LOUISIANA STATE BOARD OF PRACTICAL NURSE EXAMINERS
3421 NORTH CAUSEWAY BOULEVARD, SUITE 505
METAIRIE, LOUISIANA 70002-3715
(504) 838-5791
FAX (504) 838-5279
www.lsbpne.com

In the matter of: **Sherri Logan**
6675 Highway 90 East Lot 40
Lake Charles, LA 70615

License #920182

Date offered: **November 18, 2013**

Date offer expires: **December 18, 2013**

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CONSENT ORDER

The Louisiana State Board of Practical Nurse Examiners does hereby offer this consent order to **Sherri Logan, license #920182** based on the following:

> While employed as a licensed practical nurse with Lake Charles Memorial Hospital the respondent called in unauthorized prescriptions and narcotics. The respondent self-reported an addiction to opiates.

Based on the evidence submitted, the board has concluded that **Ms. Logan** is in violation of the following provisions of Louisiana Revised Statutes, Title 37, Chapter 11. Nurses, Part II. Practical Nurses, **Section 969 A. 4. (c) is unfit, or incompetent by reason of negligence habit, or other causes; (d) is habitually intemperate or is addicted to the use of habit forming drugs; (f) is guilty of unprofessional conduct; (g) Violated any provision of this part and §978 A. (8). B.**

As further defined in the Louisiana Administrative Code, Title 46, Part XLVII. Nurses, Subpart 1, Practical Nurses, Section 306, T.

3. being unfit, or incompetent by reason of negligence, habit or other causes;
4. being habitually intemperate or addicted to the use of habit-forming drugs;
8. being guilty of unprofessional conduct;
- **a. failure to practice practical nursing in accordance with the standards normally expected;**
- **b. failure to utilize appropriate judgment in administering nursing practice;**
- **g. improper use of drugs, medical supplies, or patients' records;**
- **h. misappropriating personal items of an individual or the agency;**
- **i. falsifying records;**

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q. **using or being under the influence of alcohol, while on duty, and/or while making application for employment, or using or being under the influence of drugs which impair judgment while on duty, or using or being under the influence of illegal drugs whether on or off duty;**

t. **violating any provisions of R.S. 37:961 et seq. (the practical nursing practice act), as amended or aiding or abetting therein.**

In lieu of a formal hearing in the matter, the respondent consents to accept and abide by the following orders of the board:

That the license of the respondent, **Sherri Logan, license #920182** be **suspended for no less than 6 months** with the following stipulations:

1. **Return License to the Board Office:**

   A. Within ten (10) days of the date of this order, the respondent shall return his/her current practical nursing license to the board office.

   B. The respondent shall not practice nursing during the period that the license of the respondent is suspended.

2. **Obey All Laws:**

   A. The respondent shall obey all laws/rules governing the practice of practical nursing in this state and obey all federal, state, and local criminal laws.

   B. The respondent shall report to the board, within ten (10) days, any misdemeanor or felony arrest or conviction.

3. **Notify Board of Change of Address/Telephone Number/Employment:**

   A. The respondent shall notify the board, in writing, within ten (10) days of any change in personal address, telephone number, or employment.

4. **Obtain an Evaluation for Chemical Dependency**

   A. The respondent shall make an appointment to undergo a chemical dependency evaluation. The evaluation shall be conducted by a licensed and certified psychologist/psychiatrist/addictionologist. The evaluation shall be conducted using both objective and subjective assessment tools.

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B. Prior to the evaluation, the respondent shall furnish the evaluator with a copy of the consent order and/or findings of facts, conclusions of law, the board order, and the board order acknowledgement form. The evaluator shall verify receipt and review of these documents in the evaluator's written report of the evaluation of the respondent.

C. The respondent shall execute release of information forms to allow the evaluator to communicate with and supply information to the board.

D. The respondent shall direct the evaluator to submit, directly to the offices of the board, the release of information form, the board order acknowledgement Form, and a report of the evaluation.

E. The report of the evaluation shall include, at minimum:

i. history of chemical use
ii. past and present treatment and/or recovery activities
iii. results of any testing conducted
iv. a summary of the findings
v. treatment plan, if applicable
vi. list of medications prescribed, if applicable
vii. an assessment as to respondent's ability to practice safely as a practical nurse

F. The respondent shall satisfactorily complete any and all recommendations made by the evaluator. If treatment or therapy is recommended, the respondent shall, within thirty (30) days of the evaluator's report, initiate all treatment and/or therapy activities. If treatment or therapy is recommended, the respondent shall submit to the board the name and credentials of the therapists and/or the name and address of the treatment facilities.

