	FILED
	07/11/2014
D	HHS Hearing Office

THE DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC HEALTH STATE OF NEBRASKA

STATE OF NEBRASKA ex rel. JON) BRUNING, Attorney General,)
Plaintiff,)
v.)
LINDSEY CREEKMORE, R.N.,)
Defendant.)

131321

AMENDED PETITION FOR DISCIPLINARY ACTION

The Plaintiff alleges as follows:

ALLEGATIONS COMMON TO ALL CAUSES OF ACTION:

1. Jurisdiction is based on Neb. Rev. Stat. §§ 38-176 and 38-186 (Reissue 2008).

2. At all times relevant herein, the Defendant, Lindsey Creekmore, R.N., has been the holder of a registered nursing license (#69665) issued by the Nebraska Department of Health and Human Services Division of Public Health ("Department").

3. The Department is the agency in the State of Nebraska authorized to enforce the provisions of the Uniform Credentialing Act regulating the practice of nursing.

4. The Nurse Licensure Compact authorizes the Department to discipline the multistate nurse licensure privilege of the Defendant to practice in the State of Nebraska in accordance with Neb. Rev. Stat. § 38-196 (Reissue 2008).

5. The Nebraska Board of Nursing considered the investigation of this matter and made a disciplinary recommendation to the Attorney General, which recommendation has been considered. Such matters are privileged pursuant to Neb. Rev. Stat. §§ 38-1,105 and 38-1,106 (Reissue 2008).

6. The Defendant has been employed as a full-time nurse at Bellevue Health and Emergency Clinic, Inc. (hereinafter "the Clinic") in Bellevue, Nebraska since September 2009.

7. The Defendant has been the only nurse working in the Clinic since April

30, 2011. Prior to April 30, 2011, another registered nurse, S.H., also worked in the Clinic.

8. The Clinic maintains the following IV sedation standing order:

"IV sedation (To be given by Licensed Staff only)

- Versed 1 mg/mL 2 mL IVP
- Fentanyl 50 mcg/mL 2 mL (125 mcg)
- For patient under 120 pounds the meds will be decreased to: Versed – 1.5 mL and Fentanyl 1.5 mL
- For patients under 100 pounds the meds will be decreased to: Versed – 1 mL and Fentanyl 1 mL."
- 9. The Defendant informed a Department investigator that she is responsible

for administering IV sedation medication during abortion procedures.

10. The Clinic maintains the following standing order for Pitocin IV 10 units/cc:

"For Patients with 15 - 21.6 week gestation – One hour prior to delivery, 1000 cc IV fluid with 30u of Pitocin added will be started and ran at a rate of 30 ggts per minute."

11. On March 31, 2012, Patient #1 underwent a surgical abortion procedure at

the Clinic. The patient's medical record includes the following information:

- a. Chart order: Titrate to comfort with ½ mL Fentanyl and ½ mL Versed q 15 min prn;
- b. Defendant documented administering Versed (1 mg/mL) 2.0 IV and Fentanyl (50 mcg/mL) 2.0 IV at 947;

- c. Defendant documented administering Versed (1 mg/mL) 2.0 IV and Fentanyl (50 mcg/mL) 2.0 IV at 1246;
- d. Defendant documented administering Versed (1 mg/mL) 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 1249;
- e. Defendant documented administering Versed (1 mg/mL) 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 1300;
- f. Defendant documented administering D5%LR with 50 units Pitocin; Defendant did not record the time of administration.
- 12. On March 16, 2012, Patient #2 underwent a surgical abortion procedure at

the Clinic. The patient's medical record includes the following information:

- a. Patient weighs less than 120 pounds;
- b. Defendant documented administering Versed (1 mg/mL) 2.0 and Fentanyl (50 mcg/mL) IVP 2.0 at 1144.
- 13. On March 15, 2012, Patient #3 underwent a surgical abortion procedure at

the Clinic. The patient's medical record includes the following information:

- a. Defendant documented administering Versed (1 mg/mL) 2.0 at 1115 and Fentanyl (50 mcg/mL) IVP 2.0 at 1115;
- b. Defendant documented administering Versed (1 mg/mL) 1.0 and Fentanyl (50 mcg/mL) IVP 1.0 at 1119.
- 14. On April 8 and 9, 2011, Patient #4 underwent a surgical abortion

procedure at the Clinic. The patient's medical record includes the following information:

- a. 4/9/11: Defendant documented administering Versed (1 mg/mL)
 2.0 IV and Fentanyl (50 mcg/mL) 2.0 IV at 942;
- b. 4/9/11: Defendant documented administering Versed (1 mg/mL)
 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 943;
- c. 4/9/11: Defendant documented administering Versed (1 mg/mL)
 1.0 IV at 956.

