



I do hereby certify this to be a complete, accurate, and true copy of the document which is on file or is of record in the offices of the Texas Board of Nursing.
Patricia R. Thomas
Executive Director of the Board

BEFORE THE TEXAS BOARD OF NURSING

In the Matter of Registered Nurse §
License Number 658872 §
issued to VIVIEN CABALTICA CHANTANOP §

ORDER OF THE BOARD

On this day, the Texas Board of Nursing, hereinafter referred to as the Board, accepted the voluntary surrender of Registered Nurse License Number 658872, issued to VIVIEN CABALTICA CHANTANOP, hereinafter referred to as Respondent. This action was taken in accordance with Section 301.453(c), Texas Occupations Code.

Respondent waived representation by counsel, informal proceedings, notice and hearing.

The Board makes the following Findings of Fact and Conclusions of Law.

FINDINGS OF FACT

1. Respondent is currently licensed to practice professional nursing in the State of Texas.
2. Respondent waived representation by counsel, informal proceedings, notice and hearing.
3. Respondent received a Baccalaureate Degree from University of Philippines, Manila, Philippines on March 31, 1989. Respondent was licensed to practice professional nursing in the State of Texas in March 9, 1999.
4. Respondent's professional nursing employment history is unknown.
5. In a letter dated January 20, 2012, Respondent was notified by the Board of the following alleged violation of the Nursing Practice Act of the State of Texas:

On or about December 28, 2011, Respondent's license to practice nursing in the State of California was Revoked by the California Board of Registered Nursing. Said Revocation was stayed, and Respondent was placed on Probation for a period of three (3) years.

A copy of the California Board of Registered Nursing Decision and Order dated December 28, 2011, is attached and incorporated, as part of this Order.

6. On January 30, 2012, the Board received a notarized statement from Respondent voluntarily surrendering the right to practice nursing in Texas. A copy of Respondent's notarized statement, dated January 26, 2012, is attached and incorporated herein by reference as part of this Order.

CONCLUSIONS OF LAW

1. Pursuant to Texas Occupations Code, Sections 301.451-301.555, the Board has jurisdiction over this matter.
2. Notice was served in accordance with law.
3. The evidence received is sufficient to prove violation of Section 301.452(b)(8), Texas Occupations Code.
4. Under Section 301.453(c), Texas Occupations Code, the Board has the authority to accept the voluntary surrender of a license.
5. Under Section 301.453(d), Texas Occupations Code, the Board may impose conditions for reinstatement of licensure.
6. Any subsequent reinstatement of this license will be controlled by Section 301.452 (b), Texas Occupations Code, and 22 TAC §§213.26-.29, and any amendments thereof in effect at the time of the reinstatement.

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ORDER

NOW, THEREFORE, IT IS ORDERED that the voluntary surrender of Registered Nurse License Number 658872, heretofore issued to VIVIEN CABALTICA CHANTANOP, to practice professional nursing in the State of Texas, is accepted by the Executive Director on behalf of the Texas Board of Nursing. In connection with this acceptance, the Board imposes the following conditions:

1. RESPONDENT SHALL NOT practice professional nursing, use the title of "registered nurse" or the abbreviation "RN" or wear any insignia identifying herself as a registered nurse or use any designation which, directly or indirectly, would lead any person to believe that RESPONDENT is a registered nurse during the period in which the license is surrendered.
2. RESPONDENT SHALL NOT petition for reinstatement of licensure until: one (1) year has elapsed from the date of this Order.
3. Upon petitioning for reinstatement, RESPONDENT SHALL satisfy all then existing requirements for relicensure.

IT IS FURTHER AGREED and ORDERED that this Order SHALL be applicable to Respondent's nurse licensure compact privileges, if any, to practice professional nursing in the State of Texas.

Effective this 30th day of January, 2012.

TEXAS BOARD OF NURSING

By:



Katherine A. Thomas, MN, RN, FAAN
Executive Director on behalf
of said Board

BEFORE THE
BOARD OF REGISTERED NURSING
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against:

VIVIEN CABALTICA CHANTANOP
17410 Los Amigos Circle
Fountain Valley, CA 92708

Registered Nurse License No. 558790

Respondent

Case No. 2011-384

OAH No. 2010120791

DECISION AND ORDER

The attached Stipulated Settlement and Disciplinary Order is hereby adopted by the Board of Registered Nursing, Department of Consumer Affairs, as its Decision in this matter.

