



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.
Katherine A. Thomas
Executive Director of the Board

BEFORE THE TEXAS BOARD OF NURSING

In the Matter of Registered Nurse § AGREED
License Number 644485 §
issued to CHRISTINE MORRISON § ORDER

On this day the Texas Board of Nursing, hereinafter referred to as the Board, considered the matter of CHRISTINE MORRISON, Registered License Number 644485, hereinafter referred to as Respondent.

Information received by the Board produced evidence that Respondent may have violated Section 301.452(b)(9),(10),(12)&(13), Texas Occupations Code. Respondent waived formal contested case proceedings, and agreed to the entry of this Order offered on March 29, 2010, by Katherine A. Thomas, MN, RN, Executive Director, subject to ratification by the Board.

FINDINGS OF FACT

1. Prior to the institution of Agency proceedings, notice of the matters specified below in these Findings of Fact was served on Respondent and Respondent was given an opportunity to show compliance with all requirements of the law for retention of the license.
2. Respondent waived informal proceedings, notice and hearing, and agreed to the entry of this Order.
3. Respondent holds a license to practice professional nursing in the State of Texas which is currently suspended.
4. Respondent received an Associate Degree in Nursing from Houston Community College, Houston, Texas, in May 1997, a Baccalaureate Degree in Nursing from The University of Texas, Houston, Texas, in May 2001 and a Masters in Nursing from The University of Texas, Houston, Texas, in May 2005. Respondent completed a Nurse Anesthetist Program from The University of Texas, Health Science Center, Houston, Texas, on May 5, 2005. Respondent was licensed to practice professional nursing in the State of Texas on August 5, 1997. Respondent received authorization to practice as Certified Registered Nurse Anesthetist on May 16, 2005.

5. Respondent's professional nursing employment history includes:

1997 - 1998	Staff Nurse	Houston Northwest Medical Center Houston, Texas
1997 - 1999	Staff Nurse	Memorial Southwest Hospital Houston, Texas
1999 - 2001	Staff Nurse	Memorial-Hermann Memorial City Hospital Houston, Texas
2001 - 2003	Staff Nurse	St. Luke's Episcopal Hospital Houston, Texas
2004	Unknown	
01/05- 10/06	CRNA	NAM Inc. Houston, Texas
03/07 - 06/08	RN Coordinator	Memorial-Hermann Memorial City Hospital Houston, Texas
06/08 - 09/08	CRNA	Metrowest Anesthesia Care Houston, Texas
10/08 - 10/27/08	CRNA	Rosebud Indian Health Services Rosebud, South Dakota
11/08 - 12/31/09	CRNA	Renaissance Surgery Center Humble, Texas
01/09 - 08/09	CRNA	Alliance Recruiting Resources Kingwood, Texas
05/09 - 06/09	CRNA	Northstar Anesthesia Arlington, Texas
09/09 - Present	unknown	

6. On February 9, 2010, Respondent's license to practice professional nursing in the State of Texas was Suspended by the Texas Board of Nursing through order of the Eligibility and Disciplinary Committee of the Board based on information and evidence received pursuant to the authority found in Texas Occupations Code, sec. 301.455. A copy of the Order of Temporary Suspension is incorporated by reference as part of this Order.

7. On February 22, 2010, a probable cause hearing was conducted at the State Office of Administrative Hearings in Docket No. 507-10-2618. At the close of the hearing, Respondent stipulated that Staff had met its burden to establish probable cause for the Temporary Suspension as required by section 301.455 and an order was entered by the administrative law judge continuing the Temporary Suspension issued on February 9, 2010.
8. At the time of the initial incidents in Findings of Fact Numbers Nine (9) and Ten (10), Respondent was employed as a CRNA with NAM, Inc., Houston, Texas, and on assignment with Memorial City Hospital, Houston, Texas, and had been employed by NAM, Inc. for one (1) year and eight (8) months.
9. During September 2006, while employed as a Certified Registered Nurse Anesthetist (CRNA) with Memorial City Hospital, Houston, Texas, Respondent misappropriated Fentanyl, Demerol, and Propofol belonging to the facility and/or the patients thereof, in that she admitted to the misappropriation of the medications for her own use. Possession of Demerol and Fentanyl is prohibited by Chapter 481 of the Texas Health & Safety Code (Controlled Substances Act) and the use of Propofol without a prescription is prohibited by Chapter 483 of the Texas Health & Safety Code (Dangerous Drug Act). Respondent's conduct was likely to defraud the facility and patients of the cost of the medications.
10. During September 2006, while employed as a CRNA with Memorial City Hospital, Houston, Texas, Respondent engaged in the intemperate use of Fentanyl, Demerol, and Propofol, in that Respondent admitted to diverting the medications for her own use. Possession of Demerol and Fentanyl is prohibited by Chapter 481 of the Texas Health & Safety Code (Controlled Substances Act) and the use of Propofol without a prescription is prohibited by Chapter 483 of the Texas Health & Safety Code (Dangerous Drug Act). The use of Demerol, Fentanyl, and Propofol by a Registered Nurse, while subject to call or duty, could impair the nurse's ability to recognize subtle signs, symptoms or changes in the patient's condition, and could impair the nurse's ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.
11. On or about March 17, 2009, while employed as a CRNA with Northstar Anesthesia, Arlington, Texas, and on assignment with Spring Branch Medical Center, Houston, Texas, Respondent engaged in the intemperate use of Propofol in that while on duty she was found unconscious in the restroom with a 10cc syringe containing a white solution and she admitted to the use of Propofol. The use of Propofol without a prescription is prohibited by Chapter 483 of the Texas Health & Safety Code (Dangerous Drug Act). The use of Propofol by a Registered Nurse, while subject to call or duty, could impair the nurse's ability to recognize subtle signs, symptoms or changes in the patient's condition, and could impair the nurse's ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.