15. On April 1 and April 2, 2011, Patient #5 underwent a surgical abortion procedure at the Clinic. The treatment record includes the following information:

- a. 4/2/11: Defendant documented administering D5LR with 40 units Pitocin at 1254;
- b. 4/2/11: Defendant documented administering Versed (1 mg/mL)
 2.0 IV and Fentanyl (50 mcg/mL) 2.0 IV at 1222;
- c. 4/2/11: Defendant documented administering Versed (1 mg/mL)
 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 1233;
- d. 4/2/11: Defendant documented administering Versed (1 mg/mL)
 .5 IV and Fentanyl (50 mcg/mL) .5 IV at 1235;
- e. 4/2/11: Defendant documented administering Versed (1 mg/mL) .5 IV and Fentanyl (50 mcg/mL) .5 IV at 1245;
- f. 4/2/11: Defendant documented administering Fentanyl (50 mcg/mL) 1.0 IV at 1252.
- 16. On April 2, 2011, Patient #6 underwent a surgical abortion procedure at

the Clinic. The patient's medical record includes the following information:

- a. Chart order: Titrate to comfort with .5 mL Fentanyl and/or .5 mL Versed q 15 min prn;
- b. Defendant documented administering Versed (1 mg/mL) 2.0 IV and Fentanyl (50 mcg/mL) 2.0 IV at 1055;
- c. Defendant documented administering Versed (1 mg/mL) 2.0 IV and Fentanyl (50 mcg/mL) 2.0 IV at 1415;
- d. Defendant documented administering Versed (1 mg/mL) .5 IV and Fentanyl (50 mcg/mL) .5 IV at 1420;
- e. Defendant documented administering Versed (1 mg/mL) 1.0 IV at 1424;
- f. Defendant documented administering Versed (1 mg/mL) .5 IV and Fentanyl (50 mcg/mL) .5 IV at 1430;
- g. Defendant documented administering Versed (1 mg/mL) .5 IV and Fentanyl (50 mcg/mL) .5 IV at 1432;

17. Between February 26 and 27, 2011, Patient #7 underwent a surgical abortion procedure at the Clinic. The patient's medical record includes the following information:

- a. 2/27/11: Defendant documented administering Versed (1 mg/mL)
 2.0 IV and Fentanyl (50 mcg/mL) 2.0 IV at 836;
- b. 2/27/11: Defendant documented administering Versed (1 mg/mL)
 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 902;
- c. 2/27/11: Defendant documented administering Versed (1 mg/mL) 1.0 IV at 910;
- d. 2/27/11: Defendant documented administering Versed (1 mg/mL)
 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 929;
- e. 2/27/11: Defendant documented administering Versed (1 mg/mL) 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 958;
- f. 2/27/11: Defendant documented administering Versed (1 mg/mL) 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 1026;
- g. 2/27/11: Defendant documented administering Versed (1 mg/mL)
 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 1045
- h. 2/27/11: Defendant documented administering Versed (1 mg/mL) 1.0 IV at 1047;
- i. Defendant documented administering D5LR #2 with 30 units Pitocin IV. The Defendant did record the time of administration.
- 18. On February 26 and 27, 2011, Patient #8 underwent a surgical abortion

procedure at the Clinic. The patient's medical record includes the following information:

- a. 2/27/11: Defendant administered Versed (1 mg/mL) .5 IV and Fentanyl (50 mcg/mL) .5 IV at 756.
- 19. On February 13, 2011, Patient #9 underwent a surgical abortion

procedure at the Clinic. The patient's medical record includes the following information:

- a. Defendant documented administering Versed (1 mg/mL) 2.0 IV and Fentanyl (50 mcg/mL) 2.0 IV at 1013;
- b. Defendant documented administering Versed (1 mg/mL) 1.0 IV at 1020;
- c. Defendant documented administering Versed (1 mg/mL) 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 1029.