This Decision shall become effective on December 28, 2011.

IT IS SO ORDERED November 28, 2011.

I hereby certify the
foregoing to be a true copy
of the documents on file in our office.

BOARD OF REGISTERED NURSING

Louise R. Bailey M.Ed., RN
Louise R. Bailey, M. ED., RN
Executive Officer



Jeanne K. Heaver

President
Board of Registered Nursing
Department of Consumer Affairs
State of California

1 KAMALA D. HARRIS
Attorney General of California
2 LINDA K. SCHNEIDER
Supervising Deputy Attorney General
3 SHERRY L. LEDAKIS
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Attorneys for Complainant

8
9 **BEFORE THE**
BOARD OF REGISTERED NURSING
DEPARTMENT OF CONSUMER AFFAIRS
10 **STATE OF CALIFORNIA**

11 In the Matter of the Accusation Against:

Case No. 2011-384

12 **VIVIEN CABALTICA CHANTANOP**
13 17410 Los Amigos Circle
14 Fountain Valley, CA 92708

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

15 Registered Nurse License No. 558790

16 Respondent.

17
18 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
19 entitled proceedings that the following matters are true:

20 PARTIES

21 1. Louise R. Bailey, M.Ed., RN (Complainant) is the Executive Officer of the Board of
22 Registered Nursing. She brought this action solely in her official capacity and is represented in
23 this matter by Kamala D. Harris, Attorney General of the State of California, by Sherry L.
24 Ledakis, Deputy Attorney General.

25 2. Respondent Vivien Cabaltica Chantanop (Respondent) is represented in this
26 proceeding by attorney Adam B. Brown, whose address is: Law Offices of Brown & Brown
27 3848 Carson St., Suite 206, Torrance, CA 90503.

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1 3. On or about August 16, 1999, the Board of Registered Nursing issued Registered
2 Nurse License No. 558790 to Vivien Cabaltica Chantanop (Respondent). The Registered Nurse
3 License was in full force and effect at all times relevant to the charges brought in Accusation No.
4 2011-384 and will expire on September 30, 2012, unless renewed.

5 JURISDICTION

6 4. Accusation No. 2011-384 was filed before the Board of Registered Nursing (Board),
7 Department of Consumer Affairs, and is currently pending against Respondent. The Accusation
8 and all other statutorily required documents were properly served on Respondent on October 26,
9 2010. Respondent timely filed her Notice of Defense contesting the Accusation. A copy of
10 Accusation No. 2011-384 is attached as exhibit A and incorporated herein by reference.

11 ADVISEMENT AND WAIVERS

12 5. Respondent has carefully read, fully discussed with counsel, and understands the
13 charges and allegations in Accusation No. 2011-384. Respondent has also carefully read, fully
14 discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary
15 Order.

16 6. Respondent is fully aware of her legal rights in this matter, including the right to a
17 hearing on the charges and allegations in the Accusation; the right to confront and cross-examine
18 the witnesses against her; the right to present evidence and to testify on her own behalf; the right
19 to the issuance of subpoenas to compel the attendance of witnesses and the production of
20 documents; the right to reconsideration and court review of an adverse decision; and all other
21 rights accorded by the California Administrative Procedure Act and other applicable laws.

22 7. Respondent voluntarily, knowingly, and intelligently waives and gives up each and
23 every right set forth above.

24 CULPABILITY

25 8. Respondent admits the truth of each and every charge and allegation in Accusation
26 No. 2011-384.

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1 Upon successful completion of probation, Respondent's license shall be fully restored.

2 3. **Report in Person.** Respondent, during the period of probation, shall
3 appear in person at interviews/meetings as directed by the Board or its designated representatives.

4 4. **Residency, Practice, or Licensure Outside of State.** Periods of residency
5 or practice as a registered nurse outside of California shall not apply toward a reduction of this
6 probation time period. Respondent's probation is tolled, if and when she resides outside of
7 California. Respondent must provide written notice to the Board within 15 days of any change of
8 residency or practice outside the state, and within 30 days prior to re-establishing residency or
9 returning to practice in this state.

