (2) Percocet tablets being withdrawn. Respondent only documented in the MAR that she administered one (1) tablet to Y.M. at 2:50 p.m. on this date.
- m. On or about January 19, 2010 at 10:36 a.m., Respondent withdrew from the OmniCell two (2) Hydrocodone/APAP 5/500 mg (Vicodin) tablets for Patient A.P. Respondent documented an administration of this narcotic to A.P. at 10:40 a.m. in the MAR, but did not specify the amount of narcotic administered.
- n. On or about January 19, 2010 at 5:22 p.m., Respondent withdrew from the OmniCell two (2) Hydrocodone/APAP 5/500 mg (Vicodin) tablets for Patient A.P. Respondent documented in the MAR that she administered these two (2) tablets to A.P. at 5:20 p.m. on this date; however, A.P. was discharged from the Facility at 5:28 p.m. on this date.
- o. On or about January 19, 2010 at 5:31 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient H.G. Respondent only documented in the MAR that she administered one (1) tablet to H.G. at 5:35 p.m. on this date.
- p. On or about January 21, 2010 at 10:04 a.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient A.V. Respondent only documented in the MAR that she administered one (1) tablet to A.V. at 10:10 a.m. on this date.
- q. On or about January 21, 2010 at 10:05 a.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient S.R. Respondent only documented in the MAR that she administered one (1) tablet to S.R. at 10:10 a.m. on this date.
- r. On or about January 21, 2010 at 1:48 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient A.V. Respondent only documented in the MAR that she administered one (1) tablet to A.V. at 1:50 p.m. on this date.

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- s. On or about January 21, 2010, Respondent documented in the MAR that she administered one (1) Percocet tablet to Patient A.V. at 3:30 p.m. on this date. However, there is no corresponding OmniCell withdrawal for this documented administration.
- t. On or about January 21, 2010 at 3:55 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient S.R. Respondent only documented in the MAR that she administered one (1) tablet to S.R. at 4:00 p.m. on this date.
- u. On or about January 23, 2010 at 9:06 a.m., Respondent withdrew from the OmniCell one (1) Percocet tablet for Patient S.R. Respondent did not document administering this narcotic to S.R. in the MAR.
- v. On or about January 26, 2010 at 8:01 a.m., Respondent withdrew from the OmniCell one (1) Percocet tablet for Patient W.B. Respondent did not document administering this narcotic to W.B. in the MAR.
- w. On or about January 26, 2010, Respondent was not assigned to Patient J.R. On this date at 9:47 a.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for J.R. Respondent only documented in the MAR that she administered one (1) tablet to J.R. at 9:50 a.m. on this date.
- x. On or about January 26, 2010 at 2:12 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient W.B. Respondent only documented in the MAR that she administered one (1) tablet to W.B. at 2:15 p.m. on this date.
- y. On or about January 26, 2010 at 6:51 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient W.B. Respondent only documented in the MAR that she administered one (1) tablet to W.B. at 6:55 p.m. on this date.
- z. On or about January 29, 2010 at 8:33 a.m., Respondent withdrew from the OmniCell one (1) Percocet tablet for Patient W.B. Respondent did not document administering this narcotic to W.B. in the MAR.
- aa. On or about January 29, 2010 at 2:33 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient W.B. Respondent only documented in the MAR that she administered one (1) tablet to W.B. at 2:40 p.m. on this date.
- bb. On or about January 29, 2010 at 5:28 p.m., Respondent withdrew from the OmniCell two (2) Hydromorphone (Dilaudid) 2 mg tablets for Patient S.W. Respondent did not document administering these tablets to S.W. in the MAR. Moreover, S.W. was discharged from the Facility at 5:40 p.m. on this date.
- cc. On or about January 29, 2010 at 5:48 p.m., Respondent withdrew from the OmniCell two (2) Percocet tablets for Patient C.C. Respondent documented in

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the MAR an administration of this narcotic to C.C. at 5:50 p.m. on this date, but did not specify the amount of narcotic administered.

dd. On or about February 6, 2010 at 9:02 a.m., Respondent withdrew from the OmniCell one (1) Morphine injectable 4mg/1ml syringe for Patient J.M. Respondent documented in the MAR that she administered 2mg Morphine to J.M. at 9:05 a.m. on this date, but did not document wasting the remaining 2mg Morphine.

ee. On or about February 7, 2010 at 3:15 p.m., Patient M.O.'s pain scale was documented as zero. On this date at 4:32 p.m., Respondent withdrew from the OmniCell two (2) Hydromorphone (Dilaudid) 2 mg tablets for Patient M.O. Respondent did not document the administration of these tablets in the MAR. M.O. was discharged from the Facility at 4:40 p.m. on this date.

8. Respondent has been cited to appear in Rutland District Court on or about May 17, 2010 for the offense of Regulated Drug Fraud or Deceit, in violation of 18 V.S.A. § 4223(a)(3) and (c).

Request for Relief

9. The facts as set out above establish that in order to protect the public health, safety, or welfare of the people of the State of Vermont, emergency action is imperative.
10. The above acts and circumstances, alone or in combination, violate:
- a. 26 V.S.A. § 1582(a)(3) (Is unable to practice nursing competently by reason of any cause);
 - b. ARBN Chapter 4, Rule IV(II)(B)(1) and (2) ("Inability to practice nursing competently" includes: (1) performance of unsafe or unacceptable patient care; and (2) failure to conform to the essential standards of acceptable and prevailing practice);
 - c. ARBN Chapter 4, Rule IV(II)(C) ("Any cause" includes, but is not limited to, reasons of physical or mental disability or use of drugs, narcotics, chemicals, or any other type of materials);
 - d. 26 V.S.A. § 1582(a)(5) (Is habitually intemperate or is addicted to the use of habit-forming drugs);
 - e. 26 V.S.A. § 1582(a)(7) (Engages in conduct of a character likely to deceive, defraud, or harm the public) which includes falsifying or altering clinical records or making inaccurate or misleading entries pursuant to ARBN Chapter 4, Rule IV(II)(D)(3); and diverting supplies, equipment, or drugs for personal or other unauthorized use pursuant to ARBN Chapter 4, Rule IV(II)(D)(4);

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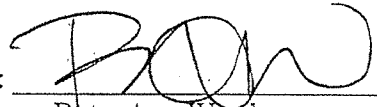
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- f. 3 V.S.A. § 129a(a)(7) (Willfully making or filing false reports or records in the practice of the profession; willfully impeding or obstructing the proper making or filing of reports or records or willfully failing to file the proper reports or records);
- g. 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); and
- h. 3 V.S.A. § 129a(a)(3) (Failing to comply with provisions of federal or state statutes or rules governing the practice of the profession).

WHEREFORE, the State of Vermont respectfully requests that pursuant to 3 V.S.A. § 814(c), the Respondent's nursing license number 026.0027533 be summarily suspended, pending a hearing on the merits.

DATED at Montpelier, Vermont this 30th day of May, 2010.

STATE OF VERMONT
SECRETARY OF STATE

By: 
Betsy Ann Wrask
State Prosecuting Attorney

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