Message from the President

Mariya Snell DNP, APRN, FNP-C

I consider my work on the board to be one of privilege and honor. This honor has been broadened by my recent election to President of the Board of Nursing. Having served on the board since 2013 and as Vice-President for the past year, I have learned a tremendous amount on the issues of regulation and practice, largely as a result of the outstanding leadership here on the board. I would like to thank Rhonda Shimmens for her direction as President over these past two years. She has, and continues to be, a valuable member of the board and the healthcare community.

The mission of the Board of Nursing is to protect the public. As part of that, we look to the community for involvement and engagement on issues of concern. As president, I invite you to reach out to the board to discuss concerns that you may have or initiatives that could support the community. You may contact the board via email at nursing@pr.mo.gov.

Authorised by Lori Scheidt, Executive Director

Executive Director Report

Board Elects Officers at their September 2016 Board Meeting

Mariya Snell, DNP, MSN, RN, FNP-BC was elected President. Dr. Snell is the coordinator of the Doctor of Nursing Practice program for Maryville University. In addition to her faculty and administrative role, she practices as a Family Nurse Practitioner for Peoples Health Centers in St. Louis. She holds a doctorate in nursing from St. Louis University, a master’s of science in nursing from Indiana State with a concentration in family practice and a bachelor’s of nursing from Barnes Jewish College of Nursing at Washington University Medical Center. Dr. Snell has extensive experience in research, education and community health. Snell has a passion for working with the underserved and embarked on her nursing career to reach groups that need care the most. She has been on the board since February 2013.

Anne Heyen DNP, MSN, RN, CNE was elected Vice President. Dr. Heyen is an Associate Professor of Nursing at Lincoln University, in Jefferson City. She serves as a test writer for Certified Nurse Educator Exam and National Council of State Boards of Nursing Registered Nurse Exam. Her clinical expertise is in medical surgical and post anesthesia care nursing. Dr. Heyen holds a doctor of nursing practice with an emphasis in nursing leadership from Rush University, Chicago, IL; a master’s in nursing degree from the University of Missouri, Columbia and a bachelor of nursing degree from Avila University, Kansas City. Dr. Heyen serves as a reviewer for peer reviewed journals in her area of expertise. She is passionate about the education of future nurses, having been in undergraduate nursing education for 11 years. Dr. Heyen is deeply committed to nursing students becoming safe practicing nurses by focusing on the critical thinking skills needed in nursing. She was appointed to the Board in 2015.

Alyson Speed, LPN was re-elected as secretary. Ms. Speed is a licensed practical nurse with CoMo Cubs Pediatrics in Columbia. In addition to CoMo Cubs Pediatrics, she has been a preceptor for nursing students in a pediatric setting for the past several years. Ms. Speed earned her Licensed Practical Nursing degree from Columbia Area Career Center, Program of Practical Nursing. She was recently accepted into the nursing program at Columbia College in order to further pursue her love of caring for others. She enjoys working with children and hopes to continue that work after completing RN school. Ms. Speed has served on the Board since January 2014.

2016 Fiscal Year Statistics

The 2016 fiscal year for Missouri State government began July 1, 2015 and ended June 30, 2016. The Board reviews complaints that are filed against the license of a nurse. Following an investigation, the Board determines whether or not to pursue discipline. The Board may impose censure, probation, suspension, and/or revocation.

The Board of Nursing may take disciplinary action against a licensee for violation of the Nursing Practice Act (see 335.066, RSMo). The Board is authorized to impose any of the following disciplines singularly or in combination:

- Censure—least restrictive discipline. The imposition of censure acts as a public reprimand that is permanently kept in the licensee’s file.
- Probation—places terms and conditions on the licensee’s license.
- Suspension—requires that the licensee cease practicing nursing for a period not to exceed 3 years.
- Revocation—most restrictive discipline. The imposition mandates that the licensee immediately loses his/her license and may no longer practice nursing in Missouri.

The following charts show the category and source of complaint and application reviews that were closed this past fiscal year. There were 2405 Board decisions that were closed this past fiscal year. There were 2405 Board decisions that were closed this past fiscal year.

Executive Director continued on page 3
The VA St Louis Health Care System is recruiting for an OR Nurse Manager, OR Nurse, and OR Educator

The Nursing Newsletter is published quarterly by the Missouri State Board of Nursing of the Division of Professional Registration of the Department of Insurance, Financial Institutions & Professional Registration. Providers offering educational programs advertised in the Newsletter should be contacted directly and not the Missouri State Board of Nursing.

Advertising is not solicited nor endorsed by the Missouri State Board of Nursing.

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nursingALD.com

Truman State University is accepting applications for the following position:

Assistant Professor of Nursing (Tenure-Eligible)

For information on this or other positions, visit http://truman.edu/academic-affairs/Truman State University 100 E. Normal Kirkville, MO 63501

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Important Telephone Numbers

| Department of Health & Senior Services (nurse aide verifications and general questions) | 573-526-5686 |
| Missouri State Association for Licensed Practical Nurses (MsALPN) | 573-636-5659 |
| Missouri Nurses Association (MONA) | 573-636-4623 |
| Missouri League for Nursing (MLCN) | 573-635-5335 |
| Missouri Hospital Association (MHA) | 573-893-3700 |

Number of Nurses Currently Licensed in the State of Missouri

As of October 3, 2016

<table>
<thead>
<tr>
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<tbody>
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Licenses Issued in Fiscal Year 2016

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<th></th>
<th>Registered Nurse</th>
<th>Licensed Practical Nurse</th>
</tr>
</thead>
<tbody>
<tr>
<td>Licensure by Examination (includes nurses not educated in Missouri)</td>
<td>4,461</td>
<td>1,302</td>
</tr>
<tr>
<td>Licensure by Endorsement</td>
<td>2,036</td>
<td>272</td>
</tr>
<tr>
<td>Licensure by Renewal of a Lapsed or Inactive License</td>
<td>1,337</td>
<td>301</td>
</tr>
<tr>
<td>Number of Nurses holding a current nursing license in Missouri as of 6/30/2016</td>
<td>105,014</td>
<td>25,478</td>
</tr>
</tbody>
</table>

There were 1,099 new Advanced Practice Registered Nurse applications approved in fiscal year 2016. The Board granted 222 nurses advanced prescriptive authority in fiscal year 2016. There are currently 1,339 Advanced Practice Registered Nurses with controlled substance prescriptive authority.
Executive Director Report

Executive Director continued from page 3

Age Distribution

The board continues to keep a close eye on the age distribution of nurses as many are at or near retirement.

Licensed Practical Nurses Age Distribution

- 60 to 70 Age Range: 3321 (22%)
- 50 to 60 Age Range: 7043 (33%)
- 40 to 50 Age Range: 3230 (23%)
- 30 to 40 Age Range: 1207 (13%)
- Under 30: 2814 (13%)
- 30% Are Over Age 55

Registered Nurse Age Distribution

- 60 to 70 Age Range: 11,104 (11%)
- 50 to 60 Age Range: 12,500 (12%)
- 40 to 50 Age Range: 22,412 (20%)
- 30 to 40 Age Range: 22,472 (22%)
- Over 55 Years of Age: 30220 (22%)

The following three maps depict the average age by county and the number of nurses in each county who had a current Missouri nursing license and Missouri primary address as of July 1, 2016. The average age on the following maps is the average age of nurses that reported Missouri primary residence.

Evelyn’s House

Evelyn’s House will offer warm and comfortable surroundings where guests and their families will receive compassionate and specialized end of life care.