10 Respondent shall provide a list of all states and territories where she has ever been licensed
11 as a registered nurse, vocational nurse, or practical nurse. Respondent shall further provide
12 information regarding the status of each license and any changes in such license status during the
13 term of probation. Respondent shall inform the Board if she applies for or obtains a new nursing
14 license during the term of probation.

15 5. **Submit Written Reports.** Respondent, during the period of probation,
16 shall submit or cause to be submitted such written reports/declarations and verification of actions
17 under penalty of perjury, as required by the Board. These reports/declarations shall contain
18 statements relative to Respondent's compliance with all the conditions of the Board's Probation
19 Program. Respondent shall immediately execute all release of information forms as may be
20 required by the Board or its representatives.

21 Respondent shall provide a copy of this Decision to the nursing regulatory agency in every
22 state and territory in which she has a registered nurse license.

23 6. **Function as a Registered Nurse.** Respondent, during the period of
24 probation, shall engage in the practice of registered nursing in California for a minimum of 24
25 hours per week for 6 consecutive months or as determined by the Board.

26 For purposes of compliance with the section, "engage in the practice of registered nursing"
27 may include, when approved by the Board, volunteer work as a registered nurse, or work in any
28 non-direct patient care position that requires licensure as a registered nurse.

1 The Board may require that advanced practice nurses engage in advanced practice nursing
2 for a minimum of 24 hours per week for 6 consecutive months or as determined by the Board.

3 If Respondent has not complied with this condition during the probationary term, and
4 Respondent has presented sufficient documentation of her good faith efforts to comply with this
5 condition, and if no other conditions have been violated, the Board, in its discretion, may grant an
6 extension of Respondent's probation period up to one year without further hearing in order to
7 comply with this condition. During the one year extension, all original conditions of probation
8 shall apply.

9 **7. Employment Approval and Reporting Requirements.** Respondent shall
10 obtain prior approval from the Board before commencing or continuing any employment, paid or
11 voluntary, as a registered nurse. Respondent shall cause to be submitted to the Board all
12 performance evaluations and other employment related reports as a registered nurse upon request
13 of the Board.

14 Respondent shall provide a copy of this Decision to her employer and immediate
15 supervisors prior to commencement of any nursing or other health care related employment.

16 In addition to the above, Respondent shall notify the Board in writing within seventy-two
17 (72) hours after she obtains any nursing or other health care related employment. Respondent
18 shall notify the Board in writing within seventy-two (72) hours after she is terminated or
19 separated, regardless of cause, from any nursing, or other health care related employment with a
20 full explanation of the circumstances surrounding the termination or separation.

21 **8. Supervision.** Respondent shall obtain prior approval from the Board
22 regarding Respondent's level of supervision and/or collaboration before commencing or
23 continuing any employment as a registered nurse, or education and training that includes patient
24 care.

25 Respondent shall practice only under the direct supervision of a registered nurse in good
26 standing (no current discipline) with the Board of Registered Nursing, unless alternative methods
27 of supervision and/or collaboration (e.g., with an advanced practice nurse or physician) are
28 approved.

1 Respondent's level of supervision and/or collaboration may include, but is not limited to the
2 following:

3 (a) Maximum - The individual providing supervision and/or collaboration is present in
4 the patient care area or in any other work setting at all times.

5 (b) Moderate - The individual providing supervision and/or collaboration is in the patient
6 care unit or in any other work setting at least half the hours Respondent works.

7 (c) Minimum - The individual providing supervision and/or collaboration has person-to-
8 person communication with Respondent at least twice during each shift worked.

9 (d) Home Health Care - If Respondent is approved to work in the home health care
10 setting, the individual providing supervision and/or collaboration shall have person-to-person
11 communication with Respondent as required by the Board each work day. Respondent shall
12 maintain telephone or other telecommunication contact with the individual providing supervision
13 and/or collaboration as required by the Board during each work day. The individual providing
14 supervision and/or collaboration shall conduct, as required by the Board, periodic, on-site visits to
15 patients' homes visited by Respondent with or without Respondent present.

16 **9. Employment Limitations.** Respondent shall not work for a nurse's
17 registry, in any private duty position as a registered nurse, a temporary nurse placement agency, a
18 traveling nurse, or for an in-house nursing pool.

19 Respondent shall not work for a licensed home health agency as a visiting nurse unless the
20 registered nursing supervision and other protections for home visits have been approved by the
21 Board. Respondent shall not work in any other registered nursing occupation where home visits
22 are required.