G. The respondent shall undergo subsequent evaluations by a board approved psychologist/psychiatrist/addictionologist if requested by the board following a relapse or for other related causes.

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5. **Participate in any and all Treatment/Aftercare Programs as prescribed:**

A. The respondent shall enroll and participate in board approved treatment/aftercare programs as prescribed or recommended by the chemical addiction/mental health evaluator.

B. The respondent shall have the aftercare counselor submit to the board office proof of the respondent's entry into an appropriate facility, inpatient program, outpatient program, halfway house, residential long-term treatment, and/or a combination thereof.

C. The respondent shall execute the release of information forms to allow the treatment facility/center/counselor/practitioner of record to communicate with and supply information to the board.

D. The respondent must submit evidence of **continued compliance with treatment plan/counseling**, if applicable. Treatment/aftercare compliance must be maintained throughout the suspension period.

E. The respondent shall cause the aftercare counselor to submit quarterly to the board office progress reports indicating compliance with treatment recommendations. Reports are due on or before the 10th day of January, April, July, and October of each year until treatment is deemed complete.

F. Upon completion of the treatment/aftercare program(s), the respondent shall also have the aftercare counselor provide the board with documentation indicating the respondent's successful completion of the program.

6. **Select One Primary Pharmacy:**

A. The respondent must notify the board of the name, address, and telephone number of his/her selected pharmacy within ten (10) days of the date of the board order. If the respondent acquires a new pharmacy, written notification must be received within ten (10) days of the first use.

7. **Abstain from Unauthorized Drug Use and Controlled/Abuse Potential Substances**

A. The respondent must abstain at all times from the use of controlled or abuse potential substances and illegal drugs as defined by law, except as prescribed by a licensed practitioner from whom he/she seeks medical attention.

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B. In the event the respondent obtains a prescription from a licensed practitioner for any controlled/abuse potential substance, the **respondent shall submit a copy of the prescription to the board within 48 hours.** The prescription must be for a current condition. The respondent must not arbitrarily take medications prescribed for a past illness or take a prescription that is prescribed for another person. The respondent shall also have his/her prescribing provider notify the board in writing within ten (10) days of the provider's issuance of the prescription. The board at any time may request the practitioner to document the continued need for the prescribed medication(s).

C. If the respondent obtains prescription(s) from more than one prescriber, he/she must inform each physician of any/all medication being prescribed. The prescriber(s) must submit a letter to the board indicating that they are aware that the respondent is being medicated by other providers.

D. The respondent, if enrolled in aftercare, must inform the aftercare counselor of any/all prescriptions, and the aftercare counselor must submit a letter to the board within ten (10) days of the prescription date indicating that they are aware of any/all prescriptions.

The respondent shall NOT consume hemp, poppy seeds, or any product or by-product containing the same.

E. The respondent's licensed practitioner(s) must complete the board's **Medication form** for controlled medication(s)/abuse potential substances, and submit it within **ten (10) days** of the date of the prescription **directly** to the board office. The form must come from the provider to the board office by mail. **It may not pass through the respondent's hands; it may not be sent by facsimile.**

F. The medication form must contain a record of all health care providers treating the respondent along with the condition(s) being treated and prescription(s) ordered for listed condition(s).

G. The prescribing provider must acknowledge in writing and by documenting on the medication form that said provider has knowledge of the respondent's dependency and/or use of controlled or abuse potential substances. The provider must identify the medication, dosage, and the date the medication was prescribed.

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H. No medications from a prescription over six (6) months old should be taken without an updated prescription verification. Using prescribed medication(s) over six (6) months old without an updated verification is grounds for further disciplinary action as stated in this order.

I. If prescription drugs are refilled, the board must also have a letter from the prescribing practitioner attesting to the continued need for the medication(s) and the medicationform must be updated every six (6) months. The form is required to be re-submitted to the board at that time.

Failure to follow these procedures when obtaining a prescription may be grounds for further disciplinary action as stated in this order.

8. **Enroll in a Drug Screening Program:**

A. Within ten (10) days of the date of this order, the respondent shall register with a drug screening firm selected by the board. Drug screens will begin immediately upon registration with the drug screening firm.

B. It is the responsibility of the respondent to ensure that he/she has properly registered with the drug screening firm selected by the board.

C. The respondent shall submit to and pay for random drug and/or alcohol screens. The random testing shall be done at a minimum of once per month but may be required more frequently as requested by the board. The board may at any time request additional testing, including but not limited to, hair and/or blood samples.

