

VIRGINIA:

BEFORE THE BOARD OF NURSING

RE:

KELLY A. PEREN

ORDER

Pursuant to § 2.2-4020, § 2.2-4021, § 54.1-110 and § 54.1-2400(11) of the Code of Virginia (1950), as amended (the "Code"), a formal administrative hearing was held before a panel of the Board of Nursing (the "Board") on July 17, 2002, in Henrico County, Virginia, to receive and act upon evidence that Kelly A. Peren may have violated certain laws and regulations governing the practice of nursing in Virginia. The case was presented by Ann L. Tiller, Senior Adjudication Analyst, Administrative Proceedings Division. Howard M. Casway, Assistant Attorney General, was present as legal counsel for the Board. Ms. Peren was not present and was not represented by legal counsel. The proceedings were recorded by a certified court reporter.

Upon consideration of the evidence presented, the Board adopted the following Findings of Fact and Conclusions of Law.

FINDINGS OF FACT

1. Kelly A. Peren previously held License No. 0001-144472 to practice professional nursing in the Commonwealth of Virginia, which expired May 31, 2002.
2. Based upon the representations of Ms. Tiller and Commonwealth's Exhibit # 1, the affidavit of mailing, the presiding officer ruled that adequate notice was provided to the respondent and the hearing proceeded in the absence of the respondent.
3. During the course of her employment with Northern Virginia Community Hospital, Arlington, Virginia, in the time period of November 2001, Ms. Peren, R.N., wrongly medicated patients with doses of narcotic analgesics that were higher than ordered by the treating physician. She would also administer pain medications when she had no physician

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orders for the drugs administered.

- A. Ms. Peren reported to the hospital to care for patients on many shifts when she was not on the schedule, especially on weekends, to include on Sunday, November 25, 2001. By her own admission, Ms. Peren asked for the narcotics keys on that date so she could medicate "her" patients, although she had not received report from the outgoing nursing staff on the condition of the patients. In addition, staff observed Ms. Peren working on patients' charts on this date, and, by her own admission, she did take a verbal order and reduce it to writing.
- B. Ms. Peren acknowledges she has boundary violation issues in many areas of patient care, and is aware that she becomes overly emotionally involved with patients when she provides direct care. In order to avoid direct patient care, Ms. Peren accepted a supervisor position at this facility, but eventually began doing patient care.
- C. Ms. Peren feels as though she had to "properly" care for some patients even though these patients did not have physicians' orders for some of the care she provided. Ms. Peren stated that the problem was not with her giving "needed medications" to the patients, but that the hospital had several ventilator patients who were not being treated appropriately. Ms. Peren stated that these patients had drug orders that were insufficient to meet their pain needs; however, she failed to obtain these "needed" orders from a physician. By her own admission, Ms. Peren signed out higher doses of medications than the physician orders called for, and did not always chart the higher doses administered to the patients. She acknowledged that this was true for Patients A through C on or about November 18 through 24, 2001. Ms. Peren stated that she knew what she had done in signing out medication not ordered by a physician and administering it to her patients was wrong, but stated, "the entire

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system is wrong.”

D. As a result, Ms. Peren’s employment was suspended.

4. During the November 2001 time period a review of the Controlled Drug Administration Records and Patient Medication Administration Records (“MARs”) was conducted because of Ms. Peren’s medication administration charting discrepancies and possible drug seeking behavior, to include her coming into work and requesting the narcotics keys when she was not scheduled to work. The review of records revealed the following:

A. Regarding Patient A:

- 1) On or about November 24, 2001, Ms. Peren signed out on the CDAR as removing one tablet of Demerol 75 mg (Meperidine), a Schedule II controlled substance; however, she failed to chart the administration of the medication on the MAR.
- 2) On or about November 23, 2001, Ms. Peren signed out on the CDAR as removing one tablet of Demerol 75 mg; however, she failed to chart the administration of the medication on the MAR. The physician’s order was for 50 mg of Demerol. Additionally, the MAR notes that the medication was discontinued from the original order to every 6 hours as needed for pain. It is unclear who made the change.
- 3) On or about November 20, 2001, Ms. Peren signed out on the CDAR as removing two (2) tablets of Demerol 75 mg; however, she failed to chart the administration of the medication on the MAR.
- 4) On or about November 19, 2001, Ms. Peren signed out on the CDAR as removing one tablet of Demerol 75 mg; however, she failed to chart the administration of the medication on the MAR.