12. On or about March 17, 2009, while employed as a CRNA with Northstar Anesthesia, Arlington, Texas, and on assignment with Spring Branch Medical Center, Houston, Texas, Respondent lacked fitness to practice nursing in that while on duty she was found unconscious in the restroom and taken to the emergency department. Respondent was later transported to a chemical dependency treatment facility for evaluation and treatment. While at this facility Respondent was again found unconscious in the restroom with two (2) vials of Propofol in her possession. The use of Propofol without a prescription is prohibited by Chapter 483 of the Texas Health & Safety Code (Dangerous Drug Act). The use of Propofol by a Registered Nurse, while subject to call or duty, could impair the nurse's ability to recognize subtle signs, symptoms or changes in the patient's condition, and could impair the nurse's ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.
13. On or about March 17, 2009, while employed as a CRNA with Northstar Anesthesia, Arlington, Texas, and on assignment with Spring Branch Medical Center, Houston, Texas, Respondent misappropriated Propofol, Demerol, Versed, Dilaudid, Zofran, and Fentanyl belonging to the facility and/or the patients thereof. Possession of Demerol, Versed, Dilaudid, and Fentanyl is prohibited by Chapter 481 of the Texas Health & Safety Code (Controlled Substances Act) and possession of Propofol and Zofran is prohibited by Chapter 483 of the Texas Health & Safety Code (Dangerous Drug Act). Respondent's conduct was likely to defraud the facility and patients of the cost of the medications.
14. On or about August 7, 2009, while employed as a CRNA with Alliance Recruiting Resources, Kingwood, Texas, and on assignment with Pain Resources, Inc., The Woodlands, Texas, Respondent misappropriated thirty-five (35) vials of Propofol. The incident was reported to the Montgomery County Sheriff's Department, Conroe, Texas. During her shift as a CRNA, in which Respondent controlled access to a cabinet containing Propofol, all the inventoried vials of Propofol had been removed and the cabinet was empty. Respondent admitted to taking two (2) boxes of Propofol for her assigned patients on that day which would have far exceeded any known therapeutic need. Possession of Propofol without a prescription is prohibited by Chapter 483 of the Texas Health & Safety Code (Dangerous Drug Act). Respondent's conduct was likely to defraud the facility and patients of the cost of the medications.
15. On or about August 7, 2009, while employed as a CRNA with Alliance Recruiting Resources, Kingwood, Texas, and on assignment with Pain Resources, Inc., The Woodlands, Texas, Respondent lacked fitness to practice in that while on duty she was observed going to the restroom between cases and a staff member found a syringe with Propofol after Respondent's restroom break, she had slurred speech, and refused to have staff search her duffle bag. Respondent's conduct could have affected her ability to recognize subtle signs, symptoms or changes in the patient's condition, and could have affected her ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.

16. On or about August 7, 2009, while employed as a CRNA with Alliance Recruiting Resources, Kingwood, Texas, and on assignment with Pain Resources, Inc., The Woodlands, Texas, Respondent engaged in the intemperate use of Propofol while on duty that resulted in the incident described in Charge VIII. The use of Propofol without a prescription is prohibited by Chapter 483 of the Texas Health & Safety Code (Dangerous Drug Act). The use of Propofol by a Registered Nurse, while subject to call or duty, could impair the nurse's ability to recognize subtle signs, symptoms or changes in the patient's condition, and could impair the nurse's ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.
17. On or about August 7, 2009, while employed as a CRNA with Alliance Recruiting Resources, Kingwood, Texas, and on assignment with Pain Resources, Inc., The Woodlands, Texas, Respondent failed to accurately and completely document the anesthesia care she provided to ten (10) patients. Respondent documented the incorrect dates of the procedure, she failed to document the age, weight, height, medications (Propofol and Lidocaine) given, and her handwriting was progressively less legible. Respondent's conduct resulted in an inaccurate, incomplete medical record and was likely to deceive subsequent care givers who relied on the information while providing care to the patient.
18. On or about August 7, 2009, while employed as a CRNA with Alliance Recruiting Resources, Kingwood, Texas, and on assignment with Pain Resources, Inc., The Woodlands, Texas, Respondent made false entries in the Anesthesia Record for Patient Medical Record Number 2316, in that she documented information regarding the patient's procedure, including the medications given, when in fact the patient did not have the procedure done on that date. Respondent's conduct resulted in an inaccurate medical record and was likely to deceive subsequent care givers who relied on the information while providing care to the patient.
19. Subsequent to her March 2009 relapse, the Respondent states that she entered into and successfully completed an intensive rehabilitation program at an inpatient rehabilitation facility. She insists that she remains actively involved in her aftercare program which includes the attendance of at least three support group meetings every week, one of which she serves as group facilitator. The Respondent provided Staff of the Texas Board of Nursing with two polygraph examinations in relation to the conduct alleged in Findings of Fact Nos. 14 through 18, outlined above which she passed with no deception indicated. The Respondent maintains she has been sober since her March 2009 relapse.
20. Concerning Finding of Fact No. 12, the Respondent states that she withdrew Demerol, Versed, Dilaudid, and Zofran for use with her cases for that day and that these medications were returned unopened to Spring Branch Medical Center. Respondent also maintains that she was not unconscious when Spring Branch medical staff found her in the restroom as she was the one who opened the door. In response to Finding of Fact No. 14, she did not remove two boxes of Propofol for use with her assigned patients, rather she used the two boxes to restock the medication cart.