23 Respondent shall not work in any health care setting as a supervisor of registered nurses.
24 The Board may additionally restrict Respondent from supervising licensed vocational nurses
25 and/or unlicensed assistive personnel on a case-by-case basis.

26 Respondent shall not work as a faculty member in an approved school of nursing or as an
27 instructor in a Board approved continuing education program.

28 Respondent shall work only on a regularly assigned, identified and predetermined

1 worksite(s) and shall not work in a float capacity.

2 If Respondent is working or intends to work in excess of 40 hours per week, the Board may
3 request documentation to determine whether there should be restrictions on the hours of work.

4 10. **Complete a Nursing Course(s).** Respondent, at her own expense, shall
5 enroll and successfully complete a course(s) relevant to the practice of registered nursing no later
6 than six months prior to the end of her probationary term.

7 Respondent shall obtain prior approval from the Board before enrolling in the course(s).
8 Respondent shall submit to the Board the original transcripts or certificates of completion for the
9 above required course(s). The Board shall return the original documents to Respondent after
10 photocopying them for its records.

11 11. **Cost Recovery.** Respondent shall pay to the Board costs associated with
12 its investigation and enforcement pursuant to Business and Professions Code section 125.3 in the
13 amount of \$9,873.25. Respondent shall be permitted to pay these costs in a payment plan
14 approved by the Board, with payments to be completed no later than three months prior to the end
15 of the probation term.

16 If Respondent has not complied with this condition during the probationary term, and
17 Respondent has presented sufficient documentation of her good faith efforts to comply with this
18 condition, and if no other conditions have been violated, the Board, in its discretion, may grant an
19 extension of Respondent's probation period up to one year without further hearing in order to
20 comply with this condition. During the one year extension, all original conditions of probation
21 will apply.

22 12. **Violation of Probation.** If Respondent violates the conditions of her
23 probation, the Board after giving Respondent notice and an opportunity to be heard, may set aside
24 the stay order and impose the stayed discipline (revocation/suspension) of Respondent's license.

25 If during the period of probation, an accusation or petition to revoke probation has been
26 filed against Respondent's license or the Attorney General's Office has been requested to prepare
27 an accusation or petition to revoke probation against Respondent's license, the probationary

28 ///

1 Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order
2 of the Board of Registered Nursing.

3
4 DATED: 8/1/11 *Vivien C. Chantano*
5 VIVIEN CABALTICA CHANTANOP
6 Respondent

7 I have read and fully discussed with Respondent Vivien Cabaltica Chantano the terms and
8 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.
9 I approve its form and content.

10 DATED: 8-1-11 *Adam B.*
11 ADAM B. BROWN
12 Attorney for Respondent

13 ENDORSEMENT

14 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully
15 submitted for consideration by the Board of Registered Nursing of the Department of Consumer
16 Affairs.

17 Dated: August 1, 2011
18 Respectfully submitted,
19 KAMALA D. HARRIS
20 Attorney General of California
21 LINDA K. SCHNEIDER
22 Supervising Deputy Attorney General
23 *Sherry L. Ledakis*
24 SHERRY L. LEDAKIS
25 Deputy Attorney General
26 Attorneys for Complainant

27 SD2010702110

Exhibit A

Accusation No. 2011-384

1 EDMUND G. BROWN JR.
Attorney General of California
2 LINDA K. SCHNEIDER
Supervising Deputy Attorney General
3 ANTOINETTE B. CINCOTTA
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Attorneys for Complainant

9 **BEFORE THE**
BOARD OF REGISTERED NURSING
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

Case No. 2011-384

13 **VIVIEN CABALTICA CHANTANOP**
17410 Los Amigos Circle
14 Fountain Valley, CA 92708

A C C U S A T I O N

15 **Registered Nurse License No. 558790**

16 **Respondent.**

17 Complainant alleges:

18 **PARTIES**

19 1. Louise R. Bailey, M.Ed., RN (Complainant) brings this Accusation solely in her
20 official capacity as the Interim Executive Officer of the Board of Registered Nursing (Board),
21 Department of Consumer Affairs.

22 2. On or about August 16, 1999, the Board of Registered Nursing issued Registered
23 Nurse License Number 558790 to Vivien Cabaltica Chantanop (Respondent). The Registered
24 Nurse License was in full force and effect at all times relevant to the charges brought herein and
25 will expire on September 30, 2012, unless renewed.

