BEFORE THE VIRGINIA BOARD OF NURSING

IN RE: **AMANDA M. LESTER, L.P.N.**
License Number: **0002-088135**
Issue Date: **November 14, 2012**
Expiration Date: **March 31, 2019**
Case Number: **175110**

NOTICE OF INFORMAL CONFERENCE AND STATEMENT OF ALLEGATIONS

You are hereby notified that an Informal Conference has been scheduled before the Board of Nursing ("Board") regarding your license to practice practical nursing in the Commonwealth of Virginia.

TYPE OF PROCEEDING:	This is an informal conference before a Special Conference Committee ("Committee") of the Board.
DATE AND TIME:	**June 20, 2017** **2:00 P.M.**
PLACE:	Virginia Department of Health Professions Perimeter Center - 9960 Mayland Drive 2nd Floor - Virginia Conference Center Henrico, Virginia 23233

LEGAL AUTHORITY AND JURISDICTION:

1. This informal conference is being held pursuant to Virginia Code §§ 2.2-4019 and 54.1-2400(10). This proceeding will be convened as a public meeting pursuant to Virginia Code § 2.2-3700.

2. At the conclusion of the proceeding, the Committee is authorized to take any of the following actions:

- Exonerate you;
- Reprimand you;
- Require you to pay a monetary penalty;
- Place you on probation and/or under terms and conditions;
- Refer the matter to the Board of Nursing for a formal administrative hearing; or
- Offer you a consent order for suspension or revocation of your license in lieu of a formal hearing.

ABSENCE OF RESPONDENT AND RESPONDENT'S COUNSEL:

If you fail to appear at the informal conference, the Committee may proceed to hear this matter in your absence and may take any of the actions outlined above.

RESPONDENT'S LEGAL RIGHTS:

You have the right to the information on which the Committee will rely in making its decision, to be represented by counsel at this proceeding, to subpoena witnesses and/or documents, and to present relevant evidence on your behalf.

INFORMAL CONFERENCE MATERIALS:

Enclosed is a copy of the documents that will be distributed to the members of the Committee and will be considered by the Committee when discussing any allegations with you and when deliberating on your case. **These documents are enclosed only with the notice sent by certified mail, which you may be required to claim at the post office. Please bring these documents with you to the informal conference.**

FILING DEADLINES:

Deadline for filing materials: **June 13, 2017.** Submit 5 copies of all documents you want the Board to consider to Sylvia Tamayo-Suijk, Board of Nursing, 9960 Mayland Drive, Suite 300, Henrico, Virginia 23233. Exhibits may not be sent by facsimile or e-mail.

REQUEST FOR A CONTINUANCE

Absent exigent circumstances, such as personal or family illness, a request for a continuance after **June 13, 2017**, will not be considered. If you obtain counsel, you should do so as soon as possible, as a motion for a continuance due to the unavailability of counsel will not be considered unless received by **June 13, 2017.**

STATEMENT OF ALLEGATIONS

The Board alleges that:

1. At all times relevant hereto, Amanda M. Lester, L.P.N., was licensed to practice practical nursing in the Commonwealth of Virginia.

2. Amanda M. Lester, L.P.N., violated Virginia Code § 54.1-3007(2), (5) and (8) and 18 VAC 90-20-300(A)(2)(c) and (e) of the Regulations Governing the Practice of Nursing (currently found at 90-19-230A(2)(c) and (e) effective February 24, 2017), in that between or about July 3, 2016, and July 21, 2016, during the course of her employment with Highland Ridge Rehabilitation Center, Dublin, Virginia, Ms. Lester diverted multiple oxycodone acetaminophen 7.5-325 mg tablets (Percocet, C-II) from Resident A's stock of medications for her personal and unauthorized use, as evidenced by the following:

a. On or about July 3, 2016, at 20:26, Ms. Lester documented administration of one oxycodone tablet to Resident A, but failed to document the resident's level of pain prior to administration in the resident's progress note.

b. On or about July 4, 2016, at 20:38, Ms. Lester falsely documented administration of one tablet of oxycodone to Resident A, after repositioning failed to relieve the resident's pain.

c. On or about July 11, 2016, at 20:19, Ms. Lester falsely documented administration of one tablet of oxycodone to Resident A, at the resident's request for leg pain. Ms. Lester documented in her follow-up note regarding the effectiveness of the medication at 18:15, approximately two hours prior to administration.

d. On or about July 13, 2016, at 18:44, Ms. Lester falsely documented administration of one tablet of oxycodone to Resident A's request, after repositioning failed to relieve the resident's pain.

e. On or about July 16, 2016, at 21:41, Ms. Lester falsely documented administration of one tablet of oxycodone, but failed to document the resident's level of pain.

f. On or about July 17, 2016, at 22:09, Ms. Lester falsely documented administration of one tablet of oxycodone to Resident A, but failed to document the resident's level of pain.

g. On or about July 19, 2016, at 20:16, Ms. Lester falsely documented administration of one tablet of oxycodone to Resident A at the resident's request, who, according to Ms. Lester's documentation in the resident's progress note, expressed a pain level of 6/10.

h. On or about July 20, 2016, at 01:00, Ms. Lester falsely documented administration of one tablet of oxycodone to Resident A, at the resident's request, who, according to Ms. Lester's documentation in the resident's progress note, expressed a pain level of 6/10.

i. On or about July 21, 2016, at 07:00, Ms. Lester documented that she removed one tablet of oxycodone on the Controlled Substance Record for Resident A, but failed to document administration of the medication on the resident's Medication Administration Record.

j. Resident A, who is alert and oriented, denied that she knew that she was prescribed oxycodone and denied that she ever requested the medication, because she did not like the way it made her feel. On or about July 20, 2016, a urine drug screen was performed on Resident A, which returned a negative result for oxycodone.

See Confidential Attachment for the name of the resident referenced above.

RN, MS

Jodi Power, R.N., J.D.
Deputy Executive Director
Virginia Board of Nursing

May 30, 2017
Date