21. The Board finds that there exists serious risks to public health and safety as a result of impaired nursing care due to intemperate use of controlled substances or chemical dependency.
22. Formal Charges were filed on October 28, 2009 and mailed to Respondent on November 2, 2009. First Amended Formal Charges were filed on February 9, 2010, and mailed to Respondent on February 9, 2010. Second Amended Formal Charges were filed on February 26, 2010 and were mailed on February 26, 2010.

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 a violations of Section 301.452(b)(9),(10),(12)&(13), Texas Occupations Code, and 22 TEX. ADMIN. CODE §§217.11 (1)(A)&(D) and 217.12 (1)(A),(C),(E),(4),(5),(6)(A),(G),(H),(8),(10)(A),(B) & (11)(B).
4. The evidence received is sufficient cause pursuant to Section 301.452(b), Texas Occupations Code, to take disciplinary action against Registered Nurse License Number 644485, heretofore issued to CHRISTINE MORRISON, including revocation of Respondent's license to practice nursing in the State of Texas.

ORDER

IT IS THEREFORE AGREED and ORDERED, subject to ratification by the Texas Board of Nursing, that Registered Nurse License Number 644485, previously issued to CHRISTINE MORRISON, to practice nursing in Texas, and authorization to practice as a Certified Registered Nurse Anesthetist are hereby SUSPENDED and said suspension is ENFORCED for a minimum of ONE (1) YEAR from the date of the entry of this order. IT IS FURTHER AGREED and ORDERED that this ENFORCED SUSPENSION will be eligible to be STAYED and PROBATED for at least

four years provided Respondent complies with the covenants and conditions set out herein.

I. STIPULATIONS AND CONDITIONS WHICH MUST BE MET DURING THE TIME RESPONDENT'S SUSPENSION IS ENFORCED

IT IS AGREED and ORDERED, that during the time the suspension is enforced, Respondent shall not provide direct patient care and shall not serve in any capacity as an RN or CRNA, and must complete the following:

(1) Within sixty (60) days of this order being entered, RESPONDENT SHALL undergo a comprehensive chemical dependency evaluation performed by an American Society of Addiction Medicine (ASAM) Board Certified Addictionologist. The Addictionologist shall be approved by the Board and must be able to demonstrate experience in evaluating Anesthesiologists or CRNAs. Respondent must provide a list of at least three (3) Addictionologists for the Board to select. RESPONDENT SHALL CAUSE the performing Addictionologist to send a report of the evaluation to the Board office. The report shall include:

1. a description of the instruments used for evaluation and the results of the evaluation;
2. a statement as to the RESPONDENT's fitness to safely practice professional nursing; and
3. recommendations for therapy or other follow-up.

RESPONDENT SHALL comply with the recommendations for therapy or other follow-up. If the results of the evaluation reveal further violations of the Nursing Practice Act, further disciplinary action may be taken, including revocation of Respondent's license to practice professional nursing in the State of Texas.

(2) During the period of enforced suspension, RESPONDENT SHALL abstain from the consumption of alcohol, Propofol, Nubain, Stadol, Dalgan, Ultram, or other synthetic opiates,

and/or the use of controlled substances, except as prescribed by a licensed practitioner for a legitimate purpose. RESPONDENT SHALL abstain from the use of over-the-counter medications with mood-altering substances. If prescribed, RESPONDENT SHALL CAUSE the licensed practitioner to submit a written report identifying the medication, dosage, the date the medication was prescribed, and the name and address of the pharmacy filling the prescription. The report or reports shall be submitted directly to the office of the Board by the prescribing practitioner, within seventy-two (72) hours of the date of the prescription. **In the event that prescriptions for controlled substances are required for periods of two (2) weeks or longer, the Board may require and RESPONDENT SHALL submit to an evaluation by a Board approved physician specializing in Pain Management or Psychiatry. The performing evaluator will submit a written report to the Board's office, including results of the evaluation, clinical indications for the prescriptions, and recommendations for ongoing treatment within thirty (30) days from the Board's request.** RESPONDENT SHALL utilize only one pharmacy for all prescriptions.

(3) RESPONDENT SHALL submit to random periodic screens for controlled substances, tramadol hydrochloride (Ultram), propofol and alcohol. Random drug screens during the first year of this enforced suspension must be submitted at least twice a month for a minimum of twenty-four (24) screens. After the first year, Respondent shall submit drug screens quarterly until her suspension is stayed in accordance with other stipulations outlined herein. All random screens SHALL BE conducted through urinalysis. Screens obtained through urinalysis are the sole method accepted by the Board unless otherwise mutually agreed or approved by the parties.

Specimens shall be screened for at least the following substances:

Amphetamines

Meperidine

Barbiturates

Methadone

Benzodiazepines	Methaqualone
Cannabinoids	Opiates
Cocaine	Phencyclidine
Ethanol	Propoxyphene
Tramadol Hydrochloride (Ultram)	Propofol (Diprivan)

A Board representative may appear at the RESPONDENT's place of employment at any time during the probation period and require RESPONDENT to produce a specimen for screening.

