

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

IN RE:)
Jody A. North)
License No. 026.0031001)

Docket No. 2014-497

STIPULATED SURRENDER OF LICENSE

NOW COME the State of Vermont, by and through State Prosecuting Attorney Elizabeth A. Jarvis, and the Respondent, Jody A. North, 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. Chapter 28; the Administrative Rules of the Board of Nursing (the "ARBN"); and the Rules of the Office of Professional Regulation.

Stipulated Facts

2. Jody A. North (the "Respondent") of South Windham, Maine is licensed by the State of Vermont as a Registered Nurse ("RN") under license number 026.0031001. This license was originally issued on or about April 21, 2005, and expired on or about March 31, 2015. This license is currently inactive.
3. During the relevant time period, Respondent was employed as a Registered Nurse through Meridian Medical Staffing at North Country Hospital (the "Facility") in Newport, Vermont. The Respondent was employed as a traveling nurse at the Facility, beginning on July 7, 2014.
4. Patient A was admitted to the Facility on or about July 17, 2014 for emergency laparoscopic gallbladder removal. She was discharged on or about July 18, 2014.
5. Following surgery, Patient A was prescribed three different pain medications: 1) hydrocodone-acetaminophen (Vicodin) 5-325 mg, 1 tablet every 6 hours as needed; 2) 2 mg intravenous morphine every hour as needed; and 3) oxycodone-acetaminophen (Percocet) 5-325 mg, 2 tablets every four (4) hours as needed. Patient A's medication orders also prohibit exceeding 4000 mg per day of acetaminophen from all sources.

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6. Patient A's medical records indicate she received the following medications while under the Respondent's care:
 - a. On or about July 17, 2014, the Respondent charted the administration of one dose of morphine in the patient's records at or about 7:13 p.m.
 - b. On or about July 17, 2014, the Respondent charted the administration of one dose of Vicodin in the patient's records at 7:18 p.m.
 - c. On or about July 17, 2014, the Respondent charted the administration of one dose of Vicodin in the patient's records at 8:08 p.m.
 - d. On or about July 17, 2014, the Respondent charted the administration of one dose of morphine in the patient's records at or about 8:08 p.m.
 - e. On or about July 17, 2014, the Respondent charted the administration of one dose of morphine in the patient's records at or about 8:49 p.m.
 - f. On or about July 17, 2014, the Respondent charted the administration of one dose of morphine in the patient's records at or about 10:09 p.m.
 - g. On or about July 17, 2014, the Respondent charted the administration of one dose of Percocet in the patient's records at or about 10:33 a.m.
 - h. On or about July 18, 2014, the Respondent charted the administration of one dose of morphine in the patient's records at or about 2:16 a.m.
 - i. On or about July 18, 2014, the Respondent charted the administration of one dose of Percocet in the patient's records at or about 2:16 a.m.
 - j. On or about July 18, 2014, the Respondent charted the administration of one dose of morphine in the patient's records at or about 5:49 a.m.
 - k. On or about July 18, 2014, the Respondent charted the administration of one dose of Percocet in the patient's records at or about 5:49 a.m.

7. Records indicate that the Respondent withdrew each of the above medications from an Omnicell medication dispensing machine at or about times that would correspond with the above medication administrations.
8. Several of the medications administered under paragraph 6 above were administered sooner than Patient A's medication orders would require.
9. Despite Patient A's medication order not to exceed 4000 mg of acetaminophen in a twenty-four (24) hour period, the Respondent administered 2600mg of acetaminophen in less than twelve (12) hours.

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10. Frequent dosing of the above medications by both intravenous and oral routes increases the risk to a patient because the different drugs and routes of administration have different times of onset and peak effectiveness. The essential standards of acceptable and prevailing practice require RNs to use their own independent judgment when assessing the safety of administering medications to patients.
11. Based on the frequency with which the Respondent administered the above medications, the essential standards of acceptable and prevailing practice would require an RN to monitor the patient's vitals frequently, as the above amount of medications could impact vital signs, levels of consciousness, and breathing. The Respondent charted Patient A's respiratory rate once, at or about 7:27 p.m. on or about July 17, 2014. The Respondent did not chart any other vital signs nor make any other notations regarding Patient A's level of consciousness.
12. It is not expected that a patient who underwent laparoscopic surgery would require the above amount of pain medication. The essential standards of acceptable and prevailing practice require an RN administering the above amount of pain medication to report the patient's need for such medication to a physician. The Respondent did not document any conversations with Patient A's physician regarding Patient A's need for high levels of pain medication.

Violations

13. 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)(3) (Failing to comply with provisions of federal or state statutes or rules governing the practice of the profession);
 - 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); and

Understandings

14. This Stipulation is neither an admission of liability by the Respondent nor a concession by the State of Vermont that its charges are not well founded. To avoid delay, uncertainty, inconvenience, and expense of protracted litigation, the parties reach a full and final Stipulation pursuant to these Understandings and the Acceptance of Surrender and Order below.

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15. Respondent understands that the Nursing Board must review and accept the terms of the Stipulated Surrender of License. If the Board rejects any portion, the entire Stipulated Surrender of License shall be null and void.
16. 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.
17. Respondent has read and reviewed this entire document and agrees that it contains the entire agreement between the parties.
18. Respondent is not under the influence of any drugs or alcohol at the time she signs this Stipulated Surrender of License.
19. Respondent voluntarily enters into this agreement after the opportunity to consult with legal counsel and is not being coerced by anyone into signing this Stipulated Surrender of License.
20. Respondent voluntarily waives her right to a contested hearing before the Board of Nursing and waives any right to appeal from this Stipulated Surrender of License.
21. Respondent agrees that the Acceptance of Surrender and Order set forth below may be entered by the Board.

ACCEPTANCE OF SURRENDER AND ORDER

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

- A. The Board of Nursing hereby **ACCEPTS** Respondent's **VOLUNTARY SURRENDER** of her nursing license.
- B. Any future application for licensure shall be subject to the licensing requirements of that particular profession. If a future application for licensure in the State of Vermont is approved, that license shall be **CONDITIONED** pursuant to whatever terms are found to be reasonable at the time of Respondent's application for licensure, taking into account the stipulated facts above.
- 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: 4/26/16

STATE OF VERMONT
SECRETARY OF STATE

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

JODY A. NORTH
RESPONDENT

Dated: 4/28/16

By: Jody A. North
Jody A. North

APPROVED AND SO ORDERED:

VERMONT BOARD OF NURSING

Dated: 5/2/16

By: Janine Carr
Chairperson

Date of Entry: 5/2/16

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