

COMMONWEALTH of VIRGINIA

David E. Brown, D.C. Director

Department of Health Professions
Perimeter Center
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Virginia Board of Nursing Jay P. Douglas, MSM, RN, CSAC, FRE Executive Director

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NOTICE OF INFORMAL CONFERENCE BEFORE AN AGENCY SUBORDINATE

February 9, 2015

Sigrid Butler, R.N. 42867 Spring Morning Court Ashburn, Virginia 20148

CERTIFIED MAIL 9414726699042003245506

RE: VA License No.:

0001-190381

Expiration Date:

October 31, 2015

Dear Ms. Butler:

This letter is official notification that an informal conference of the Virginia Board of Nursing ("Board") will be held on **March 31, 2015, at 1:00 p.m.**, at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Suite 201, Henrico, Virginia. In accordance with §§ 2.2-4019, 2.2-4021, and 54.1-2400(10) of the Code of Virginia (1950), as amended ("Code"), this informal conference will be held before an agency subordinate of the Board of Nursing. This informal conference will be convened as a public meeting pursuant to § 2.2-3700 et seq. of the Code. The agency subordinate will inquire into allegations that you may have violated certain laws and regulations governing nursing practice in Virginia.

Specifically:

- 1. You may have violated § 54.1-3007(2), (5), and (6) of the Code and 18 VAC 90-20-300(A)(2)(c) and (e) of the Regulations Governing the Practice of Nursing in that, during the course of your employment with Inova Fairfax Hospital, Falls Church, Virginia ("Inova Fairfax"):
- a. Between March 10, 2014 and August 13, 2014, you diverted numerous narcotic medications, as evidenced by the following:

- i. On or about March 10, 2014, you withdrew six Percocet 325mg tablets (oxycodone, Schedule II) for Patient A who was prescribed oxycodone 325mg two tablets every four hours as needed. You withdrew two tablets at 16:20 and wasted them at 16:27. You withdrew two tablets at 16:47 and administered them at 18:26, but you did not scan the medication until 19:25. You withdrew two more tablets at 18:23, and you failed to document their administration or wastage. You also failed to document Patient A's pain scale.
- ii. On or about May 3, 2014, you withdrew five hydrocodone 325mg tablets (Schedule II) for Patient B, who was prescribed hydrocodone 325mg one tablet every four hours as needed. You withdrew one tablet at 7:26, which you scanned at 7:30 and did not administer until 10:32. You withdrew one tablet at 10:21, which you scanned and administered at 11:42. The medication was prescribed for every four hours as needed. You withdrew one tablet at 12:27, which you scanned at 14:45 and administered at 14:34. You withdrew one tablet at 13:59, which you scanned at 16:28, and failed to properly document administration or wastage. You withdrew one tablet at 17:56, which you scanned at 18:23 and administered at 18:24.
- iii. On or about March 26, 2014, you withdrew three acetaminophen/codeine phosphate 300/30 mg tablets (Schedule III) for Patient C, whose prescription was for one tablet every four hours as needed. You withdrew one tablet at 8:24, which you scanned at 8:30 and administered at 10:20. You withdrew one tablet at 10:08, which you scanned and administered at 10:13. You withdrew one tab at 10:09, and you failed to document its administration or wastage.
- iv. On or about March 26, 2014, you withdrew three Percocet 325mg tablets for Patient C. You withdrew one tablet at 13:15 and failed to document its administration or wastage. You withdrew two tablets at 16:07, which you scanned at 18:00 and administered at 17:40.
- v. On or about March 27, 2014, you withdrew eight Percocet 325mg tablets for Patient C. You withdrew two tablets at 11:45, which you scanned and administered at 11:49. You withdrew two tablets at 14:45, which you scanned and administered at 16:09. You withdrew two tablets at 18:14, which you scanned and administered at 18:15.
- vi. On or about March 8, 2014, you withdrew eight oxycodone 10mg tablets for Patient D, whose prescription was for oxycodone 10mg, two tablets every six hours for pain. You withdrew two tablets at 8:40, which you scanned at 8:40 and administered at 9:31. You withdrew two tablets at 10:29, which you scanned at 13:00 and administered at 14:42. You withdrew two tablets at 13:25, which you scanned at 17:00 and administered at 19:26. You withdrew two tabs at 17:12, which you scanned at 20:26 and administered at 19:27.
- vii. On or about April 11, 2014, you withdrew oxycodone 5mg/5ml twice for Patient E. You withdrew 5mg at 8:19, which you scanned and administered at 10:44. You withdrew 10mg at 10:39, of which you wasted 5mg. You failed to document administration or wastage of the remaining 5mg. Patient E was prescribed 5mg/5ml every eight hours.
- viii. On or about July 28, 2014, you withdrew two alprazolam .25mg tablets (Schedule IV) for Patient F. You withdrew one tablet at 8:55, which you scanned at 9:00 and administered at 9:45. You withdrew one tablet at 11:32, which you scanned at 14:00 and administered at 13:04. Patient F was prescribed one tablet every eight hours as needed.