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27 ///

28 ///

JURISDICTION

3. This Accusation is brought before the Board under the authority of the following laws. All section references are to the Business and Professions Code (Code) unless otherwise indicated.

4. Section 2750 of the Code provides, in pertinent part, that the Board may discipline any licensee, including a licensee holding a temporary or an inactive license, for any reason provided in Article 3 (commencing with section 2750) of the Nursing Practice Act.

5. Section 2764 of the Code provides, in pertinent part, that the expiration of a license shall not deprive the Board of jurisdiction to proceed with a disciplinary proceeding against the licensee or to render a decision imposing discipline on the license.

6. Section 2811(b) of the Code provides, in pertinent part, that the Board may renew an expired license at any time within eight years after the expiration.

STATUTORY AUTHORITY

7. Section 2761 of the Code states:

"The board may take disciplinary action against a certified or licensed nurse or deny an application for a certificate or license for any of the following:

"(a) Unprofessional conduct, which includes, but is not limited to, the following:

"(1) Incompetence, or gross negligence in carrying out usual certified or licensed nursing functions.

""

8. Section 2725 of the Code states:

"(a) In amending this section at the 1973-74 session, the Legislature recognizes that nursing is a dynamic field, the practice of which is continually evolving to include more sophisticated patient care activities. It is the intent of the Legislature in amending this section at the 1973-74 session to provide clear legal authority for functions and procedures that have common acceptance and usage. It is the legislative intent also to recognize the existence of overlapping functions between physicians and registered nurses and to permit additional sharing of functions within organized health care systems that provide for collaboration between physicians and

1 registered nurses. These organized health care systems include, but are not limited to, health
2 facilities licensed pursuant to Chapter 2 (commencing with Section 1250) of Division 2 of the
3 Health and Safety Code, clinics, home health agencies, physicians' offices, and public or
4 community health services.

5 "(b) The practice of nursing within the meaning of this chapter [the Nursing Practice Act]
6 means those functions, including basic health care, that help people cope with difficulties in daily
7 living that are associated with their actual or potential health or illness problems or the treatment
8 thereof, and that require a substantial amount of scientific knowledge or technical skill, including
9 all of the following:

10 "(1) Direct and indirect patient care services that ensure the safety, comfort, personal
11 hygiene, and protection of patients; and the performance of disease prevention and restorative
12 measures.

13 "(2) Direct and indirect patient care services, including, but not limited to, the
14 administration of medications and therapeutic agents, necessary to implement a treatment, disease
15 prevention, or rehabilitative regimen ordered by and within the scope of licensure of a physician,
16 dentist, podiatrist, or clinical psychologist, as defined by Section 1316.5 of the Health and Safety
17 Code.

18 "(3)

19 "(4) Observation of signs and symptoms of illness, reactions to treatment, general
20 behavior, or general physical condition, and (A) determination of whether the signs, symptoms,
21 reactions, behavior, or general appearance exhibit abnormal characteristics, and (B)
22 implementation, based on observed abnormalities, of appropriate reporting, or referral, or
23 standardized procedures, or changes in treatment regimen in accordance with standardized
24 procedures, or the initiation of emergency procedures.

25 "(c) 'Standardized procedures,' as used in this section, means either of the following:

26 "(1) Policies and protocols developed by a health facility licensed pursuant to Chapter 2
27 (commencing with Section 1250) of Division 2 of the Health and Safety Code through
28 collaboration among administrators and health professionals including physicians and nurses.

1 COST RECOVERY

2 11. Section 125.3 of the Code provides, in pertinent part, that the
3 Board/Registrar/Director may request the administrative law judge to direct a licentiate found to
4 have committed a violation or violations of the licensing act to pay a sum not to exceed the
5 reasonable costs of the investigation and enforcement of the case.

6 FACTS

7 12. In April 2007, Respondent was employed at Fairview Developmental Center as a
8 Registered Nurse. Respondent was assigned to Program 1, Residence 109, half-time on the night
9 (NOC) shift. Program 1 is a continuum of medical and nursing services that includes acute care
10 and skilled nursing care services. Patients served have a diagnosed medical/physical condition
11 which requires a greater intensity of nursing care and medical intervention. Most patients in
12 Program 1 require assistance in all areas of personal care. Nearly all require the use of adaptive
13 equipment and/or staff assistance for translocation and mobility. The program provides short-
14 term care on the Acute Care Unit, Residence 109, for patients who are acutely ill, requiring IV
15 therapy and other interventions.