For more information about open positions, please contact Christine Kaiser by phone at 314-933-1611, email at christine.kaiser@bjc.org, or visit bjchospice.org/evelynshouse.

Opening May 2017.

Situated on the campus of Barnes-Jewish West County Hospital, Evelyn’s House will have many guest and family-friendly amenities and comforts including:

- 16 private guest suites for adults, teens and children
- Walkout patio off of every suite
- Family gathering spaces with overnight accommodations
- Family kitchen and café
- Dedicated music and expressive therapy rooms
- Meditation room and garden

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As part of the process for Missouri pre-licensure nursing programs to maintain approval by the Missouri State Board of Nursing, such programs are required to complete an annual program report. While requirements have been required to report their program statistics on an annual basis for many years, processes have changed over time. With the beginning of calendar year 2015 annual reporting, all approved Missouri pre-licensure nursing programs are now required to report their annual data by the first day of June of the following year. Data collection is streamlined and reporting of data is facilitated.

While 2015 annual report data is currently under compilation and will be available very soon, 2014 annual reporting data reveals the following:

For 2014, 104 nursing programs provided vital information on the current state of pre-licensure nursing education in Missouri. In 2014, 24 bachelor degree programs, one diploma program, 36 associate degree programs and 43 practical nursing programs reported their data.

Throughout the year 2014, 5277 students were reported to have graduated from the four levels of pre-licensure nursing education. Of that number, 2458 (46.3%) were diploma graduates; 2180 (41.3%) were associate degree graduates; and 639 (12.4%) were bachelor degree graduates. The majority of the BSN-prepared nurse educators are reported to have achieved a master’s degree, 17% of current full-time nurse educators are planning to retire by 2019. With nearly 1/5 of the nurse educators nearing retirement, the importance of quality faculty mentoring is reinforced for both the new to education/teaching, and the “new to the position” (administrators/promotions) members of nurse education.

Not only is retirement an issue affecting enrollment and faculty numbers, unfilled faculty positions are also quite significant. Of the 967 full-time faculty positions in pre-licensure programs, 5% are reported as unfilled (918 filled, plus 5%). Data suggests that 231 more full-time faculty members in addition to the unfilled positions would be needed to accept all qualified applicants, should other constraints to program expansion and growth be resolved. Shortage of clinical placements, especially opportunities for student assignments to clinical preceptors continues to be a major barrier to program expansions.

The choice of a lawyer is an important decision and should not be based solely on advertisements. The choice of a lawyer is an important decision and should not be based solely on advertisements. The choice of a lawyer is an important decision and should not be based solely on advertisements.

As the demand for nurses continues to grow, the demand for nurse educators also grows. As the reader can see, there are a large number of applicants that nursing programs are unable to accept due to a variety of barriers, with limitations in faculty and clinical resources at the programs that utilize observational experiences. Up to 80% of programs, depending on educational program level, reported difficulty in obtaining one or both of these specialties. In addition, 17% of programs report shortages in placement opportunities in mental health nursing settings.

Overall Needed Clinical Sites

<table>
<thead>
<tr>
<th>all levels of pre-licensure</th>
<th>Maternal-Newborn</th>
<th>Nursing of Children</th>
<th>Mental Health</th>
<th>Adult Health</th>
<th>Complex Care</th>
<th>Community</th>
<th>Geriatrics</th>
</tr>
</thead>
<tbody>
<tr>
<td>1%</td>
<td>5%</td>
<td>35%</td>
<td>17%</td>
<td>35%</td>
<td>7%</td>
<td>6%</td>
<td>1%</td>
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As I’m writing this, it’s early September, football season is just getting started, we’re about 60 days from the election (thank God it’s almost over) and, most importantly, school is back in session. It’s been a few years since I’ve been a student. Even so, I always get excited at back to school time. My inner nerd reveals itself!

About five years ago, I had the opportunity to speak at a high school near St. Louis. Afterward I became Facebook friends with one of the students, Kelsay. Kelsay has gone on to become a student nurse at my alma mater, Missouri State. Here’s a story from one of her recent Social Media posts, in her own words:

The most kind and caring thing happened to me yesterday! When I went grocery shopping last night, this extremely generous woman bought my groceries!!! I stared at her while she swiped her card and she said, “I’m a nurse, I know how hard going to school is.” I never imagined getting support from a complete stranger! I was so shocked! I couldn’t believe it. I just kept thanking her for the kind deed she did for me. She really helped me out, I can’t get over that it happened. I can’t wait to be able to do this for a college student one day! I don’t even know her name, but thank you to the woman that bought my groceries you are such an incredibly generous person!

Now get this…this nurse philanthropist did not even know Kelsay is a student nurse. Kelsay was wearing a Missouri State shirt and talking to a friend about having to adjust her budget, but nothing about her studying nursing. This nurse philanthropist simply saw a young college student struggling financially… and she did what nurses do: provide compassion and help for those who are suffering.

I find generosity to be one of the most valuable human traits. Don’t you? I also find that, almost without fail, nurses are, at their core, quite generous. Nurses are generous mainly of themselves. By that, I mean they give of themselves. They open themselves to the suffering of other human beings, spend long hours providing care in a professional role and, many times, go home and provide more caregiving without financial compensation. Just opening oneself to the pain of other human beings, being a witness to suffering, acknowledging AND then jumping in head first to provide compassionate care is truly one of the most generous things we human beings can do. And nurses… it’s not only your profession – it’s simply who you are. Your kindness extends beyond the patient to encapsulate all of humanity…and people like me (and Kelsay) are grateful.
Disciplinary Actions**

Pursuant to Section 335.066.2, RSMo, the Board “may cause a complaint to be filed with the Administrative Hearing Commission as provided by chapter 621, RSMo, against any holder of any certificate of registration or authority, permit, or license required by sections 335.011 to 335.096 or any person who has failed to renew or has surrendered his certificate of registration or authority, permit or license” for violation of Chapter 335, the Nursing Practice Act.

**Please be advised that more than one licensee may have the same name. Therefore, in order to verify a licensee’s identity, please check the license number. Every discipline case is different. Each case is considered separately by the Board. Every case contains factors, too numerous to list here, that can positively or negatively affect the outcome of the case. The brief facts listed here are for information only. The results in any one case should not be viewed as Board policy and do not bind the Board in future cases.

The Board of Nursing is requesting contact from the following individuals:

- **Jamey Biggs** – RN 2003024481
  - Hillbros, MO
  - Censure 06/15/2016 from June 1, 2014, to September 9, 2015.
  - Licensee practiced nursing in Missouri without a license

- **Beth Hunciker** – RN 2015009423
  - Springfield, MO
  - Censure 06/01/2016
  - Licensee admitted to kissing the inmate multiple times, investigator about her relationship with the inmate.
  - Licensee was questioned by the correctional facility in physical contact. On or about December 4, 2014, investigator that he and Licensee had kissed and engaged in intimate physical contact. On or about December 4, 2014, Licensee was questioned by the correctional facility investigator about her relationship with the inmate. Licensee admitted to kissing the inmate multiple times, but denied additional physical contact. Additionally, the inmate and Licensee exchanged multiple written letters of an intimate nature.
  - Censure 07/25/2016

- **Christopher, Felisa Jeanette**
  - Troy, MO
  - Licensed Practical Nurse 2010003718
  - Censure 07/18/2016 from May 1, 2015, to May 10, 2016.
  - Licensee practiced nursing in Missouri without a license

