

**BEFORE THE VIRGINIA BOARD OF NURSING**

**IN RE:           KATHERINE LEIGH HYDE, R.N.**  
**License Number:   0001-193852**  
**Case Number:       170010**

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**CONSENT ORDER**

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**JURISDICTION AND PROCEDURAL HISTORY**

The Virginia Board of Nursing ("Board") and Katherine Leigh Hyde, R.N., as evidenced by their signatures hereto, in lieu of proceeding to a formal administrative proceeding, enter into the following Consent Order affecting Ms. Hyde's license to practice professional nursing in the Commonwealth of Virginia.

Pursuant to Virginia Code §§ 2.2-4019 and 54.1-2400(10), a Special Conference Committee of the Board held an informal conference on October 6, 2016, in Henrico County, Virginia. Ms. Hyde appeared at this proceeding and was represented by Nicholas A. Balland, Esquire.

**NOTICE**

By letter dated December 30, 2016, the Board notified Ms. Hyde that a formal administrative hearing would be held on January 23, 2017.

**FINDINGS OF FACT AND CONCLUSIONS OF LAW**

1. Katherine Leigh Hyde, R.N. was issued License Number 0001-193852 to practice professional nursing on December 8, 2004, which is scheduled to expire on March 31, 2017. At all times relevant to the findings contained herein, said license was current and active. Her primary state of residence is Virginia.

2. Katherine Leigh Hyde, R.N. violated Virginia Code § 54.1-3007(2), (5), (6) and (8) and 18 VAC 90-20-300(A)(2)(c) and (e) of the Regulations Governing Professional Nursing in that by her

own admission, during the course of her employment with Chesapeake Regional Medical Center, Chesapeake, Virginia, she and another nurse ("Nurse B") diverted oxycodone (C-II) and Percocet (oxycodone and acetaminophen, C-II). For example:

a. Ms. Hyde and Nurse B often pulled medications for a patient and then minutes later pulled the same medication for the same patient. Administration of the medications was often not documented. The medications were frequently wasted immediately after being vended with each nurse usually witnessing the waste for the other nurse's vends. Some medications were vended after the patient was discharged. For example:

i. On April 1, 2015, Ms. Hyde pulled two tabs of oxycodone for Patient A at 07:55, for which there is no record of administration, return, or waste. Ms. Hyde pulled two tabs of oxycodone at 08:21 for Patient A, which she documented as administered at 08:25. Ms. Hyde pulled two tabs of oxycodone at 08:39 for Patient A, for which there is no record of administration, return, or waste.

ii. On April 8, 2015, Ms. Hyde pulled two tabs of Percocet for Patient B at 14:53, for which there is no record of administration, return, or waste. Ms. Hyde pulled two tabs of Percocet for Patient B at 16:59, for which there is no record of administration. Ms. Hyde recorded the waste of two tabs of Percocet at 17:03, witnessed by another nurse. Ms. Hyde pulled two tabs of Percocet for Patient B at 17:04, and recorded the administration of two tabs at 17:07. Ms. Hyde recorded the waste of two tabs of Percocet at 19:07, witnessed by another nurse.

iii. On April 9, 2015, Ms. Hyde pulled two tabs of Percocet for Patient B at 08:42, and recorded the administration of two tabs at 08:51. Ms. Hyde pulled two tabs of Percocet at 09:32, for which there is no record of administration. Ms. Hyde pulled two tabs of Percocet at 11:48, and recorded the administration of two tabs at 12:37. Ms. Hyde recorded the waste of two tabs at

12:58, witnessed by another nurse. Ms. Hyde pulled two tabs of Percocet at 15:51, and recorded the administration of two tabs at 16:02. The order called for administration of Percocet every four hours, as needed.