D. Occurrence of any of the following conditions constitutes noncompliance with the board order: failure to register with the selected firm within ten (10) days of the date of this order; a positive drug screen; failure to call the testing firm daily; failure to submit a specimen on the date selected for screening; refusal to furnish a specimen; submission of a specimen where the integrity has been compromised, as indicated by the presence of adulterants or submission of a sample that is below acceptable volume or temperature to be tested; failure to follow requested procedure in obtaining a specimen.

E. Drug screen results indicating an abnormal/dilute specimen, or a result indicating a low specific gravity with low creatinine levels will be considered positive and non-compliant with board order and grounds for further disciplinary action as stated in this order.

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F. The respondent must listen to the entire message. Failing to listen to the entire message will be considered non-compliant with this order and grounds for further disciplinary action as stated in this order.

G. Failure to properly fill out or maintain a proper chain of custody form in any way that is not accepted by the drug testing facility will be considered positive and non-compliant with the board order and grounds for further disciplinary action as stated in this order.

H. The respondent shall adhere to all guidelines set forth by the board and the drug screening firm. The drug screening firm will report any/all violations of their guidelines, policies and procedures to the board.

9. **Reinstatement requirements:**

A. All stipulations of the suspension must be successfully fulfilled prior to a request for reinstatement.

B. The respondent is to submit a written request for reinstatement to the board office.

C. If a chemical and/or psychological assessment was stipulated before reinstatement can be considered, the mental health professional who conducted the original assessment must submit a letter to the board office indicating that he/she feels the respondent can safely return to the practice of practical nursing and under what conditions (i.e., recommendations for on going treatment and a list of medications being prescribed). Furthermore, if the assessment included a treatment plan to be completed prior to reinstatement, evidence of compliance with this plan must also be submitted to the board.

Upon favorable review of the reinstatement request, the license of the respondent may then be placed on probation for a minimum period of **two (2) years** with the following stipulations:

1. **License:**

The license of the respondent will be stamped "**PROBATION**".

2. **Fines/Fees:**

The respondent is to submit a $500.00 annual probation monitoring fee, **payable by cashier's check or money order only**

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i. Due within three (3) months of receiving a probated license, and annually thereafter until the probation is satisfactorily completed

ii. Failure to pay this fee in the time allotted will result in the immediate suspension of the respondent's practical nursing license.

3. **Employment:**

A. The respondent must provide a copy of the entire board order/consent order to include the findings of facts and conclusions of law immediately to any/all current employer(s) and at the time of application to any/all prospective employer(s).

i. If the respondent is already employed as an LPN, then the current employer must submit the Employer's Agreement-Letter of Hire to the board office within ten (10) days of the date of the board order/consent order.

ii. Upon obtaining new employment as an LPN, the respondent must have the prospective employer submit the Employer's Agreement-Letter of Hire to the board office within ten (10) days of the date of hire.

B. All current and prospective employers must agree to monitor the respondent while on probation.

C. Probation will run concurrent with employment as an LPN.

D. The respondent must be employed a minimum of 80 hours per month.

E. The respondent shall notify the board, in writing, within ten (10) days of any change in personal address, telephone number, or employment. Changes in employment include accepting a new job, as well as resignation, or termination.

F. The probationary period will not commence or progress until and unless the respondent is employed and delivering direct patient care as a licensed practical nurse.

G. Failure to maintain stable employment may be grounds for termination of probation.

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H. The respondent must practice under the supervision of a nurse (RN or LPN whose license is unencumbered) or physician and must provide direct patient care as follows:

i. The respondent must be supervised on a regular and consistent basis by his/her assigned supervisor. The supervisor must observe and work closely enough with the respondent to be able to give an informed evaluation of the respondent. The employer must be willing to allow this supervision and provide opportunities for the same supervisor to evaluate the performance of the respondent.

ii. It is the respondent's responsibility to ensure that his/her supervisor submits the evaluation reports quarterly.

a. Reports are due on or before the 10th day of January, April, July, and October of each year. (Note: these forms will be provided to the employer by the board)

b. Only the respondent's supervisor may complete the evaluations according to the observations made during the supervision.

I. The respondent is prohibited from working in temporary staffing, as an agency nurse, for a nursing pool and/or in the home health setting, or in any other similar setting including but not limited to working in a teaching capacity, as a travel nurse and/or on an "as needed" basis - PRN.

4. **Notify Board of Change of Address/Telephone Number/Employment:**

A. The respondent shall notify the board, in writing, within ten (10) days of any change in personal address, telephone number, or employment. Changes in employment include accepting a new job, as well as resignation, or termination.