All screens must be observed screens. All screens shall be properly monitored and produced in accordance with the Board's policy on Random Drug Testing. A complete chain of custody shall be maintained for each specimen obtained and analyzed. RESPONDENT SHALL be responsible for the costs of all random drug screening during the probation period, including any additional cost associated with screening for propofol (Diprivan).

Any positive result for which the nurse does not have a valid prescription or failure to report for a drug screen, which may be considered the same as a positive result, will be regarded as non-compliance with the terms of this Order and may subject the nurse to further disciplinary action including EMERGENCY SUSPENSION pursuant to Section 301.4551, Texas Occupations Code, or REVOCATION of Respondent's license and nurse licensure compact privileges, if any, to practice nursing in the State of Texas. Any dilute specimen submitted as a result of a random screen will be considered invalid and will require Respondent to immediately resubmit another urine(s) screen until a valid result is documented. Only validated screens will can be credited toward the number of screens required by this order.

(4) RESPONDENT SHALL attend at least two (2) support group meetings each week, one of which must be for substance abuse and provided by Alcoholics Anonymous, Narcotics

Anonymous, or other comparable recovery program that has been pre-approved by the Board. RESPONDENT SHALL provide acceptable evidence of attendance and SHALL submit the required evidence on the forms provided by the Board at least every three (3) months.

IT IS FURTHER AGREED, upon verification of successful completion of STIPULATIONS AND CONDITIONS WHICH MUST BE MET DURING THE TIME RESPONDENT'S SUSPENSION IS ENFORCED (conditions One (1) through Four (4) as set out in this Order), the ENFORCED SUSPENSION will be STAYED, and RESPONDENT will be placed on PROBATION for a minimum of FOUR (4) years with the following agreed terms of probation

II. STIPULATIONS AND CONDITIONS THAT MUST BE MET DURING THE FIRST YEAR OF DIRECT PATIENT CARE AFTER ENFORCED SUSPENSION IS STAYED

(5) RESPONDENT SHALL comply in all respects with the Nursing Practice Act, Texas Occupations Code, §§301.001 *et seq.*, the Rules and Regulations Relating to Nurse Education, Licensure and Practice, 22 TEX. ADMIN. CODE §211.1 *et seq.* and this Order.

(6) RESPONDENT SHALL pay all re-registration fees, if applicable, and RESPONDENT'S licensure status in the State of Texas will be updated to reflect the applicable conditions outlined herein.

(7) RESPONDENT SHALL, within one (1) year of the suspension being stayed, successfully complete a course in Texas nursing jurisprudence and ethics. RESPONDENT SHALL obtain Board approval of the course prior to enrollment only if the course is not being offered by a pre-approved provider. Home study courses and video programs will not be approved. In order for the course to be approved, the target audience shall include nurses. It shall be a minimum of six (6)

hours in length. The course's content shall include the Nursing Practice Act, standards of practice, documentation of care, principles of nursing ethics, confidentiality, professional boundaries, and the Board's Disciplinary Sanction Policies regarding: Sexual Misconduct; Fraud, Theft and Deception; Nurses with Substance Abuse, Misuse, Substance Dependency, or other Substance Use Disorder; and Lying and Falsification. Courses focusing on malpractice issues will not be accepted.

RESPONDENT SHALL CAUSE the sponsoring institution to submit a Verification of Course Completion form, provided by the Board, to the Office of the Board to verify RESPONDENT's successful completion of the course. This course shall be taken in addition to any other courses stipulated in this Order, if any, and in addition to any continuing education requirements the Board has for relicensure. *Board-approved courses may be found at the following Board website address:*

<http://www.bon.state.tx.us/disciplinaryaction/stipscourses.html>.

(8) Prior to taking any employment as a Registered Nurse under the terms of this Order, RESPONDENT SHALL undergo a comprehensive chemical dependency evaluation performed by an American Society of Addiction Medicine (ASAM) Board Certified Addictionologist. The Addictionologist shall be approved by the Board and must be able to demonstrate experience in evaluating chemically dependant Anesthesiologists or CRNAs. Respondent must provide a list of at least three (3) Addictionologists for the Board to select. RESPONDENT SHALL CAUSE the performing Addictionologist to send a report of the evaluation to the Board office. The report shall include:

1. a description of the instruments used for evaluation and the results of the evaluation;
2. a statement as to the RESPONDENT's fitness to safely practice professional nursing; and
3. recommendations for therapy or other follow-up.

RESPONDENT SHALL comply with the recommendations for therapy or other follow-up. If the results of the evaluation reveal further violations of the Nursing Practice Act, further disciplinary action may be taken, including revocation of Respondent's license to practice professional nursing in the State of Texas.