iv. On April 13, 2015, Ms. Hyde pulled four tabs of oxycodone for Patient C at 15:28, and documented the administration of four tabs at 15:37. Ms. Hyde pulled two tabs of Percocet for Patient C at 17:04, for which there is no documentation of administration. Ms. Hyde documented the waste of two tabs of Percocet at 17:05, witnessed by Nurse B. The order called for administration of Percocet every four hours, as needed.

v. On April 29, 2015, Ms. Hyde pulled two tabs of oxycodone for Patient D at 08:09, for which there is no record of administration. Ms. Hyde pulled two tabs of oxycodone for Patient D at 13:16, for which there is no record of administration. Ms. Hyde documented the waste of two tabs of oxycodone at 13:28, witnessed by Nurse B. Ms. Hyde documented the waste of two tabs of oxycodone at 15:49, witnessed by Nurse B.

vi. On May 11, 2015, Ms. Hyde pulled two tabs of Percocet for Patient E at 13:02, for which there is no record of administration. Ms. Hyde recorded the return of two tabs of Percocet at 13:23. Ms. Hyde pulled four tabs of oxycodone for Patient E at 13:24, and documented the administration of four tabs to Patient E at 17:29. Ms. Hyde pulled two tabs of Percocet at 14:23, and documented the administration of two tabs of Percocet to Patient E at 14:23. Ms. Hyde pulled two tabs of Percocet at 17:21, for which there is no record of administration, return, or waste.

vii. On May 20, 2015, Ms. Hyde pulled four tabs of oxycodone for Patient F at 11:30, and documented the administration of four tabs of oxycodone to Patient F at 13:49. Ms. Hyde pulled two tabs of Percocet at 12:49, and documented the administration of two tabs of Percocet to Patient F at 12:51. Ms. Hyde pulled two tabs of Percocet for Patient F at 17:33, for which there is

no record of administration. Ms. Hyde documented the waste of two tabs of Percocet at 17:57, witnessed by Nurse B. Ms. Hyde pulled four tabs of oxycodone for Patient F at 17:58, and documented the administration of four tabs of oxycodone to Patient F at 18:22. The orders for oxycodone and Percocet called for the administration every four hours, as needed.

viii. On June 4, 2015, Ms. Hyde pulled four tabs of oxycodone at 14:27 for Patient G. Nurse B documented the administration of two tabs of oxycodone to Patient G at 14:32. Ms. Hyde documented the waste of two tabs at 16:08, witnessed by Nurse B. Ms. Hyde also pulled two tabs of Percocet at 14:28 for Patient G. There is no record of administration. Ms. Hyde wasted two tabs at 16:08, witnessed by Nurse B.

ix. On June 5, 2015, Ms. Hyde pulled two tabs of Percocet at 12:57 for Patient G, for which there is no record of administration, return, or waste. Nurse B then pulled two tabs of Percocet at 13:30:50 for Patient G for which there was no documentation of administration, return, or waste. Additionally, Patient G was discharged at 13:30.

x. On June 23, 2015, Ms. Hyde pulled four tabs of oxycodone for Patient H at 08:39, for which there is no record of administration. Ms. Hyde documented the waste of four tabs of oxycodone at 11:42:12, witnessed by Nurse B. Ms. Hyde pulled four tabs of oxycodone for Patient H at 10:19, for which there is no record of administration. Ms. Hyde documented the waste of four tabs of oxycodone at 11:42:14, witnessed by Nurse B. Ms. Hyde pulled two tabs of Percocet at 11:42:41 for Patient H, for which there is no record of administration. Ms. Hyde documented the waste of two tabs of Percocet at 11:42:58. Ms. Hyde pulled two tabs of Percocet for Patient H at 16:40, for which there is no record of administration, return or waste.

b. Ms. Hyde admitted to diverting medications for three or four months, using the medications while on duty and recreationally, and wasting empty packages in the sharps container.