- **Johnsen, James L**
  - Registered Nurse 151880
  - Censure 07/12/2016 from May 1, 2015, to May 16, 2016.
  - Licensee practiced nursing in Missouri without a license

- **Airington, Christy Dawn**
  - Chilhowee, MO
  - Registered Practical Nurse 2010031594
  - Kansas City, MO
  - Censure 07/18/2016
  - Respondent failed to call in to NTS on three (3) days that were not excused. The blood sample Respondent provided on February 22, 2016, tested positive for PHE. Respondent admitted to drinking alcohol on Valentine’s Day.
  - Censure 07/02/2016

- **Whitaker, Michelle M**
  - Warrenton, MO
  - Registered Nurse 116708
  - Springfield, MO
  - Censure 08/10/2016 from May 1, 2015, to May 10, 2016.
  - Respondent was required to submit a chemical dependency evaluation to the Board within eight weeks of the effective date of the agreement and follow any recommendations of the evaluator. The chemical dependency evaluation submitted on Respondent’s behalf on December 8, 2015, stated that Respondent needed to attend four individual counseling sessions over the following four weeks. Because further treatment was recommended, Respondent was required to submit updated evaluations from the evaluator for proof of treatment on a quarterly basis to show that she was complying with the evaluator’s recommendations. The Board denied Licensee’s application for licensure due to failing to disclose the DWI guilty pleas and failing to respond to contact from the Arkansas Board or cooperate with its investigation. On December 10, 2014, the Kansas Board of Nursing suspended Licensee’s Kansas nursing license with a stay, provided Licensee complete specific requirements of the Board.
  - Censure 08/10/2016

- **Riney, Marsha B**
  - Palmyra, MO
  - Registered Nurse 088286
  - Springfield, MO
  - Censure 09/01/2016 from May 1, 2015, to May 10, 2016.
  - Licensee practiced nursing in Missouri without a license

- **Miller, Hannah M**
  - Troy, MO
  - Registered Nurse 120775
  - Censure 08/10/2016

- **Wills, Julie Mae**
  - Hillsbros, MO
  - Licensed Practical Nurse 2010003194
  - Hillsbros, MO
  - Censure 06/15/2016
  - Licensee practiced nursing in Missouri without a license

- **Christy Airington**
  - Registered Nurse 2007001235
  - Kansas City, MO
  - Censure 07/12/2016
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- **McAlester Regional Health Center**
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  - Contact Tiffany Roberts at 918-421-6491 or email resume to mhrcrecruiter@mhrkcom.com

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Cape Girardeau, MO  
Licensed Practical Nurse 2001008595  
On August 5, 2015, a correctional center investigator discovered that Licensee had been engaging in telephone conversations with Offender SG. When questioned, Licensee denied exchanging telephone calls with Offender SG. Licensee also acknowledged to the Board investigator that her communications with Offender SG had been romantic in nature.  
Censure 08/19/2016

O’Bryan, Alex Wayne  
Joplin, MO  
Registered Nurse 2007001109  
On January 23, 2015, after Licensee worked a full night shift discrepancies were noted between what was pulled from the Pyxis and what was administered by him to patients. Licensee documented removing 3 Percocet for patient WB on January 23, 2015, but only documented administering 1 Percocet to WB. The other 2 Percocet were not shown as administered or wasted. On the same day and for the same patient, he again removed 3 Percocet, documented administering all 3 at 2007, but the physician order for WB was only for one Percocet every hour. He also removed another 1 Percocet on the same day and for the same patient at 2056, but did not document administering it. Licensee documented removing three (3) 5 mg tablets of Oxycodone for patient SW on January 23, 2015 at 2123, and wasted 2 of them, but did not document administering or wasting the other Oxycodone. He also documented a return on that same day for that same patient at 2121, 1 mg of Percocet back to the Pyxis, but there was no record of licensee ever removing Percocet for SW on that shift prior to that return. Licensee admitted that when giving the morning report at the hospital on January 24, 2015, he was “disorganized during report.”  
Censure 08/19/2016

Kendrick, Jimmie W  
Columbia, MO  
Licensed Practical Nurse 2000165224  
On April 9, 2012, Respondent reported to a collection site to provide a sample and the sample tested positive for Ethyl Sulfate, another metabolite of alcohol. Respondent denied drinking alcohol, but reported to Dr. Greg Elam that he had been cleaning a lawn mower and had blown the previous weekend and had possibly inhaled some ethanol vapors from the gasoline. On February 5, 2016, Respondent reported to a collection site to provide a sample and the sample tested positive for Ethyl Glucuronide (EtG), a metabolite of alcohol, and Ethyl Sulfate (EtS), another metabolite of alcohol.  
Censure 07/25/2016

Freeman, Clarice E  
Lincoln, NE  
Registered Nurse 114928  
On or about May 27, 2015, Licensee failed to issue prescriptions to two (2) patients upon discharge; one (1) prescription for infection prevention and one (1) prescription for pain. Licensee failed to notify hospital management or the patients’ physicians of her error. Licensee attempted to reach the patients by phone for two (2) days, and ultimately mailed the prescriptions to the patients on the third day. On June 4, 2015, Licensee contacted the patient via telephone and asked her to complete a new patient nurse visit in the chart and eNatal record. Licensee contacted the patient via telephone and asked her to complete a new patient nurse visit in the chart and eNatal record. Licensee contacted the patient via telephone and asked her to complete a new patient nurse visit in the chart and eNatal record. Licensee contacted the patient via telephone and asked her to complete a new patient nurse visit in the chart and eNatal record.  
Censure 07/26/2016

Buster, Rachel Leann  
Hannibal, MO  
Registered Nurse 2014026588  
On March 20, 2015 at approximately 4:30 a.m., Inmate BS was admitted to the center’s TCU where Licensee was the nurse on duty. Inmate BS had been previously assessed and interviewed by another nurse, LPN Tate. Inmate BS’s complaints at the time were back and shoulder pain. Licensee interviewed Inmate BS, and then performed a physical exam which showed some difficulty raising his right arm, Inmate BS advised Licensee that she did not have any new symptoms. Based on her interview and physical exam of this inmate, Licensee did not assess any new symptoms or change in condition that had not already been brought to the attention of the medical personnel at the prison’s infirmary in the days leading to March 20, 2015. A corrections officer called Licensee back to the inmate’s cell at approximately 5:20 a.m. advising Licensee that the inmate did not look well. Licensee immediately went to the inmate’s cell and found him to be unresponsive with no heart or lung sounds. She also noted he had a very gray cast to his skin, and that his lips were deep blue in color. Licensee assessed the patient to be long expired at this point, and determined that resuscitation would be inhumane. Therefore, Licensee did not initiate CPR on Inmate BS. Inmate BS was pronounced dead by the on-call physician at 5:35 a.m. on March 20, 2015.  
Censure 08/23/2016

Pipes, Kayla Diann  
Sparta, MO  
Licensed Practical Nurse 2015040231  
From March 17, 2015 through January 28, 2016, Respondent failed to call in to NTS on three days. Further, on October 5, 2015; October 23, 2015; November 9, 2015; December 4, 2015; and, December 21, 2015, Respondent called NTS and was advised that she had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample on each of those dates. On September 29, 2015, Respondent submitted a sample for testing; however, the test was cancelled due to Respondent forgoing the chain of custody for the sample. On October 19, 2015, Respondent informed Board staff that she had relapsed and was entering an inpatient rehabilitation facility. Respondent relapsed by using heroin in the middle of September 2015. The Board did not receive an updated chemical dependency evaluation submitted on Respondent’s behalf by the probation officer dated November 10, 2015.  
Probation 07/06/2016 to 07/06/2021