5. **Select One Primary Pharmacy:**

A. The respondent must notify the board of the name, address, and telephone number of his/her selected pharmacy within ten (10) days of the date of the board order. If the respondent acquires a new pharmacy, written notification must be received within ten (10) days of the first use. This is required regardless of whether the respondent is employed in nursing.

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6. **Abstain from Unauthorized Drug Use and Controlled/Abuse Potential Substances**

A. The respondent must abstain at all times from the use of controlled or abuse potential substances and illegal drugs as defined by law, except as prescribed by a licensed practitioner from whom he/she seeks medical attention.

B. In the event the respondent obtains a prescription from a licensed practitioner for any controlled/abuse potential substance, the **respondent shall submit a copy of the prescription to the board within 48 hours.** The prescription must be for a current condition. The respondent must not arbitrarily take medications prescribed for a past illness or take a prescription that is prescribed for another person. The respondent shall also have his/her prescribing provider notify the board in writing within ten days of the provider's issuance of the prescription. The board at any time may request the practitioner to document the continued need for the prescribed medication(s).

C. If the respondent obtains prescription(s) from more than one prescriber, he/she must inform each physician of any/all medication being prescribed. The prescriber(s) must submit a letter to the board indicating that they are aware that the respondent is being medicated by other providers.

D. The respondent, if enrolled in aftercare, must inform the aftercare counselor of any/all prescriptions, and the aftercare counselor must submit a letter to the board within ten (10) days of the prescription date indicating that they are aware of any/all prescriptions.

The respondent shall NOT consume hemp, poppy seeds, or any product or by-product containing the same.

E. The respondent's licensed practitioner(s) must complete the board's**Medication form** for controlled medication(s)/abuse potential substances, and submit it within **ten (10) days** of the date of the prescription **directly** to the board office. The form must come from the provider to the board office by mail. **It may not pass through the respondent's hands; it may not be sent by facsimile.**

F. The medication form must contain a record of all health care providers treating the respondent along with the condition(s) being treated and prescription(s) ordered for listed condition(s).

G. The prescribing provider must acknowledge in writing and by documenting on the controlled medication form that said provider has knowledge of the

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respondent's dependency and/or use of controlled or abuse potential substances. The provider must identify the medication, dosage, and the date the medication was prescribed.

H. No medications from a prescription over six (6) months old should be taken without an updated prescription verification. Using prescribed medication(s) over six (6) months old without an updated verification is grounds for further disciplinary action as stated in this order.

I. If prescription drugs are refilled, the board must also have a letter from the prescribing practitioner attesting to the continued need for the medication(s) and the controlled medication/abuse potential substance form must be updated every six (6) months. The form is required to be re-submitted to the board at that time.

Failure to follow these procedures when obtaining a prescription may be grounds for further disciplinary action as stated in this order.

7. **Enroll in a Drug Screening Program:**

A. If the respondent is not already registered with a drug testing firm, the respondent shall within ten (10) days of the date of this order, register with a drug screening firm selected by the board. Drug screens will begin immediately upon registration with the drug screening firm.

B. It is the responsibility of the respondent to ensure that he/she has properly registered with the drug screening firm selected by the board.

C. The respondent shall submit to and pay for random drug and/or alcohol screens. The random testing shall be done at a minimum of once per month but may be required more frequently as requested by the board. The board may at any time request additional testing, including but not limited to, hair and/or blood samples.

D. Occurrence of any of the following conditions constitutes noncompliance with the board order: failure to register with the selected firm within ten (10) days of the date of this order; a positive drug screen; failure to call the testing firm daily; failure to submit a specimen on the date selected for screening; refusal to furnish a specimen; submission of a specimen where the integrity has been compromised, as indicated by the presence of adulterants or submission of a sample that is below acceptable volume or temperature to be tested; failure to follow requested procedure in obtaining a specimen.

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E. Drug screen results indicating an abnormal/dilute specimen, or a result indicating a low specific gravity with low creatinine levels will be considered positive and non-compliant with board order and grounds for further disciplinary action as stated in this order.

F. The respondent must listen to the entire message. Failing to listen to the entire message will be considered non-compliant with this order and grounds for further disciplinary action as stated in this order.

G. Failure to properly fill out or maintain a proper chain of custody form in any way that is not accepted by the drug testing facility will be considered positive and non-compliant with the board order and grounds for further disciplinary action as stated in this order.

H. The respondent shall adhere to all guidelines set forth by the board and the drug screening firm. The drug screening firm will report any/all violations of their guidelines, policies and procedures to the board.