16 13. On the workshift that began April 17, 2007, 2230 (10:30 p.m.) and ended 0630 (6:30
17 a.m.) on April 18, 2007, Respondent was responsible for providing care to patient Alice C.
18 Patient Alice C had been transferred to Fairview Developmental Center's acute care unit,
19 Residence 109 at about 2335 hours with the diagnosis of dehydration, fecal impaction, fever, and
20 distended abdomen. Bilateral 2-point soft tie restraints were applied to Alice's wrists at 0000
21 hours (12:00 a.m.) on April 18, 2007, to prevent her from pulling out her intravenous (IV) tubing.

22 14. Respondent noted in Alice C's patient chart that she checked Alice's restraints at
23 0030, 0100, 0130, 0150, 0200, 0230, 0300, 0330, and 0350 hours on April 18, 2007. Respondent
24 documented that Alice C. was asleep at all of these times with the exception of 0200 hours when
25 she documented that Alice C. was awake. Respondent documented that she released Alice C.'s
26 restraints at 0150 hours, reapplied them at 0200 hours, and then released them again at 0350
27 hours.

28 ///

1 15. On April 18, 2007, at 0355 hours, Nurse JFW observed Alice C. not breathing and
2 with no pulse. Nurse JFW and Respondent began CPR on Alice C.

3 16. At 0357 hours, Nurse JFW called a "77" Code (a code used by Fairfield Development
4 Center to initiate a medical emergency.)

5 17. At 0400 hours, Dr. L found the patient cool to touch, not breathing and her jaw
6 locked. These are signs of rigor mortis.¹ Rigor mortis does not occur within 10 minutes after
7 death. Rigor mortis usually sets in several hours after death and the livor mortis (lividity) begins
8 no earlier than 30 minutes after death.²

9 18. At 0408 hours, a Costa Mesa Fire Department Firefighter Paramedic attached a cardio
10 monitor to Alice C. and assessed her. The Pre-Hospital Care Report completed by the CMFD
11 reported the patient as being cool to the touch and having rigor mortis to her jaw and lividity to
12 her back and legs. The paramedic team determined that Alice was not a candidate for
13 continuance of CPR. The investigation confirmed that Alice C's cause of death was mechanical
14 asphyxiation from vomitus.

15 19. Respondent made a number of inconsistent statements during the medical emergency
16 and investigational interviews following Alice C's death, including:

17 (a) Respondent stated the last time she released the patient's restraints was at 0315 on April
18 18, 2007. During the same interview, Respondent stated that she released the restraints
19 at 0350 on April 18, 2007.

20 (b) Respondent stated that the light in the patient's room was turned off at 0330 because the
21 patient was awake at that time. Yet, the Medical/Treatment Intervention Form

22
23 ¹ Rigor mortis (lit. death stiffness) is one of the recognizable signs of death (Latin mors,
24 mortis meaning "of death") that is caused by a chemical change in the muscles after death,
25 causing the limbs of the corpse to become stiff (Latin rigor) and difficult to move or manipulate.
In humans it commences after about 3 hours, reaches maximum stiffness after 12 hours, and
gradually dissipates until approximately 72 hours (3 days) after death.

26 ² Livor mortis or postmortem lividity (Latin: livor—bluish color, mortis—of death) or
27 hypostasis (Greek: sediment), one of the signs of death, is a settling of the blood in the lower
28 (dependent) portion of the body, causing a purplish red discoloration of the skin: when the heart is
no longer agitating the blood, heavy red blood cells sink through the serum by action of gravity.
This discoloration does not occur in the areas of the body that are in contact with the ground or
another object, as the capillaries are compressed.

1 completed by Respondent documents that the patient was asleep when the restraints
2 were checked at 0330.

3 (c) Respondent stated that the light was turned off in the patient's room at approximately
4 0300 or shortly thereafter.

5 (d) Respondent was questioned by the CMFD about the last time the patient was checked.
6 Nurse V (LVN) heard Respondent state that the last time the patient was checked was
7 0230. Nurse V heard Respondent correct the time by stating the patient was last
8 checked at 0330.