IT IS FURTHER AGREED, SHOULD THE EVALUATION RECOMMEND RETURN TO PRACTICE AS A REGISTERED NURSE, RESPONDENT MUST PROVIDE DIRECT PATIENT CARE AND PRACTICE IN A HOSPITAL, NURSING HOME, OR OTHER CLINICAL SETTING AND RESPONDENT MUST WORK IN SUCH SETTING A MINIMUM OF SIXTY-FOUR (64) HOURS PER MONTH UNDER THE FOLLOWING PROBATION CONDITIONS FOR AT LEAST ONE (1) YEAR OF EMPLOYMENT. THE LENGTH OF THE PROBATIONARY PERIOD WILL BE EXTENDED UNTIL SUCH TWELVE (12) MONTHS HAVE ELAPSED. PERIODS OF UNEMPLOYMENT OR OF EMPLOYMENT THAT DO NOT REQUIRE THE USE OF A REGISTERED NURSE (RN) LICENSE WILL NOT APPLY TO THIS PROBATIONARY PERIOD. FURTHER, THE PROBATIONARY STIPULATIONS WILL CONTINUE FOR AT LEAST THREE (3) MORE YEARS IF RESPONDENT DOES NOT PRACTICE AS A CRNA, SURRENDERS HER AUTHORITY TO PRACTICE AS A CRNA, OR BEGINS PRACTICE AS A CRNA BUT DOES NOT COMPLETE THREE YEARS OF COMPLIANCE WITH THIS ORDER AS A CRNA:

(9) For the first year of employment as a nurse under this Order, RESPONDENT SHALL NOT practice as an advanced practice nurse, or use the title "Certified Registered Nurse Anesthetist" or the abbreviation "CRNA" or wear any insignia identifying herself as an advanced practice nurse or certified registered nurse anesthetist or use any designation which, directly or

indirectly, would lead any person to believe that the RESPONDENT is an advanced practice nurse or a certified registered nurse anesthetist. For the purpose of this order, advanced nursing practice is described in 22 TEX. ADMIN. CODE §221.1(3).

(10) RESPONDENT SHALL notify all employers and future employers in nursing of this Order of the Board and the probation conditions on RESPONDENT's license. RESPONDENT SHALL present a complete copy of this Order to each future employer prior to accepting an offer of employment.

(11) RESPONDENT SHALL CAUSE each present employer in nursing to submit the Notification of Employment form, which is provided to the Respondent by the Board, to the Board's office within ten (10) days of receipt of this Order. RESPONDENT SHALL CAUSE each future employer to submit the Notification of Employment form, which is provided to the Respondent by the Board, to the Board's office within five (5) days of employment as a nurse.

(12) For the first year of employment as a Registered Nurse, RESPONDENT SHALL be directly supervised by a Registered Nurse. Direct supervision requires the supervising nurse to be working on the same unit as RESPONDENT and immediately available to provide assistance and intervention. RESPONDENT SHALL work only on regularly assigned, identified and predetermined unit(s). The RESPONDENT SHALL NOT be employed by a nurse registry, temporary nurse employment agency, hospice, or home health agency. RESPONDENT SHALL NOT be self-employed or contract for services. Multiple employers are prohibited.

(13) For the first year of employment as a Registered Nurse, RESPONDENT SHALL NOT practice as a nurse on the night shift, rotate shifts, work overtime, accept on-call assignments, or be used for coverage on any unit other than the identified, predetermined unit(s) to which

Respondent is regularly assigned.

(14) For the first year of employment as a Registered Nurse, RESPONDENT SHALL NOT practice as a nurse in any critical care area. Critical care areas include, but are not limited to, intensive care units, emergency rooms, operating rooms, telemetry units, recovery rooms, and labor and delivery units.

(15) For the first year of employment as a Registered Nurse, RESPONDENT SHALL NOT administer or have any contact with controlled substances, Nubain, Stadol, Dalgan, Ultram, Propofol or other synthetic opiates. At all times during practice as an RN under this order, RESPONDENT SHALL surrender her narcotic records and supplies on demand for random inspection. If asked, RESPONDENT SHALL surrender access to any personal locker or bag she has control over for inspection at any time she is practicing as a registered nurse. RESPONDENT SHALL NOT keep any type or form of medical supplies, e.g. medications, syringes, needles, narcotics, or related paraphernalia in her locker or personal bag.

(16) For the first year of employment as a Registered Nurse, RESPONDENT SHALL CAUSE each employer to submit, on forms provided to the Respondent by the Board, periodic reports as to RESPONDENT's capability to practice nursing. These reports shall be completed by the nurse who supervises the RESPONDENT. These reports shall be submitted by the supervising nurse to the office of the Board at the end of each three (3) month period for at least one year and continuing at all times while Respondent works as a registered nurse under this order.

(17) For the first year of employment as a Registered Nurse, RESPONDENT SHALL abstain from the consumption of alcohol, Propofol, Nubain, Stadol, Dalgan, Ultram, or other synthetic opiates, and/or the use of controlled substances, except as prescribed by a licensed

practitioner for a legitimate purpose. RESPONDENT SHALL abstain from the use of over-the-counter medications with mood-altering substances. If prescribed, RESPONDENT SHALL CAUSE the licensed practitioner to submit a written report identifying the medication, dosage, the date the medication was prescribed, and the name and address of the pharmacy filling the prescription. The report or reports shall be submitted directly to the office of the Board by the prescribing practitioner, within seventy-two (72) hours of the date of the prescription. **In the event that prescriptions for controlled substances are required for periods of two (2) weeks or longer, the Board may require and RESPONDENT SHALL submit to an evaluation by a Board approved physician specializing in Pain Management or Psychiatry. The performing evaluator will submit a written report to the Board's office, including results of the evaluation, clinical indications for the prescriptions, and recommendations for on-going treatment within thirty (30) days from the Board's request.** RESPONDENT SHALL utilize only one pharmacy for all prescriptions.