20. On February 3 and 4, 2011, Patient #10 underwent a surgical abortion

procedure at the Clinic. The patient's medical record includes the following information:

- a. Chart order (2/4/11): titrate to comfort ½ mL Fentanyl and ½ mL Versed q 15 min prn;
- b. 2/4/11: Defendant documented administering Versed (1mg/mL)
 2.0 IV and Fentanyl (50 mcg/mL) 2.0 IV at 938;
- c. 2/4/11: Defendant documented administering Versed (1 mg/mL)
 2.0 IV and Fentanyl (50 mcg/mL) 2.0 IV at 1253;
- d. 2/4/11: Defendant documented administering Versed (1 mg/mL)
 .5 IV and Fentanyl (50 mcg/mL) .5 IV at 1301;
- e. 2/4/11: Defendant documented administering Versed (1 mg/mL) 1.0 IV at 1306.
- 21. On January 30, 2011, Patient #11 underwent a surgical abortion

procedure at the Clinic. The patient's medical record includes the following information:

- a. Defendant documented administering Versed (1 mg/mL) 2.0 IV and Fentanyl (50 mcg/mL) 2.0 IV at 758;
- b. Defendant documented administering Versed (1 mg/mL) 1.0 IV at 810;
- c. Defendant documented administering Versed (1 mg/mL) 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 832;
- d. Defendant documented administering Fentanyl (50 mcg/mL) 1.0 IV below the 832 entry but did not include an administration time.

22. The Defendant admits she changes Fentanyl, Versed and Pitocin doses based on verbal orders from L.C., M.D. The Defendant further admits she failed to document these verbal orders in patient records.

23. Medication aides and/or patient care technicians staff the Clinic's abortion procedure recovery room. Recovery room staff duties include, but are not limited to, obtaining vitals, checking perineal pads, ambulating patients and providing post op education/instructions. S.H. informed a Department investigator that a licensed health

care provider is not present in the recovery room unless there are difficulties with a patient. The Defendant informed a Department investigator that she is in charge of the Clinic staff.

24. The Defendant did not meet the acceptable standard of care for a registered nurse licensed in the State of Nebraska based on the following:

- a. Defendant delegated complex nursing care to unlicensed staff;
- b. A registered nurse may not delegate complex nursing care to unlicensed staff;
- c. Recovery room care for surgical abortion patients in the Clinic is complex nursing care.

25. On November 30, 2013, Patient #12 underwent a surgical abortion procedure at the Clinic. During recovery, the patient was transported to the hospital by ambulance for a suspected uterus perforation. The Clinic gave the ambulance crew part of the patient's medical record. The Defendant entered the following information in the progress notes which were given to the ambulance crew:

Time	B/P	Р	02	Temp	Pain	Pad
1020	118/80	101	99	98.3	4	Med
1025	116/78	108	99	98.3	4	
1032	120/76	97	100	98.0	5	
1041	118/76	91	98	98.5	5	Med
1047	118/74	89	99	98.5	6	
1055	122/84	95	99	99.1	7	
1106	124/80	99	98	98.5	3	Lt
1116	118/74	99	98	98.5	3	
1125	118/80	85	99	99.2	4-5	Lt

--1020 Vitals every 5 min vo Dr. Carhart/L Creekmore RN

--1055 Vitals every 10 minutes vo Dr. Carhart/L Creekmore RN

--1105 D5%LR 1L hung TKO. LC

--1106 Pt reports pain @ 3 after using restroom. LC

--1125 Pt ok to sit up front and wait for transport vo Dr. Carhart/L Creekmore RN.

26. On December 24, 2013, the Clinic provided a copy of Patient #12's medical record to the Department. The medical record did not include the progress notes listed above in paragraph 25. Instead, the following progress notes were included:

Time	B/P	Р	O2	Temp	Pain	Pad
1010	100/78	97	98	99.3	6	Med
1015	112/84	100	98	99.2	4	Lt
1020	110/82	95	99	99.2	4	Lt
1025	114/86	94	97	99.0	2	Lt
1030	108/76	88	98	98.9	2	Lt
1035	110/80	89	99	98.7	2	Lt
1040	114/84	92	99	99.0	2	Lt
1045	112/82	88	98	98.9	2	Lt
1050	115/88	87	99	98.8	2	Lt
1055	112/78	90	99	99.1	2	Lt
1100	116/82	92	99	99.1	7	Lt

--11/30/2013 Patient taken to recovery per w/c placed on 02 monitor vitals to be taken every 5 min.