9 (e) The Pre-Hospital Care Report completed by the CMFD notes that the patient was last
10 seen at approximately 0230-0300 on April 18, 2007.

11 (f) Respondent was asked if the patient was repositioned to prevent aspiration after the time
12 the patient first vomited at 0350 on April 18, 2007. Respondent stated that she did not
13 reposition the patient. Then, when asked by the Supervising Registered Nurse the same
14 question, Respondent stated that she did reposition the patient after she first vomited at
15 0350 on April 18, 2007.

16 (g) Respondent was further interviewed and stated that the patient vomited at 0350 and
17 again at 0355.

18 (h) Dr. L was interviewed and stated that when he arrived, he interviewed the nurse caring
19 for the patient and the nurse told him that the patient had one episode of vomiting with
20 blood at 0300 or 0315 hours and that the nurse had cleaned it. Dr. L also stated that the
21 nurse (Respondent) told him that the patient had a second episode of vomiting with
22 blood approximately five minutes before the "Code 77."

23 (i) Respondent was interviewed and stated that she checked on the patient more often than
24 every 30 minutes, and that the patient was checked every 15 minutes. Documentation
25 reflects that the patient was checked every 30 minutes, not every 15 minutes.

26 (j) Respondent was questioned by the Supervising Registered Nurse as to why Respondent
27 did not notify the physician that the patient had vomited. Respondent stated that she felt
28 that the patient was okay.

1 CAUSE FOR DISCIPLINE

2 (Unprofessional Conduct: Gross Negligence and/or Incompetence)

3 20. Respondent is subject to disciplinary action under section 2761, subdivision (a)(1) for
4 unprofessional conduct in that she demonstrated gross negligence and/or incompetence in the care
5 and treatment of Alice C. as set forth in paragraphs 12 through 19, above, which are incorporated
6 here by this reference. In particular, Respondent:

7 21. Failed to follow policy and procedures with regard to the proper and accurate
8 documentation of her care and treatment of Alice C.

9 22. Failed to follow policy and procedures with regard to her communication with
10 medical and emergency personnel concerning her care and treatment of the patient;

11 23. Failed to follow policy and procedures with regard to Changes in Medical Condition,
12 in violation of Policy 5.6.2, concerning her care and treatment of the patient by failing to report
13 the fact that the patient vomited, which was a change in her medical condition; and

14 24. Failed to follow policy and procedures with regard to Supervision of Clients in
15 violation of Policy 5.5.3, in her care and treatment of Alice C. as the patient had died hours prior
16 to the discovery of the patient's death.

17 PRAYER

18 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
19 and that following the hearing, the Board of Registered Nursing issue a decision:

20 1. Revoking or suspending Registered Nurse License Number 558790 issued to Vivien
21 Cabaltica Chantanop;

22 2. Ordering Vivien Cabaltica Chantanop to pay the Board the reasonable costs of the
23 investigation and enforcement of this case, pursuant to Code section 125.3;

24 3. Taking such other and further action as deemed necessary and proper.

25 DATED: 10/26/10

Louise R. Bailey
26 LOUISE R. BAILEY, M.ED., RN
Interim Executive Officer
27 Board of Registered Nursing
Department of Consumer Affairs
28 State of California
Complainant

JANUARY 26, 2012

TO: PAUL LONGORIA

I AM SURRENDERING MY TEXAS
R.N. LICENSE# 65 88 72 EXPIRED AUGUST 2010.

SINCERELY YOURS,

Vivien C. Chantano
VIVIEN CHANTANOP

[REDACTED]
[REDACTED]

17410 LOS AMIGOS CIRCLE
FOUNTAIN VALLEY, CA 92708

Vivien C. Chantano
VIVIEN CHANTANOP

CALIFORNIA ALL-PURPOSE ACKNOWLEDGEMENT

State of California

County of Orange

On 01-26-12 before me Umang G. Daraniya, Notary Public, personally appeared

Vivian Chantana, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) ~~is/are~~ subscribed to the within instrument and acknowledged to me that he/~~she~~/they executed the same in his/~~her~~/their authorized capacity(ies), and that by his/~~her~~/their signature(s) on the instrument the person(s), or the entities upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature *Umang G. Daraniya* (Seal)

Name: Umang G. Daraniya

My Commission Expires: March 18, 2013