(18) RESPONDENT SHALL submit to random periodic screens for controlled substances, tramadol hydrochloride (Ultram), propofol and alcohol. For the first three month period of practice as an RN, random screens shall be performed at least once per week. For the next three month period, random screens shall be performed at least twice a month. For the next six month period, random screens shall be performed at least once a month. After the first year, Respondent shall submit drug screens quarterly until she begins employment as a CRNA in accordance with other stipulations outlined herein, and at all other times she practices as an RN under this order. All random screens SHALL BE conducted through urinalysis. Screens obtained through urinalysis are the sole method accepted by the Board.

Specimens shall be screened for at least the following substances:

Amphetamines	Meperidine
Barbiturates	Methadone
Benzodiazepines	Methaqualone
Cannabinoids	Opiates
Cocaine	Phencyclidine
Ethanol	Propoxyphene
tramadol hydrochloride (Ultram)	propofol (Diprivan)

A Board representative may appear at the RESPONDENT's place of employment at any time during the probation period and require RESPONDENT to produce a specimen for screening.

All screens must be observed screens. All screens shall be properly monitored and produced in accordance with the Board's policy on Random Drug Testing. A complete chain of custody shall be maintained for each specimen obtained and analyzed. RESPONDENT SHALL be responsible for the costs of all random drug screening during the probation period, including any additional cost associated with screening for propofol (Diprivan).

Any positive result for which the nurse does not have a valid prescription or failure to report for a drug screen, which may be considered the same as a positive result, will be regarded as non-compliance with the terms of this Order and may subject the nurse to further disciplinary action including EMERGENCY SUSPENSION pursuant to Section 301.4551, Texas Occupations Code, or REVOCATION of Respondent's license and nurse licensure compact privileges, if any, to practice nursing in the State of Texas. Any dilute specimen submitted as a result of a random screen will be considered invalid and will require Respondent to immediately resubmit another urine(s) screen until a valid result is documented. Only validated screens will can be credited toward the number of screens required by this order.

(19) RESPONDENT SHALL attend at least two (2) support group meetings each

week, one of which must be for substance abuse and provided by Alcoholics Anonymous, Narcotics Anonymous, or other comparable recovery program that has been pre-approved by the Board. RESPONDENT SHALL provide acceptable evidence of attendance and SHALL submit the required evidence on the forms provided by the Board at least at the end of every three (3) months. RESPONDENT SHALL identify the person who is her sponsor and agree to have this person contact the Board when requested.

(20) After the first year of practice as a Registered Nurse following the stay of suspension, RESPONDENT SHALL continue to comply with stipulations (9) through (19) for a minimum of three years should Respondent surrender her authority to practice as an advance practice nurse or choose not to seek employment as a Certified Registered Nurse Anesthetist.

III. STIPULATIONS AND CONDITIONS THAT MUST BE MET DURING THE TIME RESPONDENT SEEKS TO PRACTICE AS AN ADVANCE PRACTICE NURSE OR CERTIFIED REGISTERED NURSE ANESTHETIST.

(21) Prior to taking any employment as a Certified Registered Nurse Anesthetist (CRNA) under the terms of this Order, RESPONDENT SHALL undergo a comprehensive chemical dependency evaluation performed by an American Society of Addiction Medicine (ASAM) Board Certified Addictionologist. The Addictionologist shall be approved by the Board and must be able to demonstrate experience in evaluating Anesthesiologists or CRNAs. Respondent must provide a list of at least three (3) Addictionologists for the Board to select. RESPONDENT SHALL CAUSE the performing Addictionologist to send a report of the evaluation to the Board office. The report shall include:

1. a description of the instruments used for evaluation and the results of the evaluation;
2. a statement as to the RESPONDENT's fitness to safely practice professional

- nursing; and
3. recommendations for therapy or other follow-up.

RESPONDENT SHALL comply with the recommendations for therapy or other follow-up. If the results of the evaluation reveal further violations of the Nursing Practice Act, further disciplinary action may be taken, including revocation of Respondent's license to practice professional nursing in the State of Texas.

IT IS FURTHER AGREED, AFTER SUCCESSFUL COMPLETION OF ONE (1) YEAR OF EMPLOYMENT AS A REGISTERED NURSE AND RECOMMENDATION FROM THE ADDICTIONOLOGIST THAT RESPONDENT MAY SAFELY PRACTICE AS A CRNA UNDER THE TERMS AND CONDITIONS OF THIS ORDER, RESPONDENT WILL PROVIDE DIRECT PATIENT CARE AS A CRNA FOR A MINIMUM OF SIXTY-FOUR (64) HOURS PER MONTH UNDER THE FOLLOWING PROBATION CONDITIONS FOR THREE (3) YEARS OF EMPLOYMENT. THE LENGTH OF THE PROBATIONARY PERIOD WILL BE EXTENDED UNTIL SUCH THIRTY-SIX (36) MONTHS HAVE ELAPSED. PERIODS OF UNEMPLOYMENT OR OF EMPLOYMENT THAT DOES NOT REQUIRE THE USE OF A CERTIFIED REGISTERED NURSE ANESTHETIST (CRNA) LICENSE WILL NOT APPLY TO THIS PROBATIONARY PERIOD:

(22) RESPONDENT SHALL pay a monetary fine in the amount of One Thousand Six Hundred Dollars (\$1,600). RESPONDENT SHALL pay this fine within ninety (90) days of the authorization to practice as a CRNA. Payment is to be made directly to the Texas Board of Nursing

in the form of cashier's check or U.S. money order. Partial payments will not be accepted.