--1100 Pt reports having cramping-period like @ 7. Fent/Versed 1/1 given IVP vo Dr Carhart/L Creekmore RN

--1105 Pain @ 2. LC

--1115118/78 90 99 99.1 Lt 2

--1130118/80 90 98 99.1 Lt 1

--Post instruction sheet given to pt. IV left in with D5LR @ TKO for transport. Pt dismissed @ 1134. L Creemore RN

FIRST CAUSE OF ACTION

27. Paragraphs 1 through 26 are incorporated herein by reference.

28. Neb. Rev. Stat. § 38-178(6)(d) (2012 Cum. Supp.) provides that a

professional license may be disciplined for practice of the profession in a pattern of

incompetent or negligent conduct.

29. The Defendant's conduct set forth above in paragraphs 1 through 26

constitutes a pattern of negligent conduct which is grounds for discipline.

SECOND CAUSE OF ACTION

30. Paragraphs 1 through 24 are incorporated herein by reference.

31. Neb. Rev. Stat. § 38-178(10) (2012 Cum. Supp.) provides that a professional credential may be disciplined for "permitting, aiding and abetting the practice of a profession or the performance of activities requiring a credential by a person not credentialed to do so."

32. The Defendant's delegation of complex nursing care to unlicensed Clinic staff is grounds for discipline.

THIRD CAUSE OF ACTION

33. Paragraphs 1 through 26 are incorporated herein by reference.

34. Neb. Rev. Stat. § 38-178(15) (2012 Cum. Supp.) provides that a professional credential may be disciplined for "violations of the Uniform Credentialing Act or the rules and regulations relating to the particular profession.

35. Title 172 NAC 99-004.01C(2)(a)(2f) of the Regulations Governing the Provisions of Nursing Care provides that a registered nurse may not delegate treatments which are complex interventions.

36. The Defendant's delegation of complex nursing care to unlicensed Clinic staff constitutes a violation of the Regulations Governing the Provisions of Nursing Care which is grounds for discipline.

FOURTH CAUSE OF ACTION

37. Paragraphs 1 through 26 are incorporated herein by reference.

38. Neb. Rev. Stat. § 38-178(23) (2012 Cum. Supp.) provides that a professional credential may be disciplined for unprofessional conduct.

39. Neb. Rev. Stat. § 38-179 (Reissue 2008) defines unprofessional conduct as "...any departure or failure to conform to the standards of acceptable and prevailing practice of a profession of the ethics of the profession, regardless of whether a person,

consumer, or entity is injured, or the conduct is likely to deceive or defraud the public or is detrimental to the public interest, including but not limited to...(10) Failure to keep and maintain adequate records of treatment or service."

40. The Defendant's failure to document verbal orders and medication administration times constitutes unprofessional conduct which is grounds for discipline.

FIFTH CAUSE OF ACTION

41. Paragraphs 1 through 26 are incorporated herein by reference.

42. Neb. Rev. Stat. § 38-178(23) (2012 Cum. Supp.) provides that a professional credential may be disciplined for unprofessional conduct.

43. Neb. Rev. Stat. § 38-179 (Reissue 2008) defines unprofessional conduct as "...any departure or failure to conform to the standards of acceptable and prevailing practice of a profession of the ethics of the profession, regardless of whether a person, consumer, or entity is injured, or the conduct is likely to deceive or defraud the public or is detrimental to the public interest, including but not limited to...(15) such other acts as may be defined in rules and regulations."

44. Title 172 NAC 101-007.03 of the Regulations Governing the Practice of Nursing defines unprofessional conduct as:

(1) Failure to utilize appropriate judgment in administering safe nursing practice based upon the level of nursing for which the individual is licensed;

(8) Failure to maintain an accurate patient record;

(10) Committing any act which endangers patient safety or welfare.