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B. Regarding Patient B:

- 1) On or about November 23, 2001, Ms. Peren signed out on the CDAR as removing two (2) tablets of Percocet (oxycodone), a Schedule II controlled substance; however, she failed to chart the administration of the medication on the MAR.
- 2) On or about November 21, 2001, Ms. Peren signed out on the CDAR as removing two (2) tablets of Percocet; however, she failed to chart the administration of the medication on the MAR.
- 3) On or about November 18, 2001, Ms. Peren signed out on the CDAR as removing one tablet of Percocet; however, she failed to chart the administration of the medication on the MAR.

C. Regarding Patient C:

- 1) On or about November 23, 2001, Ms. Peren signed out on the CDAR as removing one tubex of Dilaudid 4 mg (hydromorphone), a Schedule II controlled substance; however, she failed to chart the administration of Dilaudid on the MAR. Further, the patient reported that Ms. Peren did not administer the medication to her.
- 2) On or about November 21, 2001, Ms. Peren signed out on the CDAR as removing nine (9) tubexes of Dilaudid 4 mg, one tubex of Dilaudid 2 mg, and two (2) tablets of Ativan (Lorazepam), a Schedule IV controlled substance. Ms. Peren failed to chart the administration of Dilaudid removed at 1130, 1200, 1500 and 1830, and failed to chart the administration of the Ativan on the MARs. Additionally, she documented twice on the CDAR as having removed Dilaudid at 1400, and failed to chart one (1) of the two (2)

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doses on the MAR.

- 3) On or about November 20, 2001, Ms. Peren signed out on the CDAR as removing six (6) tubexes of Dilaudid 4 mg and two (2) tubexes of Dilaudid 4 mg; however, she failed to chart the administration of Dilaudid removed at 1520 and 1600 on the MAR.
- 4) On or about November 19, 2001, Ms. Peren signed out on the CDAR as removing four (4) tubexes of Dilaudid 2 mg and two (2) tubexes of Dilaudid 4 mg. In reviewing the MAR, it is unclear what Ms. Peren documented as administered to the patient.

D. As a result of the above, Ms. Peren's employment was suspended.

5. By her own admission in a signed, handwritten statement, while employed in a hospital in Arizona, Ms. Peren routinely worked outside of the scope of her practice, to include administering Diprivan (propofol, Schedule VI) in the absence of physicians' orders, at doses which Ms. Peren characterized as "anesthesia at those levels."

CONCLUSIONS OF LAW

Based upon the Findings of Fact, the Board concludes that Kelly A. Peren has § 54.1-3007(2), (5) and (6) of the Code of Virginia (1950), as amended, and 18 VAC 90-20-300(A)(2)(a), (c), (e) and (f) of the Regulations of the Board of Nursing.

ORDER

WHEREFORE, the Virginia Board of Nursing, effective upon entry of this Order, hereby ORDERS that the right of Kelly A. Peren to renew License No. 0001-144472, issued to Ms. Peren to practice professional nursing in the Commonwealth of Virginia, be and hereby is INDEFINITELY SUSPENDED. Ms. Peren may petition the Board after not less than three (3) years from the date of entry of this Order for reinstatement of her license to practice professional nursing, at which time a

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meeting will be convened to receive evidence satisfactory to the Board that Ms. Peren is able to resume the safe and competent practice of nursing.

Upon entry of this Order, the license of Kelly A. Peren will be recorded as indefinitely suspended and no longer current. Consistent with the terms of this Order, in the event that Ms. Peren seeks reinstatement of her license, she shall be responsible for any fees that may be required for the reinstatement and renewal of her license prior to issuance of her license to resume practice.

Pursuant to § 2.2-4023 of the Code of Virginia (1950), as amended, the signed original of this Order shall remain in the custody of the Department of Health Professions as public record and shall be made available for public inspection or copying on request.

As provided by Rule 2A:2 of the Supreme Court of Virginia, Ms. Peren has thirty (30) days from the service date in which to appeal this decision by filing a Notice of Appeal with Nancy K. Durrett, R.N., M.S.N., Executive Director, Board of Nursing, 6606 W. Broad Street, Fourth Floor, Richmond, Virginia 23230-1717. The service date shall be defined as the date Ms. Peren actually received this decision or the date it was mailed to her, whichever occurred first. In the event this decision is served upon her by mail, three (3) days are added to that period.

FOR THE BOARD

Nancy K. Durrett
Nancy K. Durrett, R.N., M.S.N.
Executive Director for the
Board of Nursing

July 30, 2002
ENTERED

KELLY A. PEREN

Certificate of Service

I hereby certify that a certified true copy of the foregoing Order was mailed on this day to Kelly A. Peren at 10411 Armstrong Street, Fairfax, Virginia 22030.

Nancy K. Durrett
Nancy K. Durrett, R.N., M.S.N.
Executive Director for the
Board of Nursing

DATE July 30, 2002