(23) RESPONDENT SHALL notify each present employer in nursing of this Order of the Board and the probation conditions on RESPONDENT's license. RESPONDENT SHALL present a complete copy of this Order and all Proposals for Decision issued by the Administrative Law Judge, if any, to each present employer within five (5) days of receipt of this Order. RESPONDENT SHALL notify all future employers in nursing of this Order of the Board and the probation conditions on RESPONDENT's license. RESPONDENT SHALL present a complete copy of this Order and all Proposals for Decision issued by the Administrative Law Judge, if any, to each future employer prior to accepting an offer of employment.

(24) RESPONDENT SHALL CAUSE each present employer in nursing to submit the Notification of Employment form, which is provided to the Respondent by the Board, to the Board's office within ten (10) days of receipt of this Order. RESPONDENT SHALL CAUSE each future employer to submit the Notification of Employment form, which is provided to the Respondent by the Board, to the Board's office within five (5) days of employment as a nurse.

(25) During employment as a CRNA under this Order, RESPONDENT SHALL be directly supervised by a Certified Registered Nurse Anesthetist or Anesthesiologist. Direct supervision requires another CRNA or Anesthesiologist to be working on the same unit as RESPONDENT and immediately available to provide assistance and intervention. RESPONDENT SHALL work only on regularly assigned, identified and predetermined unit(s). RESPONDENT SHALL CAUSE each employer to submit, on forms provided to the Respondent by the Board, periodic reports as to RESPONDENT'S capability to practice as a CRNA. These reports shall be completed by the CRNA or Anesthesiologist who supervises the Respondent. These reports shall

be submitted to the office of the Board at the end of each three (3) month period for three years of practice as a CRNA.

(26) RESPONDENT'S practice as a CRNA will be monitored for three (3) years by an Anesthesiologist or Certified Registered Nurse Anesthetist who has been approved by the Board. The monitor will offer guidance, advice and assistance to the RESPONDENT as necessary to ensure that deficiencies such as those set forth in this Order do not reoccur. RESPONDENT SHALL meet with the monitor at least twice a month, for at least one (1) hour in duration per meeting. RESPONDENT SHALL ensure that the monitor submits reports, addressing RESPONDENT's progress in overcoming these deficiencies to the office of the Board at the end of each three (3) month period for three (3) years of CRNA practice. Meetings may be longer and more frequent if considered necessary by the monitor. Multiple employers are prohibited.

(27) While employed as a CRNA under this Order, RESPONDENT SHALL not have access to the department's narcotic keys except as is absolutely necessary in the performance of her duties. RESPONDENT SHALL surrender her narcotic records and supplies on demand for random inspection. If asked, RESPONDENT SHALL surrender access to any personal locker or bag she has control over for inspection at any time she is practicing as an advance practice nurse. RESPONDENT SHALL NOT keep any type or form of medical supplies, e.g. medications, syringes, needles, narcotics, or related paraphernalia in her locker or personal bag.

(28) While employed as a CRNA under this Order, RESPONDENT SHALL NOT practice on the night shift, rotate shifts, work overtime, work off shift, accept on-call assignments, or be used for coverage on any unit other than the identified, predetermined unit(s) to which

Respondent is regularly assigned as a CRNA. RESPONDENT SHALL provide anesthesia care only to her assigned patients. RESPONDENT SHALL NOT access the narcotics supplies on units to which she is not assigned. Should a need arise to access the narcotics supplies from a non-assigned unit, these supplies must be dispensed by appropriate nursing personnel to RESPONDENT, and RESPONDENT SHALL return all unused portions to the dispensing nurse

(29) RESPONDENT SHALL abstain from the consumption of alcohol, Propofol, Nubain, Stadol, Dalgan, Ultram, or other synthetic opiates, and/or the use of controlled substances, except as prescribed by a licensed practitioner for a legitimate purpose. RESPONDENT SHALL abstain from the use of over-the-counter medications with mood-altering substances. If prescribed, RESPONDENT SHALL CAUSE the licensed practitioner to submit a written report identifying the medication, dosage, the date the medication was prescribed, and the name and address of the pharmacy filling the prescription. The report or reports shall be submitted directly to the office of the Board by the prescribing practitioner, within seventy-two (72) hours of the date of the prescription. **In the event that prescriptions for controlled substances are required for periods of two (2) weeks or longer, the Board may require and RESPONDENT SHALL submit to an evaluation by a Board approved physician specializing in Pain Management or Psychiatry. The performing evaluator will submit a written report to the Board's office, including results of the evaluation, clinical indications for the prescriptions, and recommendations for ongoing treatment within thirty (30) days from the Board's request.** RESPONDENT SHALL utilize only one pharmacy for all prescriptions.

(30) RESPONDENT SHALL submit to random periodic screens for controlled substances, tramadol hydrochloride (Ultram), propofol and alcohol. Random drug screens during

the first year of practice as a CRNA must be submitted at least three times a month for the first six months and after the first six months of practice as a CRNA, random drug screens must be submitted at least twice a month for the next six months for a total of at least thirty (30) screens for the first year. After the first year of Practice as a CRNA, Respondent must submit drug screens at least once a month for the next year. Thereafter, Respondent must submit random screens quarterly for the remainder of her probation. All random screens SHALL BE conducted through urinalysis. Screens obtained through urinalysis are the sole method accepted by the Board.

Specimens shall be screened for at least the following substances:

Amphetamines	Meperidine
Barbiturates	Methadone
Benzodiazepines	Methaqualone
Cannabinoids	Opiates
Cocaine	Phencyclidine
Ethanol	Propoxyphene
Tramadol Hydrochloride (Ultram)	Propofol (Diprivan)

A Board representative may appear at the RESPONDENT's place of employment at any time during the probation period and require RESPONDENT to produce a specimen for screening.