45. The Defendant's conduct set forth above in paragraphs 1 through 26 constitutes unprofessional conduct which is grounds for discipline.

SIXTH CAUSE OF ACTION

46. Paragraphs 1 through 26 are incorporated herein by reference.

47. Neb. Rev. Stat. § 38-178(23) (2012 Cum. Supp.) provides that a professional credential may be disciplined for unprofessional conduct.

48. Neb. Rev. Stat. § 38-179 (Reissue 2008) defines unprofessional conduct as "...any departure or failure to conform to the standards of acceptable and prevailing practice of a profession of the ethics of the profession, regardless of whether a person, consumer, or entity is injured, or the conduct is likely to deceive or defraud the public or is detrimental to the public interest, including but not limited to...(15) such other acts as may be defined in rules and regulations."

49. Title 172 NAC 101-007.03 of the Regulations Governing the Practice of Nursing defines unprofessional conduct as:

(1) Failure to utilize appropriate judgment in administering safe nursing practice based upon the level of nursing for which the individual is licensed;

- (7) Falsification of patient records;
- (8) Failure to maintain an accurate patient record;
- (10) Committing any act which endangers patient safety or welfare.

50. The Defendant's conduct set forth above in paragraphs 25 and 26 constitutes unprofessional conduct which is grounds for discipline.

PRAYER FOR RELIEF

WHEREFORE, the Plaintiff prays that the Chief Medical Officer set this matter for hearing, order appropriate disciplinary action pursuant to Neb. Rev. Stat. § 38-196 (Reissue 2008) and tax the costs of this action to the Defendant.

STATE OF NEBRASKA, ex rel. JON BRUNING, Attorney General, Plaintiff,

BY: JON BRUNING, #20351 Attorney General

BY:

Lisa K. Anderson, #21845 Assistant Attorney General 2115 State Capitol Lincoln, NE 68509 (402) 471-4593

Attorneys for the Plaintiff.

CERTIFICATE OF SERVICE

COMES NOW the undersigned and certifies that on the 11th day of July, 2014, a

copy of the foregoing AMENDED PETITION FOR DISCIPLINARY ACTION was sent by

first-class, postage prepaid United States mail to the attorney for defendant, Clarence

Mock, Johnson & Mock, 307 N. Oakland Ave., P.O. Box 62, Oakland, NE 68045.

Amh. An

Lisa K. Anderson, #21845

55-3138.1s-3

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THE DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC HEALTH STATE OF NEBRASKA

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for administering IV sedation medication during abortion procedures.

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- c. Defendant documented administering Versed (1 mg/mL) 2.0 IV and Fentanyl (50 mcg/mL) 2.0 IV at 1246;
- d. Defendant documented administering Versed (1 mg/mL) 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 1249;
- e. Defendant documented administering Versed (1 mg/mL) 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 1300;
- f. Defendant documented administering D5%LR with 50 units Pitocin; Defendant did not record the time of administration.
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- a. Patient weighs less than 120 pounds;
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- 14. On April 8 and 9, 2011, Patient #4 underwent a surgical abortion

procedure at the Clinic. The patient's medical record includes the following information:

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- e. 4/2/11: Defendant documented administering Versed (1 mg/mL) .5 IV and Fentanyl (50 mcg/mL) .5 IV at 1245;
- f. 4/2/11: Defendant documented administering Fentanyl (50 mcg/mL) 1.0 IV at 1252.
- 16. On April 2, 2011, Patient #6 underwent a surgical abortion procedure at

the Clinic. The patient's medical record includes the following information:

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- b. Defendant documented administering Versed (1 mg/mL) 2.0 IV and Fentanyl (50 mcg/mL) 2.0 IV at 1055;
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- d. Defendant documented administering Versed (1 mg/mL) .5 IV and Fentanyl (50 mcg/mL) .5 IV at 1420;
- e. Defendant documented administering Versed (1 mg/mL) 1.0 IV at 1424;
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17. Between February 26 and 27, 2011, Patient #7 underwent a surgical abortion procedure at the Clinic. The patient's medical record includes the following information:

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- c. 2/27/11: Defendant documented administering Versed (1 mg/mL)
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 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 958;
- f. 2/27/11: Defendant documented administering Versed (1 mg/mL) 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 1026;
- g. 2/27/11: Defendant documented administering Versed (1 mg/mL) 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 1045
- h. 2/27/11: Defendant documented administering Versed (1 mg/mL) 1.0 IV at 1047;
- i. Defendant documented administering D5LR #2 with 30 units Pitocin IV. The Defendant did record the time of administration.
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- a. Defendant documented administering Versed (1 mg/mL) 2.0 IV and Fentanyl (50 mcg/mL) 2.0 IV at 1013;
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- a. Chart order (2/4/11): titrate to comfort ½ mL Fentanyl and ½ mL Versed q 15 min prn;
- b. 2/4/11: Defendant documented administering Versed (1mg/mL)
 2.0 IV and Fentanyl (50 mcg/mL) 2.0 IV at 938;
- c. 2/4/11: Defendant documented administering Versed (1 mg/mL)
 2.0 IV and Fentanyl (50 mcg/mL) 2.0 IV at 1253;
- d. 2/4/11: Defendant documented administering Versed (1 mg/mL)
 .5 IV and Fentanyl (50 mcg/mL) .5 IV at 1301;
- e. 2/4/11: Defendant documented administering Versed (1 mg/mL) 1.0 IV at 1306.
- 21. On January 30, 2011, Patient #11 underwent a surgical abortion

procedure at the Clinic. The patient's medical record includes the following information:

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- Defendant documented administering Versed (1 mg/mL) 1.0 IV at 810;
- c. Defendant documented administering Versed (1 mg/mL) 1.0 IV and Fentanyl (50 mcg/mL) 1.0 IV at 832;
- d. Defendant documented administering Fentanyl (50 mcg/mL) 1.0 IV below the 832 entry but did not include an administration time.

22. Medication aides and/or patient care technicians staff the Clinic's abortion procedure recovery room. Recovery room staff duties include, but are not limited to, obtaining vitals, checking perineal pads, ambulating patients and providing post op education/instructions. S.H. informed a Department investigator that a licensed health care provider is not present in the recovery room unless there are difficulties with a patient. The Defendant informed a Department investigator that she is in charge of the Clinic staff.

23. The Defendant did not meet the acceptable standard of care for a registered nurse licensed in the State of Nebraska based on the following:

- a. Defendant delegated complex nursing care to unlicensed staff;
- b. A registered nurse may not delegate complex nursing care to unlicensed staff;
- c. Recovery room care for surgical abortion patients in the Clinic is complex nursing care.
- 24. The Defendant violated the scope of practice for a registered nurse by:
 - a. Changing the Pitocin dose set out in the Clinic's standing order without obtaining a new order;
 - b. Administering Versed and Fentanyl using standing orders which do not include an administration frequency;
 - c. Failing to follow Versed and Fentanyl administration frequencies included in medical record chart orders.
 - d. Failing to follow the dosage amounts in the IV sedation standing order.

FIRST CAUSE OF ACTION

25. Paragraphs 1 through 24 are incorporated herein by reference.

26. Neb. Rev. Stat. § 38-178(6)(b) (Reissue 2008) provides that a professional credential may be disciplined for practice of the profession beyond its' authorized scope.

27. The Defendant's act of changing the Pitocin dose set out in the Clinic's standing order without obtaining a new order violates the scope of practice for a registered nurse and is grounds for discipline.

SECOND CAUSE OF ACTION

28. Paragraphs 1 through 24 are incorporated herein by reference.

29. Neb. Rev. Stat. § 38-178(6)(b) (Reissue 2008) provides that a professional credential may be disciplined for practice of the profession beyond its' authorized scope.

30. The Defendant's act of administering Versed and Fentanyl without an ordered administration frequency violates the scope of practice for a registered nurse and is grounds for discipline.

THIRD CAUSE OF ACTION

31. Paragraphs 1 through 24 are incorporated herein by reference.

32. Neb. Rev. Stat. § 38-178(6)(b) (Reissue 2008) provides that a professional credential may be disciplined for practice of the profession beyond its' authorized scope.

33. The Defendant's act of failing to follow Versed and Fentanyl administration frequencies included in medical record chart orders violates the scope of practice for a registered nurse and is grounds for discipline.