Conwell, Patricia J  
Ozark, MO  
Registered Nurse 089329  
On March 16, 2015, Licensee pled guilty to the class C felony of Possession of a Controlled Substance Except 35 Grams or Less of Marijuana in violation of §195.202 RSMo, as well as two (2) counts of the class A misdemeanor of Unlawful Use of Drug Paraphernalia in violation of §195.233 RSMo, in the Circuit Court of Bates County, Missouri, in case number 14BS-CR00665-01. Licensee admitted to abusing methamphetamine, marihuana and alcohol. She last used methamphetamine and/or marijuana on March 4, 2015 and last consumed alcohol in January 2015. Licensee stated on her renewal application that she is receiving treatment and attends regular support group meetings.  
Probation 06/07/2016 to 06/07/2021

Braymer, Donna J  
Laclede, MO  
Registered Nurse 133601  
On June 26, 2015, Licensee documented a new patient nurse visit in the chart and eNatal record. Licensee contacted the patient via telephone and asked her to complete a new patient nurse visit in the chart as if she had performed an in-office patient visit. Licensee did not physically assess the patient in person. Licensee’s record entry constituted falsely documenting her findings.  
Probation 07/25/2016 to 07/25/2021

Heupper, Kelly Jaquith  
San Diego, CA  
Registered Nurse 2013030816  
On July 16, 2015, it was discovered that the tops of six vials of Fentanyl from the vials and replacing it with saline. Licensee was instructed to take time off and seek treatment. Administrators changed the lock codes so that Licensee could not enter the buildings and access narcotics. Licensee attended outpatient treatment during the week of July 28 to 30, 2015. Licensee was scheduled to be admitted to an inpatient treatment facility. On July 28, 2015, Licensee contacted a nurse asking for the code to access the building. At approximately 7:33 a.m. on July 30, 2015, registered nurse asked Licensee if she was ready to be admitted to the inpatient facility. Licensee admitted to accessing the building. At approximately 7:33 a.m. on July 30, 2015, registered nurse asked Licensee if she was ready to be admitted to the inpatient facility. Licensee admitted to accessing the building. At approximately 7:33 a.m. on July 30, 2015, registered nurse asked Licensee if she was ready to be admitted to the inpatient facility. Licensee admitted to accessing the building. At approximately 7:33 a.m. on July 30, 2015, registered nurse asked Licensee if she was ready to be admitted to the inpatient facility. Licensee admitted to accessing the building. At approximately 7:33 a.m. on July 30, 2015, registered nurse asked Licensee if she was ready to be admitted to the inpatient facility. Licensee admitted to accessing the building. At approximately 7:33 a.m. on July 30, 2015, registered nurse asked Licensee if she was ready to be admitted to the inpatient facility. Licensee admitted to accessing the building. At approximately 7:33 a.m. on July 30, 2015, registered nurse asked Licensee if she was ready to be admitted to the inpatient facility. 
Probation continued on page 10
On or about May 18, 2016, Licensee learned her license had expired in May 2012. Licensee practiced nursing in Missouri without a license from June 1, 2012, through May 18, 2016.

Probation 08/24/2016 to 08/24/2017

On or about August 29, 2015, Licensee’s co-worker found Licensee asleep in an empty patient room while on duty. When hospital Human Resources reviewed camera video, Licensee was seen entering the empty patient room with a blanket at approximately 00:40 and was not seen again until the co-worker woke her up at approximately 02:00.

Count II

On January 3, 2016, while verifying Licensee’s license for the Board’s investigator that she had started diverting medication in late August or early September 2014.

Probation 07/27/2016 to 07/27/2017

Ashbrook, Erin Dalle
Cameron, MO
Registered Nurse 2000162015

On June 10, 2015, Respondent pled guilty to the class D misdemeanor of DWI - Combined Alcohol/Drug Intoxication.

Probation 07/25/2016 to 07/25/2019

Posey, Erica Dawn
Jackson, MO
Registered Nurse 2006018359

Licenses of Fentanyl were found to be missing. Licensee admitted that Licensee was admitted to a drug/alcohol treatment program on September 30, 2011, and discharged on October 13, 2011. In the Discharge Summary, Licensee was diagnosed with 304.20 Amphetamine Dependence and 304.20 Cocaine Dependence. The discharge summary reflected a sixteen year history of cocaine abuse and a fifteen year history of methamphetamine abuse.

Probation 08/24/2016 to 08/24/2021

Rudolph, Tiffany Anne
Eldon, MO
Registered Nurse 2007026275

On October 6, 2014, Respondent pled guilty to the crime of theft/stealing, in violation of §570.030 RSMo, in the Circuit Court of Camden County, Missouri, in case number 14CM-CR01322. On May 6, 2015, Respondent admitted that she violated the terms of her pre-trial probation by committing the offense of theft/stealing, in violation of §570.030 RSMo, in the Circuit Court of Camden County, Missouri, in case number 14CM-CR01322.

Probation 07/19/2016 to 07/19/2019

Bowman, Russell S
Independence, MO
Registered Nurse 120634

On November 17, 2015; December 16, 2015; January 12, 2016; and February 2, 2016, Respondent called NTS and was advised that he had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample on the six (6) days.

Probation 07/25/2016 to 07/25/2019

Brewer, Sarah Joanna
Independence, MO
Registered Nurse 2014017945

The Missouri State Board of Nursing received information from the Illinois State Board of Nursing that the nursing license of Respondent was voluntarily surrendered in Illinois due to a final disciplinary action being taken by the Illinois State Board of Nursing in an Order dated April 23, 2015. In the Order, the Illinois Board of Nursing alleged that in July 2014, Respondent diverted controlled substances.

Probation 07/25/2016 to 08/21/2016

Benfield, Marilyn Rose
Bonne Terre, MO
Registered Nurse 2000158988

On April 26, 2015, it was discovered that a 21.5 ml jar of Demerol was missing from the Missouri State Board of Nursing November, December 2016, January 2017 10

On April 26, 2015, it was discovered that a 21.5 ml jar of DWI - Combined Alcohol/Drug Intoxication. When Licensee was questioned, Licensee denied any knowledge of the missing medication. Licensee underwent aftercare through a church program and reports her date of sobriety is August 13, 2016, but also reported that the last used drugs and alcohol on August 13, 2011.

Probation 08/24/2016 to 08/24/2021

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Visit www.fitzgibbon.org to view a list of complete openings.

On April 26, 2015, it was discovered that a 21.5 ml jar of Demerol was missing from the Missouri State Board of Nursing November, December 2016, January 2017 10
administrators interviewed and drug tested all employees. It was determined that licensee failed to lock the narcotics box in the medication room. It was also determined that licensee propped open the door to the medication room during the timeframe where the morphine went missing. On or about April 27, 2015, licensee’s drug screen came back positive for marijuana.

Prohibition 07/13/2016 to 07/13/2019

Wilson, Rebecca Lynn
Enfield, WI
Registered Nurse 2005010089

On March 17, 2016, the Nevada State Board of Nursing and Respondent entered into an Agreement for Prohibition due to Respondent testing positive for alcohol while on duty at a hospital. In the Agreement, Respondent’s Nevada nursing license was placed on probation for two (2) years under specified terms and conditions. The Agreement became effective on March 24, 2016. Prohibition 07/25/2016 to 07/25/2018

Gabris, Pamela A
Ballwin, MO
Registered Nurse 062195

Licensee represented herself as being a licensed registered nurse in Missouri when she was not licensed as such from May 1, 2011, through June 7, 2016. Prohibition 08/25/2016 to 08/25/2018

Hiser, Marissa Kay
Springfield, MO
Licensed Practical Nurse 20044007932

On January 30, 2015, Respondent was selected for a random drug screen. On February 8, 2015, Respondent’s drug screen was confirmed positive for amphetamines and methamphetamine.