- ix. On or about July 29, 2014, you withdrew two alprazolam .25mg tablets for Patient F. You withdrew one tablet at 8:50, which you scanned at 8:30 and administered at 10:14. You withdrew one tablet at 14:42, which you scanned at 17:00, Patient F's family refused at 16:03, and you wasted at 19:19.
- x. On or about July 28, 2014, you withdrew eight Percocet 325mg tablets for Patient F. You withdrew one tablet at 8:34, which you scanned and administered at 9:21. You withdrew another tablet at 9:11, and you failed to document its wastage or administration. At 8:52, you also requested an order to change Patient's prescription for one tablet every four hours as needed to two tablets every hour as needed.
- xi. On or about July 29, 2014, you withdrew six Percocet 325mg tablets for Patient F. You withdrew two tablets at 8:50, which you scanned at 8:30 and administered at 10:14. You withdrew two tablets at 12:36, which you scanned at 12:455 and administered at 15:48. You withdrew two tablets at 14:43, which you scanned at 17:00 and wasted at 19:18.
- G. You withdrew one tablet at 8:34 which was scanned at 8:34 and given at 9:21. You withdrew another tablet at 9:11, and you failed to document its administration or wastage. You withdrew one tablet at 12:10, which you scanned at 12:00 and administered at 12:19. You withdrew one tablet at 13:41, which you scanned at 13:00 and administered at 15:10. You withdrew two tablets at 15:04, which you scanned and administered at 15:10. At 21:43, you requested an order to change the prescription from one tablet every two hours to two tablets every two hours.
- Xiii. On or about July 4, 2014, you withdrew ten Percocet 325mg tablets for Patient G. You withdrew two tablets at 9:39, which you scanned at 9:00 and administered at 13:36. You withdrew two tablets at 12:06, which you scanned at 13:55 and documented as refused. You withdrew two tablets at 13:51, which you scanned at 14:01 and administered at 15:16. You withdrew two tablets at 15:21, which you scanned at 19:05 and administered at 19:06. You canceled the administration entry after Patient G refused the medication based on her belief that she had already taken it. You failed to document any wastage. You withdrew two tablets at 8:00, which you scanned at 8:00. You documented that the patient coughed up the pills at 9:46.
- b. You forged numerous prescriptions for narcotic medications from eight Inova Fairfax doctors and fraudulently filled those forged prescriptions at multiple pharmacies.
- 2. You may have violated § 54.1-3007(6) of the Code in that you are unsafe to practice due to your admitted substance abuse.

Please see Attachment I for the names of the patients referenced above.

In its deliberations, the agency subordinate may use the Sanction Reference Points System, as contained in the Sanction Reference Manual. The manual, which is a guidance document of the Board, may be accessed at http://www.dhp.virginia.gov/nursing. Please click on *Guidance Documents*, then select #90-7. You may also request a paper copy from the Board office by calling (804) 367-4515.

After consideration of all information, the agency subordinate may:

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- If the agency subordinate finds that there is insufficient evidence to warrant further action or that the charges are without foundation, notify you by mail that your record has been cleared of any charge which might affect your right to practice nursing in the Commonwealth; or
- Recommend findings of fact, conclusions of law and a sanction, to include a reprimand, placing you on probation with terms, suspension or revocation of your license, or imposing a monetary penalty pursuant to § 54.1-2401 of the Code.

Further, the agency subordinate may refer this matter for a formal administrative proceeding pursuant to § 2.2-4020 of the Code.

Board's Review of Agency Subordinate's Recommended Decision

If you appear in person or by counsel at the informal conference, the recommendation of the agency subordinate will be presented to a quorum of the Board. The Board may accept or modify the recommendation, or reject the recommendation and move the case to formal hearing. If you do not agree with the decision of the Board, you have the right to a formal administrative hearing before the Board.

If you fail to appear in person or by counsel at the informal conference, the recommendation of the agency subordinate will be presented to a quorum of the Board. The Board may accept or modify the recommendation, or reject the recommendation. The Board's decision regarding the agency subordinate's recommendation is a final order that can only be appealed to circuit court as provided by Rule 2A:2 of the Supreme Court of Virginia.

You have the right to information that will be relied upon by the agency subordinate in making a decision. Therefore, I enclose a copy of the documents that will be distributed to the agency subordinate, and will be considered when discussing the allegations with you and when deliberating upon your case. These documents are enclosed only with the original 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.

To facilitate this proceeding, you should submit five copies of any documents you wish the agency subordinate to consider to the Board of Nursing, Perimeter Center, 9960 Mayland Drive, Suite 300, Richmond, VA 23233, by March 26, 2015. Your documents may not be submitted by facsimile or email.

You may be represented by an attorney at the informal conference. If you obtain counsel, you should do so as soon as possible, because absent good cause to support a request for a continuance, the informal conference will be held on **March 31, 2015**. A request to continue this proceeding must state **in detail** the reason for the request and must establish good cause. Such request must be made, in writing, to me at the address listed on this letter and must be received by 12 noon on March 26, 2015. Only one such motion will be considered. Absent critical circumstances, such as personal or family illness, a request for a continuance after March 26, 2015 will not be considered.

Relevant sections of the Administrative Process Act, which govern proceedings of this nature, as well as laws relating to the practice of nursing and other healing arts in Virginia cited in this notice can be found on the Internet at http://leg1.state.va.us. To access this information, please click on the *Code of Virginia* for statutes and *Virginia Administrative Code* for regulations.

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Please advise the Board, in writing, of your intention to be present. If you have any questions regarding this notice, please contact this office, at (804) 367-4543.

Sincerely,

Slove Mitchell-Lively, R.N., M.S.N., M.B.A.

Deputy Executive Director

Enclosures

cc: Anne G. Joseph, Deputy Director, Administrative Proceedings Division

Amy E. Weiss, Adjudication Specialist

Naima Fellers, Senior Investigator (Case no. 158892)

Agency Subordinate

Peggy Wood, Monitoring Program Manager