FOURTH CAUSE OF ACTION

34. Paragraphs 1 through 24 are incorporated herein by reference.

35. Neb. Rev. Stat. § 38-178(6)(b) (Reissue 2008) provides that a professional credential may be disciplined for practice of the profession beyond its' authorized scope.

36. The Defendant act of failing to follow the dosage amounts in the IV sedation standing order violates the scope of practice for a registered nurse and is grounds for discipline

FIFTH CAUSE OF ACTION

37. Paragraphs 1 through 24 are incorporated herein by reference.

38. Neb. Rev. Stat. § 38-178(6)(d) (Reissue 2008) provides that a professional license may be disciplined for practice of the profession in a pattern of incompetent or negligent conduct.

39. The Defendant's conduct set forth above in paragraphs 1 through 22 constitutes a pattern of negligent conduct which is grounds for discipline.

SIXTH CAUSE OF ACTION

40. Paragraphs 1 through 24 are incorporated herein by reference.

41. Neb. Rev. Stat. § 38-178(10) (Reissue 2008) provides that a professional credential may be disciplined for "permitting, aiding and abetting the practice of a profession or the performance of activities requiring a credential by a person not credentialed to do so."

42. The Defendant's delegation of complex nursing care to unlicensed Clinic staff is grounds for discipline.

SEVENTH CAUSE OF ACTION

43. Paragraphs 1 through 24 are incorporated herein by reference.

44. Neb. Rev. Stat. § 38-178(15) (Reissue 2008) provides that a professional credential may be disciplined for "violations of the Uniform Credentialing Act or the rules and regulations relating to the particular profession.

45. Title 172 NAC 99-004.01C(2)(a)(2f) of the Regulations Governing the Provisions of Nursing Care provides that a registered nurse may not delegate treatments which are complex interventions.

46. The Defendant's delegation of complex nursing care to unlicensed Clinic staff constitutes a violation of the Regulations Governing the Provisions of Nursing Care which is grounds for discipline.

EIGHTH CAUSE OF ACTION

47. Paragraphs 1 through 24 are incorporated herein by reference.

48. Neb. Rev. Stat. § 38-178(23) (Reissue 2008) provides that a professional credential may be disciplined for unprofessional conduct.

49. Neb. Rev. Stat. § 38-179 (Reissue 2008) defines unprofessional conduct as "...any departure or failure to conform to the standards of acceptable and prevailing practice of a profession of the ethics of the profession, regardless of whether a person, consumer, or entity is injured, or the conduct is likely to deceive or defraud the public or is detrimental to the public interest, including but not limited to...(10) Failure to keep and maintain adequate records of treatment or service."

50. The Defendant's failure to document Fentanyl and Pitocin administration times constitutes unprofessional conduct which is grounds for discipline.

NINTH CAUSE OF ACTION

51. Paragraphs 1 through 24 are incorporated herein by reference.

52. Neb. Rev. Stat. § 38-178(23) (Reissue 2008) provides that a professional credential may be disciplined for unprofessional conduct.

53. Neb. Rev. Stat. § 38-179 (Reissue 2008) defines unprofessional conduct as "...any departure or failure to conform to the standards of acceptable and prevailing practice of a profession of the ethics of the profession, regardless of whether a person, consumer, or entity is injured, or the conduct is likely to deceive or defraud the public or is detrimental to the public interest, including but not limited to...(15) such other acts as may be defined in rules and regulations."

54. Title 172 NAC 1201-007.03 of the Regulations Governing the Practice of Nursing defines unprofessional conduct as:

(1) Failure to utilize appropriate judgment in administering safe nursing practice based upon the level of nursing for which the individual is licensed;

(10) Committing any act which endangers patient safety or welfare.

55. The Defendant's conduct set forth above in paragraphs 1 through 22 constitutes unprofessional conduct which is grounds for discipline.

PRAYER FOR RELIEF

WHEREFORE, the Plaintiff prays that the Chief Medical Officer set this matter for hearing, order appropriate disciplinary action pursuant to Neb. Rev. Stat. § 38-196 (Reissue 2008) and tax the costs of this action to the Defendant.

STATE OF NEBRASKA, ex rel. JON BRUNING, Attorney General, Plaintiff,

BY: JON BRUNING, #20351 Attorney General

for An

BY:

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