Prohibition 07/18/2016 to 07/18/2021

Rawlings, Rachelle Nora
Saint Joseph, MO
Licensed Practical Nurse 20083018587

From July 25, 2015, until the filing of the Complaint on April 27, 2016, Respondent failed to call in to NTS on six (6) days. In addition, on September 29, 2015, Respondent reported to a lab and submitted the required sample which showed a low creatinine reading. On February 3, 2016, Respondent reported to a collection site to provide a sample and the sample tested positive for Ethyl Glucuronide (EtG), a metabolite of alcohol.

Prohibition 07/25/2016 to 07/25/2018

Walsh, Charline Arnold
Farmington, MO
Licensed Practical Nurse 038970

In accordance with the terms of the Agreement, Respondent was required to obtain continuing education hours covering the following categories: Righting a Wrong -Ethics and was required to obtain continuing education hours covering the following categories: Righting a Wrong -Ethics and

PROBATION continued...

order for the Dilaudid. Licensee would then take that Dilaudid for his personal use.

Prohibition 08/12/2016 to 08/12/2019

Lines, Julie Michelle
Butler, MO
Licensed Practical Nurse 2007024012

On October 18, 2013, Respondent called a prescription of Norco 7.5mg/325mg quantity of 30 in to a pharmacy, under the orders of Dr. B, purportedly for her husband J. L. The pharmacy technician that received the phone order called the clinic to verify the prescription. Respondent called the pharmacy technician back and told her to cancel or disregard the prescription. On October 23, 2013, Respondent called Pharmacy and ordered a prescription for 30 Norco 7.5mg/325mg to be filled under the orders of R S, Family Nurse Practitioner, purportedly for her husband J. L. The prescription was filled and Respondent picked up the prescription wearing her scrubs and Hospital name tag. Dr. B did not prescribe, authorize or order hydrocodone for J.L. Ms. S did not prescribe, authorize or order hydrocodone for J.L. There was no documentation in J.L.’s chart on October 23, 2013. On October 28, 2013, a review of J.L.’s chart was done. Respondent documented in J.L.’s chart on October 25, 2013, at 7:35S and backdated the entry to October 23, 2013.

Prohibition 07/18/2016 to 07/18/2021

Flowers, Faith E
Auxvasse, MO
Licensed Practical Nurse 0511092

On July 24, 2015, Respondent pled guilty to the class C felony of Theft/Slaugthing (Value of Property or Services is $500 or More but Less than $25,000).

Prohibition 07/18/2016 to 07/18/2018

Neville, William Brian
Joplin, MO
Registered Nurse 2012006435

On or about February 16, 2015, the hospital pharmacy ran an audit report showing irregularities in Licensee’s narcotic administration from January 5, 2015, through February 16, 2015. The following irregularities were discovered:

a. On January 5, 2015. Licensee withdrew 2 mg of hydromorphone for patient DB at 3:36 PM. Licensee wasted the 2 mg of hydromorphone at 3:42 PM. Licensee had no reason to withdraw the hydromorphone at 3:36 PM.

b. On January 8, 2015. Licensee withdrew 10 mg of morphine for patient MS. Licensee MS did not have an order for morphine. Licensee did not document the morphine administration, waste or return of the morphine.

c. On January 8, 2015. Licensee withdrew 10 mg of morphine for patient TT. Licensee did not document administration, waste or return of the morphine.

d. On January 15, 2015. Licensee withdrew 2 mg of hydromorphone for patient SM at 12:11 PM. Licensee...
PROBATION continued from page 11

Missouri State Board of Nursing

November, December 2016, January 2017

PROBATION continued...

wasted 2 mg of hydromorphone at 12:43 PM. Licensee had no reason to withdraw the hydromorphone at 12:11 PM.
e. On January 16, 2015, Licensee withdrew 10 mg of morphine for patient H at 11:47 AM. Licensee wasted 5 mg of morphine immediately after withdrawing it, and wasted the remaining 5 mg at 12:14 AM. Licensee had no reason to withdraw the morphine at 11:47 AM.
f. On January 16, 2015, Licensee withdrew 2 mg of hydromorphone for patient EP at 10:32 AM. Licensee wasted 1.5 mg of hydromorphone immediately after withdrawing it, and wasted the remaining 0.5 mg at 10:36 AM. Patient EP had received the dose of hydromorphone at 10:22 AM, so there was no reason for Licensee to withdraw the hydromorphone at 10:36 AM.
g. On January 19, 2015, Licensee withdrew 2 mg of morphine for patient ML at 4:33 PM. Licensee wasted 1.5 mg of morphine immediately after withdrawing it, and wasted 0.5 mg at 4:30 PM. Licensee had no reason to withdraw the morphine at 4:33 PM.
h. On January 24, 2015, Licensee withdrew 2 mg of hydromorphone for patient SB at 10:01 AM. Licensee wasted 1.5 mg of hydromorphone immediately after withdrawing it, and wasted 0.5 mg at 10:10 AM. Licensee had no reason to withdraw the hydromorphone at 10:01 AM.
i. On January 24, 2015, Licensee withdrew 100 mg of fentanyl for patient RC at 7:25 AM. Licensee immediately wasted 50 mg, and wasted the remaining 50 mg of fentanyl at 7:41 AM. The fentanyl had already been administered by nurse JD at 7:09 AM, and there was no need for Licensee to withdraw fentanyl at 7:25 AM.
j. On January 24, 2015, Licensee withdrew 10 mg of morphine for patient RC at 8:17 AM. Patient RC was discharged at 8:17 AM. Licensee wasted 10 mg of morphine immediately after withdrawing it, and wasted the remaining 10 mg at 8:17 AM. Licensee had no reason for Licensee to withdraw morphine at 8:17 AM.
k. On January 25, 2015, Licensee withdrew 2 mg of hydromorphone for patient MP at 5:00 PM. There was no reason for Licensee to withdraw the hydromorphone at 4:27 PM.
l. On January 27, 2015, patient MP had a one-time order for 4 mg of morphine. Licensee withdrew 10 mg of morphine at 10:07 AM, immediately wasted 6 mg, and administered the remaining 4 mg at 1:37 PM with no order. At 2:26 PM, Licensee wasted 10 mg of morphine with no order, immediately wasted 6 mg, and wasted 4 mg at 2:47 PM.
m. On February 2, 2015, Licensee withdrew 10 mg of morphine for patient MP at 9:01 AM. Licensee failed to document administration, waste or return of the 10 mg of morphine. Patient MP was discharged at 9:02 AM.