8. **Participate in any and all Treatment/Aftercare Programs as prescribed:**

A. If the respondent is not already enrolled and participating in a treatment/aftercare program, the respondent shall within ten (10) days of the date of this order, enroll and participate in board approved treatment/aftercare programs as prescribed or recommended by the chemical addiction/mental health evaluator.

B. The respondent shall have the aftercare counselor submit to the board office proof of the respondent's entry into an appropriate facility, inpatient program, outpatient program, halfway house, residential long-term treatment, and/or a combination thereof.

C. The respondent shall execute the release of information forms to allow the treatment facility/center/counselor/practitioner of record to communicate with and supply information to the board.

D. The respondent must submit evidence of **continued compliance with treatment plan/counseling**, if applicable. Treatment/aftercare compliance must be maintained throughout the probation period.

E. The respondent shall cause the aftercare counselor to submit quarterly to the board office progress reports indicating compliance with treatment recommendations. Reports are due on or before the 10th day of January, April

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July, and October of each year until treatment is deemed complete.

F. Upon completion of the treatment/aftercare program(s), the respondent shall also have the aftercare counselor provide the board with documentation indicating the respondent's successful completion of the program.

Furthermore, the respondent is hereby notified and by **signature** _____ acknowledges and agrees that failure to comply with the orders of the board may result in any or all of the following:

Violations

Furthermore, the respondent is hereby notified that failure to comply with any stipulations of this order of the board may result in any or all of the following:

a) immediate suspension of license, b) indefinite suspension of license, c) ineligibility for annual renewal of license, d) additional fines/penalties up to $500.00 per occurrence, e) increased probationary period, f) summary suspension and g) revocation.

FAILURE TO COMPLY WITH ANY SECTION OF THIS ORDER RELATED TO DRUG SCREENS, TREATMENT PLANS, AND/OR REGARDING ABUSE POTENTIAL PRESCRIPTION and/or ILLEGAL DRUGS MAY RESULT IN SUSPENSION OF UP TO A FOUR (4) YEAR PERIOD WITHOUT A HEARING BEFORE THE BOARD. During the period of suspension, if related to substance abuse, appropriate consistent treatment must be obtained, and the respondent must show evidence of two (2) consecutive years of being drug/alcohol free immediately prior to the respondent's initiation of a reinstatement request. If during the two (2) consecutive years of sobriety the respondent relapses, the two (2) consecutive years of sobriety will re-start on the date of the relapse occurrence, provided that the respondent is in treatment.

Public Records

This order is public record. All disciplinary actions of the board will be reported to all required data banks and agencies as required by law.

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CONSENT ORDER ACCEPTANCE

I, **Sherri Logan,** the undersigned respondent, agree that the board has jurisdiction over the matter and specifically waive my right to contest these findings in any subsequent proceedings before the board. I understand that the consent agreement/order shall constitute as public record and is considered disciplinary action by the board. I also understand that this action will be reported as mandated to all state and federal agencies.

I further acknowledge and attest that I have fully cooperated with the Louisiana State Board of Practical Nurse Examiners in resolving this matter and intend to comply with all stipulations of this order.

I voluntarily agree to sign and have witnessed the terms of the order for the purpose of avoiding a formal hearing with the Louisiana State Board of Practical Nurse Examiners.

I do say that I freely, knowingly and voluntarily enter into this order. I understand that I have a right to a hearing in the matter and I freely waive such right. I understand that I have a right to legal counsel prior to entering into the order.

I understand that the order is effective immediately upon signature of the executive director and will become an order of the board. It is understood that the order does not preclude the Board of Practical Nurse Examiners from requiring a formal hearing of my case. I further understand that should the consent order not be accepted by the board, I agree that presentation to and consideration of the consent order, the documenting evidence and information by the board shall not unfairly or illegally prejudice the board or any of its members from participation in hearings or other proceedings pertaining to these or other matters.

I further agree that if at any point during the execution of this order, I violate the stipulations of this order, my license will be suspended. In order for my license to be reinstated, I must demonstrate, to the satisfaction of the board that I pose no danger to the practice of nursing or to the public and that I can safely and competently perform the duties of a practical nurse. The board, in reinstatement my license, will require a period of probation, along with supportive conditions or stipulations as outlined in this order to ensure that patients and the public are protected.

Signature of licensee — Date: 12-12-13

Signature of witness #1 — Date: 12-12-13

Signature of witness #2 — Date: 12/12/13

Louisiana State Board of Practical Nurse Examiners

M Lynn Ansardi R RN 12/17/13

M. LYNN ANSARDI, RN — **Date**
EXECUTIVE DIRECTOR

Sherri Logan