3. Katherine Hyde, R.N. violated Virginia Code § 54.1-3007(6) in that she admitted to the recreational use of Percocet and oxycodone which she had diverted from her employer, Chesapeake Regional Medical Center. Additionally, Ms. Hyde has a history of substance use, as evidenced by her driving under the influence conviction from 2007 and the termination of her employment with Sentara Norfolk General following a positive drug screen for cocaine. Ms. Hyde indicated that she has “dabbled” with cocaine in the past.

4. Ms. Hyde was allowed to resign from her position with Chesapeake Regional Medical Center in lieu of termination on October 6, 2015.

5. Ms. Hyde is not currently in treatment. Ms. Hyde stated that she plans to seek treatment for anxiety and depression, but that she does not believe she needs treatment for substance abuse.

6. Ms. Hyde is currently working for a sports medicine practice doing scheduling and administrative work.

### CONSENT

Katherine Leigh Hyde, R.N., by affixing her signature to this Consent Order, agrees to the following:

1. I have been advised to seek advice of counsel prior to signing this document and am represented by Nicholas A. Balland, Esquire;

2. I am fully aware that without my consent, no legal action can be taken against me or my license except pursuant to the Virginia Administrative Process Act, Virginia Code § 2.2-4000 *et seq.*;

3. I acknowledge that I have the following rights, among others: the right to a formal administrative hearing before the Board; the right to representation by counsel; and the right to cross-examine witnesses against me;

4. I waive my right to a formal hearing;

5. I admit to the Findings of Fact and Conclusions of Law contained herein and waive my right to contest such Findings of Fact and Conclusions of Law and any sanction imposed hereunder in any future judicial or administrative proceeding in which the Board is a party;

6. I consent to the entry of the following Order affecting my licensure to practice professional nursing in the Commonwealth of Virginia.


### ORDER

Based on the foregoing Findings of Fact and Conclusions of Law, the Virginia Board of Nursing hereby ORDERS as follows:

1. The Board accepts the VOLUNTARY SURRENDER for INDEFINITE SUSPENSION of Katherine Leigh Hyde's license to practice professional nursing in the Commonwealth of Virginia.
2. The license of Katherine Leigh Hyde, R.N., will be recorded as SUSPENDED.
3. This suspension applies to any multistate privilege to practice professional nursing.
4. Should Katherine Leigh Hyde, R.N., seek reinstatement of her license, an administrative proceeding shall be convened to consider such application. At such time, the burden shall be on Ms. Hyde to demonstrate that she is safe and competent to return to the practice of professional nursing. Ms. Hyde shall be responsible for any fees that may be required for the reinstatement and/or renewal of the license prior to issuance of the license to resume practice.

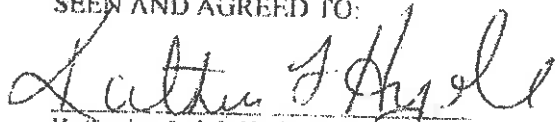
Pursuant to Virginia Code §§ 2.2-4023 and 54.1-2400.2, the signed original of this Order shall remain in the custody of the Department of Health Professions as a public record, and shall be made available for public inspection and copying upon request.

FOR THE BOARD

  
Joyce A. Hahn, PhD, RN, NEA-BC, FNAP  
President  
Virginia Board of Nursing

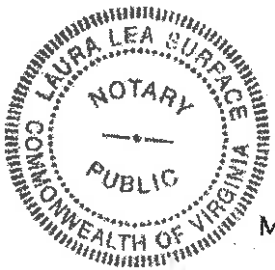
ENTERED: 1/24/17

SEEN AND AGREED TO:

  
Katherine Leigh Hyde, R.N.

COMMONWEALTH OF VIRGINIA  
COUNTY/CITY OF Chesapeake, TO WIT:

Subscribed and sworn to me, a notary public in and for the Commonwealth of Virginia at large, on this  
19 day of January, 2017.



  
Notary Public

My commission expires: 2-29-20

Registration No.: 7519725

Certified True Copy  
By dgraham  
Virginia Board Of Nursing