LOUISIANA STATE BOARD OF PRACTICAL NURSE EXAMINERS
131 AIRLINE DRIVE, SUITE 301
METAIRIE, LOUISIANA 70001-6266
(504) 838-5791
FAX (504) 838-5279
www.lsbpne.com

August 24, 2015

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
7015 0920 0001 4574 6128

Ladisa Howell
3211 Hwy 34
Dodson, LA 71422

RE: LICENSE SUSPENSION

Dear Ms. Howell:

Your license to practice as a licensed practical nurse in the State of Louisiana is hereby immediately **suspended for a minimum period of 2 years** for violating your voluntary signed consent agreement/Board Order.

The board received information that you were arrested on or about August 6, 2015 for DWI; therefore, violating stipulations #2 and #8 of your board order. You telephoned the board office on August 21, 2015 and indicated that you were being admitted to Pathways on August 24, 2015 for inpatient treatment.

You participated in an evaluation under the direction of Dr. Trant on July 17, 2015. Dr. Trant recommended that you participate in a directive substance abuse education program and participate in a therapeutic regimen with a qualified mental health professional. To date, the board has not received any documentation indicating that you have completed any recommendations by your evaluator; therefore, violating stipulation #4F of your board order.

Your license is suspended for a minimum period of 2 years and you are hereby fined $500.00 for violating the stipulations of your signed agreement. Please refer to the stipulations and violation section of your signed consent agreement/board order.

You may no longer practice practical nursing in Louisiana as of the date of this letter. You are to immediately return your current practical nursing license to the board office. Failure to return your license and continuing to work while your license is suspended will be reported to the appropriate agencies, including the Attorney General's and Inspector General's office.

The Louisiana State Board of Practical Nurse Examiners (LSBPNE) requires that throughout your suspension you show sobriety, and you are required to continue to submit to and pay for random drug screens through your drug monitoring company. This means that you must call into your drug monitoring company every day.

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The board also requires that you obtain a chemical addiction assessment. Enclosed, please find a Medical Release of Information Form you are to fill out, make a copy, and give the original to your assessor so that he/she can release your assessment and treatment plan to the board office.

At the time of your assessment, you are to also present to the assessor a copy of your original signed consent agreement/board order and a copy of this suspension notice, along with the enclosed Board Order Acknowledgement Form.

Once you have completed your suspension period, you may submit a narrative to the board requesting reinstatement of your license. Reinstatement is not automatic. The board will review your disciplinary file and inform you if you are eligible for reinstatement. Please be advised a reinstatement fee of $150.00 will be assessed. This fee is in addition to any/all other fees previously assessed.

As stated in your consent agreement/board order the following violations apply if you do not comply with the mandated stipulations:

VIOLATIONS

Failure to comply with any and/or all sections of this order may result in any and/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/or g) revocation.

FAILURE TO COMPLY WITH ANY SECTION OF THIS ORDER RELATED TO DRUG SCREENS, TREATMENT PLANS, AND/OR REGARDING PERSONAL SUBSTANCE ABUSE WHETHER PRESCRIPTION DRUGS 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.

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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.

LOUISIANA STATE BOARD OF PRACTICAL NURSE EXAMINERS

M. Lynn Ansardi RN

M. Lynn Ansardi, RN
Executive Director

MLA/kp