Registered Nurse

Smith Burns, Daniela
Clarksville, TN
Registered Nurse 2002009076
On November 1, 2010, Respondent was assigned to care for a patient admitted in labor with a 21-week gestation. The patient delivered the fetus on November 1, 2010 at 05:12, and the fetus died at 05:44 on that date. Respondent failed to refer to the hospital policy for handling fetal demise or discuss how to handle the issue with her charge nurse or other nurses working that shift. Respondent did not begin to complete the fetal loss paperwork and did not fill out any information for the demise. Respondent did not document the time of birth of the fetus, and did not...
document the extreme measures taken to try and save the life of the fetus or that the fetus was wrapped in warm blankets and handed to the parents. Respondent failed to follow the policy for using the abbreviation "BS" in patients’ records, leading to inaccurate records. She used BS for “bedside” when the hospital uses BS for breath sounds or bowel sounds. On January 14, 2016, Respondent did not document a newborn assessment in the charts of several of her patients. On February 17, 2011, during the night shift, Respondent brought a Vicoloin tablet - a controlled substance - to a patient’s room at 20:45 and left it at the bedside without checking patient identifiers or watching the patient ingest the medication. Respondent returned to the patient’s room at 22:30 and asked the patient if she had ingested the medication. The patient stated she had ingested the Vicodin at 20:45. Respondent told the patient she should not have done so until 22:30 even though she had delivered the Vicodin almost two hours earlier. Respondent documented in the patient’s chart that the patient ingested the medication at 22:30 when she knew the patient had done so at 20:45. The same patient asked that her baby be brought to her room following delivery. Respondent brought the baby to the room without verifying, pursuant to hospital protocol, that it was the correct baby for that patient. Respondent did not use the Hugs and Kisses tags that were placed on both the mother and baby to match the sound of the two tags to make sure the correct mother and baby were together. The baby was not the patient’s baby. The patient noticed it was not her baby and called Respondent back into the room to remove the infant and bring her the correct baby. Respondent did not initiate an incident report or chart the event.

**REVOKED continued...**

Cailotto, Britt L

Steilville, MO

Registered Nurse 133592

On September 2, 2014, nursing home officials selected Respondent and other night shift employees to take a random urine drug screen. The nursing home received Respondent's sample for testing at Respondent's place of employment. Since January 1, 2016, Respondent submitted all of her samples for testing at Respondent's place of employment. On June 24, 2015; August 7, 2015; and December 10, 2015, Respondent reported to lab and submitted the required sample which showed a low creatinine reading. The Board did not receive an employer evaluation or statement of unemployment by the quarterly due date of January 18, 2016. Revoked 07/25/2016

Decker, Cyndel Lee

Ballwin, MO

Registered Practical Nurse 2009008984

On February 13, 2014, Respondent received a written counseling due to her failing to document patient vital signs and failing to complete patient assessments on multiple dates, and for documenting the incorrect information on multiple dates. On December 3, 2014, Respondent was suspended from the agency for one (1) month and placed on probation for ninety (90) days due to her administering an ordered dose of Topamax twice to her patient and for throwing away a patient’s property without permission. On December 16, 2014, Respondent spanked a patient and spoke disrespectfully to the patient’s parent. Revoked 07/25/2016

Schall, Cynthia L

Highland, IL

Registered Nurse 1446753

On March 10, 2015, Respondent stipulated, in a Consent Order from the Illinois Board of Nursing, that her nursing license in the state of Illinois was subject to discipline because she tested positive for alprazolam metabolites, a benzodiazepine and cocaine. Revoked 07/25/2016

Wirtz, Travis Michael

Kansas City, MO

Registered Nurse 2008007483

Respondent failed to call in to NTS on thirty-one (31) days. On January 18, 2016, and January 22, 2016, Respondent called NTS and was advised that he had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample. Furthermore, on February 2, 2016, February 24, 2016, and March 16, 2016, Respondent failed to call NTS; however, these were days that Respondent had been selected to submit a sample for testing. Therefore, Respondent failed to report to a collection site to provide a sample for testing. On three (3) separate occasions, June 24, 2015; August 7, 2015; and December 10, 2015, Respondent reported to lab and submitted the required sample which showed a low creatinine reading. The Board did not receive an employer evaluation or statement of unemployment by the quarterly due date of January 18, 2016. Revoked 07/25/2016

Williams, Donna F

St. Louis, MO

Licensed Practical Nurse 031576

The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of April 8, 2016. As of April 28, 2016, the Board had not received an application to renew Respondent’s nursing license. Revoked 07/25/2016

Watkins, LaQuita Michelle

Columbia, MO

Licensed Practical Nurse 2015035766

The Board did not receive a continuing chemical dependency treatment update submitted on Respondent’s behalf by the documentation due date of April 5, 2016. The Board did not receive evidence of a group attendance by the documentation due date of April 5, 2016. On March 21, 2016, Respondent submitted a urine sample for random drug screening. That sample tested positive for marijuana. On March 21, 2016, Respondent submitted a urine sample to NTS for random drug screening. That sample tested positive for marijuana. On January 18, 2016, and January 22, 2016, Respondent failed to report to a collection site to provide a sample for testing. Respondent reported to a collection site to provide a sample for testing on three (3) separate occasions, June 24, 2015; August 7, 2015; and December 10, 2015, Respondent reported to lab and submitted the required sample which showed a low creatinine reading. The Board did not receive an employer evaluation or statement of unemployment by the quarterly due date of January 18, 2016. Revoked 07/25/2016

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**REVOKED continued...**

Safford, Trisha A

Centralia, MO

Licensed Practical Nurse 2007370775

Respondent was sent a certified mail to attend a meeting with the Board’s representative on April 28, 2015. Respondent did not attend the meeting or contact the Board to reschedule the meeting. In accordance with the terms of the Order, Respondent was required to undergo a mental health evaluation and follow any recommendations made by the evaluator. Respondent underwent a chemical dependency evaluation, which was reviewed and accepted by the Board as meeting the mental health evaluation requirement on September 21, 2015. The evaluator recommended that Respondent attend weekly outpatient individual counseling. Pursuant to the Order and the evaluator’s recommendation, Respondent was required to submit quarterly updated mental health evaluations showing progress in compliance with the evaluator’s recommendations. The Board did not receive an updated mental health evaluation submitted on Respondent’s behalf by the quarterly due dates of June 4, 2015; October 9, 2015; January 11, 2016; or April 11, 2016. Respondent was required to obtain continuing education hours the Board had not received proof of any completed hours. Revoked 07/19/2016

Davis, Candace N

St. Robert, MO

Licensed Practical Nurse 2011010056

Respondent failed to call in to NTS on sixty-one (61) days. On January 18, 2016, and January 22, 2016, Respondent called NTS and was advised that she had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample. In addition, on March 9, 2016; March 31, 2016; and April 6, 2016, Respondent failed to call NTS; however, these were days that Respondent had been selected to submit a sample for testing. Therefore, Respondent failed to report to a collection site to provide a sample for testing. On three (3) separate occasions, March 9, 2016; March 31, 2016; and April 6, 2016, Respondent called NTS and was advised that she had been selected to provide a urine sample for screening. Respondent reported to a collection site and provided a sample for screening. The sample which Respondent provided had a creatinine reading of less than 2.0. When Respondent first contracted with NTS, she was instructed to provide samples for drug and alcohol testing at Respondent's collection sites or with an approved courier. Since January 1, 2016, Respondent submitted all of her samples for testing at Respondent’s place of employment. Respondent’s urine samples were purportedly signed as collected by a person not approved to collect samples for drug and alcohol testing for NTS. Additionally, that person has not been present at the place of employment since February 7, 2016, and her employment was terminated on February 22, 2016. The Board did not receive an
employer evaluation or statement of unemployment by the documentation due date of May 6, 2016. Revoked 07/18/2016

Cotton, Tammy Lynne
Saint Louis, MO
Licensed Practical Nurse 058462

Respondent failed to call in to NTS on seven (7) days. Further, on October 19, 2015 and December 23, 2015, Respondent called NTS and was advised that she had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample. As part of the terms of her disciplinary period, Respondent was required to completely abtain from the use or consumption of alcohol in any form regardless of whether treatment was recommended. On April 11, 2016, Respondent reported to a collection site to provide a sample and the sample tested positive for Ethyl Glucuronide (EtG), a metabolite of alcohol, and Ethyl Sulfate, a metabolite of alcohol. Respondent admitted that she drank a wine cooler on April 9, 2016, when she learned she had failed the Registered Nurse NCLEX. Revoked 07/19/2016

Russell, Brianna L
Saint Louis, MO
Licensed Practical Nurse 2005000647

From July 23, 2015 through March 23, 2016, Respondent failed to call in to NTS on two hundred and forty-five (245) consecutive days. Respondent failed to report to a collection site to provide a sample for testing on sixteen (16) days. The Board did not receive an employer evaluation or statement of unemployment by the documentation due dates of October 16, 2015 and January 18, 2016. Revoked 07/19/2016

O’Reilly, Margaret Linda
Ringwood, MO
Registered Nurse 2013030189

On December 21, 2015, the Colorado State Board of Nursing issued a Final Decision and Order in which Respondent was terminated due to unaccounted for narcotics and discrepancies in documentation. Revoked 06/27/2016

Rudisill, Carla Denise
Sikeston, MO
Licensed Practical Nurse 2012026665

On December 9, 2014, a packet of Norco that was meant to be wasted was reported missing. Respondent was asked to take a drug screen because she was the last person with custody of the Norco packet. Respondent signed a statement indicating that she refused to submit to the drug test because she believed that she would test positive for Marijuana and Dilaudid, which she had previously consumed. She also admitted that she had taken the packet of Norco in question. Respondent was placed on the Employee Disqualification List by the Missouri Department of Health and Senior Services. Revoked 07/19/2016

Elledge, Aimee M
Saint Joseph, MO
Licensed Practical Nurse 057110

From October 20, 2014 through April 27, 2016, Respondent called NTS and was advised that she had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample. Pursuant to the Agreement, Respondent was required to undergo a mental health evaluation and if treatment was recommended, follow those recommendations and submit proof of compliance. Respondent underwent a mental health evaluation on November 15, 2016 and January 11, 2017. Mr. B recommended further treatment to include outpatient psychotherapy for at least one year and continue attending co-dependency group on a weekly basis. Quarterly reports submitted from Respondent’s therapist indicate that Respondent was a no-show and missed one session for the quarterly due date of June 30, 2015; Respondent missed one session with no reason given for missing the session for the quarterly due date of September 30, 2015; and Respondent missed two sessions with no reasons given for missing either session for the quarterly due date of December 30, 2015. Respondent failed to comply with the recommendations of the mental health professional. Revoked 06/27/2016

Paulie, Richard Joseph
Parsons, KS
Registered Nurse 2011039048

On January 26, 2016, the Kansas State Board of Nursing, through a Default Order, denied reinstatement of Respondent’s Kansas nursing license. Revoked 06/27/2016

Spellman, Shalana Roxie
Saginaw, MI
Licensed Practical Nurse 2013023669

The Missouri State Board of Nursing received information from the Arkansas State Board of Nursing via the NURSYS website that the nursing license of Respondent was suspended pending completion of disciplinary requirements of the Michigan State Board of Nursing in a Final Order dated December 6, 2013. Revoked 07/19/2016

Moore, Ericka Renee
Saint Louis, MO
Licensed Practical Nurse 2010024993

The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of October 12, 2015, or January 11, 2016. The Board did not receive proof of any completed continuing education hours by the October 12, 2015 documentation due date. Revoked 06/27/2016

Sowalewski, Katherine M
House Springs, MO
Registered Nurse 2005014038

On April 1, 2016, Respondent reported to a collection site to provide a sample and the sample tested positive for Ethyl Glucuronide (EtG), a metabolite of alcohol, and Ethyl Sulfate (EtS), another metabolite of alcohol. Respondent admitted to Dr. Greg Elam that she had consumed two (2) beers the day before the test. Revoked 07/19/2016
On June 2, 2013, Respondent was providing care for patient T.K. and the following medication error was discovered:

- Respondent withdrew one syringe of 1 mg/1 ml of hydromorphone for patient T.K. at 6:06 p.m. and documented the administration of the 0.5 mg of hydromorphone from the vial.

On June 2, 2013, Respondent was providing care for patient T.K. and the following medication error was discovered:

- Respondent withdrew one syringe of 1 mg/1 ml of hydromorphone for patient T.K. at 11:32 a.m. for a total of 14 mg of morphine withdrawn. Patient T.K. had orders for between 2 to 10 mg of morphine to be administered. Only 8 mg of morphine were documented as administered to patient T.K. Respondent failed to chart the administration, waste, or return of the remaining 5 mg of morphine from the vial.

On June 16, 2013, Respondent was providing care for patient T.J. and the following medication error was discovered:

- Patient T.J. had orders for 0.5 mg of lorazepam entered at 3:39 a.m. Respondent withdrew one syringe of 1 mg/ml of lorazepam for patient T.J. at 3:41 a.m. and documented the administration of 0.5 mg of hydromorphone from the vial.

Respondent demonstrated inconsistent practice related to medication administration and waste. Accurate documentation related to medication administration is an essential function of being a nurse as poor documentation can jeopardize patient health and safety.

SUSPENSION

Urban, Randi Michele

Kash-Norton, John

Registered Nurse 2008016911

Respondent was employed by a hospital from April 1, 2013, until her termination on January 10, 2014. On December 10, 2013, Respondent was assisting nurse A.R. with an intubation in one of the trauma rooms. This trauma room had a Rapid Sequence Intubation kit (“kit”) in it, which contained Propofol, Rocuronium, Succinylcholine and Etomidate that were packaged and ready to be used. Nurse A.R. and Respondent administered the Succinylcholine and Etomidate to the patient and wasted the remaining medication that was not administered. The patient was receiving a Propofol drip and was sedated; thus, the vials of Propofol and Rocuronium remaining in the kit were not administered to the patient. Respondent left the trauma room with the unused and unopened vials of Propofol and Rocuronium. Upon leaving the patient’s room, Respondent told M.M., the charge nurse, that she really needed to use the restroom. Respondent was in the restroom approximately twenty (20) minutes and another nurse reported to nurse M.M. that she believed Respondent may have passed out.

Nurse M.M. took Respondent’s blood pressure which was adequate and informed Respondent that she needed to call the house supervisor and inform her of the episode. Respondent reported that she had a vasovagal episode in the restroom. Respondent was later observed to have blood running down her arm while sitting at the ER desk. The blood was pointed out to Respondent, she then was observed to get up and walk towards a bathroom, which was located a distance away instead of raising her sleeve to look at her arm or using the restroom located nearby. Later, while seated at the ER desk, Respondent started to exhibit seizure like activity and lowered herself to the floor. Respondent’s arms and legs were observed to be contracting up and she was unable to respond. After approximately 2-3 minutes, Respondent was able to respond verbally and stated that she could hear everything the entire time she was seizing, which is inconsistent with someone having a seizure. Respondent was taken to an ER room and a hospital gown was put on her. Nurse M.B. noticed that Respondent would not straighten her left arm. Respondent informed M.B. that she could not straighten her arm. When Respondent’s arm was eventually straightened, nurse M.B. observed that Respondent had bruising in the AC area and a mark that looked like a puncture wound. Blood and urine were taken from Respondent at that time and submitted for testing. Respondent tested positive for Fentanyl and Propofol. Respondent admitted to the Board investigator that she had injected herself with Propofol in the bathroom.

SUSPENSION continued...
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Missouri State Board of Nursing
November, December 2016, January 2017

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We are happy to announce that Golden Certificates were recently sent to 226 Registered Nurses and 33 Licensed Practical Nurses. These individuals have been licensed in the State of Missouri for 50 years. We take great pride in marking this special achievement in the tenth year of our Golden Award recognition program. A list of those receiving Golden Certificates follows.

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LPN Anna I Beckham Joplin MO
LPN Yvonne T Wilson Lees Summit MO
LPN Carmen McKenzie-Roberts St Louis MO
LPN Janet R Lang Dixon MO
LPN Vernetta A Melton Ste Genevieve MO
LPN Karen B Gaedike Moscow Mills MO
LPN Norma J Grissin Madison MO
LPN Dimple Joy Lockwood Willard MO
LPN Brenda J Smith Paris MO
LPN Janet H Booth Humansville MO
LPN Marcia S Martin Fairfax MO
LPN Betty L Lawrence Saint Joseph MO
LPN Patricia S Brady Country Club MO
LPN Ruth M Clerkley Kansas City MO
LPN Ruby L Johnson Rock Hill MO
LPN Margaret R Stark St Louis MO
LPN M Timothea Jansen, S Paris MO
LPN Cheryl K Roush Plattsburg MO
LPN Mary A Heuer Centralia MO
LPN Rebecca D Steinmann Monroe City MO
LPN Mary A Hughes Glenview IL
LPN Lorraine J Ohallaron Frontenac MO
LPN Mary E Barylski Saint Louis MO
LPN Margaret M Corrigan Saint Louis MO
LPN Ruth A Holzum Saint Charles MO
LPN Judith M Jeglijewski Ballwin MO
LPN Christian J Gohl Shrewsbury MO
LPN Georgia A Zimmerman Saint Louis MO
LPN Patricia A Johnston Lee's Summit MO
LPN Barbara A Horn Arnold MO
LPN Linda K Beerman St Charles MO
LPN Janet A Kreutz Kirkwood MO
LPN Dianne J Epile St Louis MO
LPN Sandra S Megrath Eldon MO
LPN Janice I Morton Hazelwood MO
LPN Patricia M Law Kansas City MO
LPN Mary A Stillman Lake Saint Louis MO
LPN Christiana A Zimmerman Frontenac MO
LPN Mary V Polite Frontenac MO
LPN Patricia D Goehl Shrewsbury MO
LPN Judith M Jeglijewski Ballwin MO
LPN Alphonse W Wilson Hannibal MO
LPN Ruth A Holzum Saint Charles MO
LPN Margaret M Corrigan Saint Louis MO
LPN Janet M Evans St Louis MO
LPN Marguerite A McKeever Chesterfield MO
LPN Sharon L Payne Chesterfield MO
LPN Mary E Barylski Saint Louis MO
LPN Marjorie H Clarke Saint Louis MO
LPN Maryunn T Rice Saint Louis MO
LPN Lorraine J Othallar Chesterfield MO
LPN Mary A Hughes Glendale MO
LPN Joyce A Pulps Kansas City MO
LPN Martha D Staker Kansas City MO
LPN Margaret B Merjavy Chesterfield MO
LPN Linda M Daguritskas St Louis MO
LPN Martha V Roseney Owensville MO
LPN Elizabeth Griesel Nixa MO
LPN Jacqueline T Carton Cape Girardeau MO
LPN Marva M Dee Osage Beach MO
LPN Deana M Franklin Joplin MO
LPN Mary K Soucy Ivis UT
LPN Lucille J Mcnair Clarkson Valley MO
LPN Helen H Saunders Weatherby MO
LPN Carole V Surber Raytown MO
LPN Sharon J Kendall O Fallon MO
LPN Josephine G Olsen Kansas City MO
LPN Marilyn L Liddle Weaton IL
LPN Sharon V Schmitz Nixa MO
LPN Betty M Sass St Peters MO
LPN Marcella E Schildhauer Maryland Heights MO
LPN Sandra Rose Shannon Eureka MO
LPN Ruth M Cott Shell Knob MO
LPN Susan A Andrews Eldon MO
LPN Mary A Gibson Saint Louis MO
LPN Carolyn M Pick Clearwater MO
LPN Connie D Wiegner Saint Charles MO
LPN Patricia A Heldt Hermann MO
LPN Patricia A Johnston Lee's Summit MO
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LPN Christiana A Zimmer...
## 2016 Golden Awards continued from page 17

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<td>RN Nancy M Bryant</td>
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Voluntary Surrender continued from page 15

Voluntary Surrender 07/11/2016

Bargiel, Andrea M
Granite City, IL
Registered Nurse 099955
Licensee was employed by a hospital in St. Louis, Missouri. Licensee was employed at the hospital in the float pool since 1985. On a proactive diversion report run by the hospital, Respondent was found above the standard deviation for the amount of Oxycodone that had been accessed. When confronted by a hospital official, Respondent admitted to taking controlled substances from the hospital. In 2015, Respondent was employed with an institution. On November 11, 2015, staff with the institution completed an audit of Respondent’s Pyxis pulls due to a report of high use by the Respondent. When the audit was completed with the medication administration documentation over numerous pills were unaccounted for that were attributable to Respondent. The unaccounted for medication included hydrocodone, morphine and oxycodone.
Voluntary Surrender 07/11/2016

Tuttle, Travis Wayne
Portageville, MO
Registered Nurse 2010034494
Voluntary Surrender 06/13/2016

Voigt, Trisha Marie
Nevada, MO
Licensed Practical Nurse 2002028977
On July 11, 2016, Licensee voluntarily surrendered her Missouri license.
Voluntary Surrender 07/11/2016

Brewer, Sarah Joanna
Independence, MO
Licensed Practical Nurse 2014017945
Licensee voluntarily surrendered her Missouri nursing license effective August 22, 2016.
Voluntary Surrender 08/22/2016

Blankenship, Rose M
Lake Ozark, MO
Licensed Practical Nurse 053338
Licensee voluntarily surrendered her Missouri license effective 8/11/2016
Voluntary Surrender 08/11/2016

Director of Nursing
McKnight Place

McKnight Place, an exclusive assisted living community, has an exciting opportunity for a Director of Nursing. If you enjoy building relationships with residents and families, and have good clinical skills, we would like to speak with you. McKnight Place Assisted Living has a beautiful, innovative team environment, excellent working conditions with low Resident-Staff Ratios. We offer great benefits which includes competitive pay, PTO, *Uniform Allowance  *Perfect Attendance Bonus  *Referral Bonuses  *Shift differentials for 3-11 and 11-7  *Vision, Health & Dental Insurance  *401K  *Located in the heart of the Central West End. Bernard Care Center  | Contact Dellneice Ringo, dringo@BernardCarellc.com 4335 West Pine Blvd. St. Louis, MO 63108  | 314-371-0200 or Apply Within (Pool)  Part-time Nursing Faculty

Mackinon, Kristin
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• helps eligible providers with EMR/EHR systems receive incentive payments;
• ensures patients are properly immunized;
• provides secure access for health care providers to patient immunization records (currently 41.6 million) throughout the state;
• reduces staff time spent obtaining immunization records; and
• simplifies vaccine ordering for the Vaccines for Children program providers.

For more information visit health.mo.gov/showmevax or contact the Bureau of Immunizations at 877.813.0933 or showmevaxsupport@health.mo.gov