All screens must be observed screens. All screens shall be properly monitored and produced in accordance with the Board's policy on Random Drug Testing. A complete chain of custody shall be maintained for each specimen obtained and analyzed. RESPONDENT SHALL be responsible for the costs of all random drug screening during the probation period, including any additional cost associated with screening for propofol (Diprivan).

Any positive result for which the nurse does not have a valid prescription or failure to report for a drug screen, which may be considered the same as a positive result, will be regarded

as non-compliance with the terms of this Order and may subject the nurse to further disciplinary action including EMERGENCY SUSPENSION pursuant to Section 301.4551, Texas Occupations Code, or REVOCATION of Respondent's license and nurse licensure compact privileges, if any, to practice nursing in the State of Texas. Any dilute specimen submitted as a result of a random screen will be considered invalid and will require Respondent to immediately resubmit another urine(s) screen until a valid result is documented. Only validated screens will can be credited toward the number of screens required by this order.

(31) RESPONDENT SHALL attend at least three (3) support group meetings each week, one of which must be for substance abuse and provided by Alcoholics Anonymous, Narcotics Anonymous, or another comparable recovery program that has been pre-approved by the Board. RESPONDENT SHALL provide acceptable evidence of attendance. Acceptable evidence shall consist of a written record of at least: the date of each meeting; the name of each group attended; and the signature and printed name of the chairperson of each group attended by RESPONDENT. RESPONDENT SHALL submit the required evidence on the forms provided by the Board at the end of every three (3) month period. No duplications, copies, third party signatures, or any other substitutions will be accepted as evidence. RESPONDENT SHALL identify the person who is her sponsor and agree to have this person contact the Board when requested.

IV. ADDITIONAL STIPULATIONS OR CONDITIONS THAT APPLY WHILE RESPONDENT'S LICENSE IS ENCUMBERED BY THIS ORDER.

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

IT IS FURTHER AGREED and ORDERED that while Respondent's license is encumbered by this order the Respondent may not work outside the State of Texas pursuant to a

nurse licensure compact privilege without the written permission of the Texas Board of Nursing and the Board of Nursing in the party state where Respondent wishes to work.

IT IS FURTHER AGREED and ORDERED that if during the period of probation, an additional allegation, accusation, or petition is reported or filed against the Respondent's license, the probationary period shall not expire and shall automatically be extended until the allegation, accusation, or petition has been acted upon by the Board.

IT IS FURTHER AGREED, that upon full compliance with the terms of this Order, all encumbrances will be removed from RESPONDENT's license to practice nursing in the State of Texas and RESPONDENT shall be eligible for nurse licensure compact privileges, if any.

IT IS FURTHER AGREED, that upon full compliance with the terms of this Order, RESPONDENT shall be eligible for nurse licensure compact privileges, if any.

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RESPONDENT'S CERTIFICATION

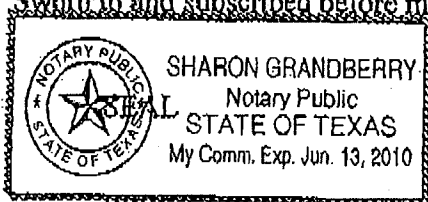
I understand that I have the right to legal counsel prior to signing this Agreed Order. I have reviewed this Order. I neither admit nor deny the violations alleged herein. By my signature on this Order, I agree to the Findings of Fact, Conclusions of Law, Order, and any conditions of said Order, to avoid further disciplinary action in this matter. I waive judicial review of this Order. I understand that this Order is subject to ratification by the Board. When this Order is ratified, the terms of this Order become effective, and a copy will be mailed to me. I understand that if I fail to comply with all terms and conditions of this Order, I will be subject to investigation and disciplinary sanction, including revocation of my license to practice nursing in the State of Texas, as a consequence of my noncompliance.

Signed this 16 day of April, 2010.

Christine Morrison

CHRISTINE MORRISON, Respondent

Sworn to and subscribed before me this 16 day of April, 2010.



[Signature]
Notary Public in and for the State of Texas

Approved as to form and substance.

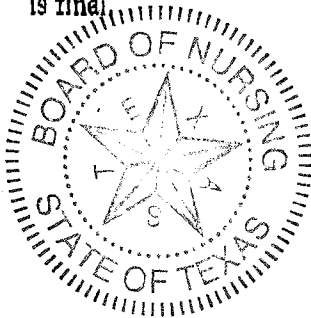


Dan Lype, Attorney for Respondent

Signed this 16 day of April, 2010.

WHEREFORE, PREMISES CONSIDERED, the Texas Board of Nursing does hereby ratify and adopt the Agreed Order that was signed on the 16th day of April, 2010, by CHRISTINE MORRISON, Registered Nurse License Number 644485, and said Order

is final.



Effective this 23rd day of April, 2010.



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

In the Matter of Permanent License
Number 644485, Issued to
CHRISTINE MORRISON, Respondent

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BEFORE THE TEXAS
BOARD OF NURSING

ORDER OF TEMPORARY SUSPENSION

TO: Christine Morrison
c/o Taralynn R. Mackay, Attorney
McDonald, Mackay, Weitz, LLP
P. O. 1137
Elgin, TX 78621

A public meeting was held on February 9, 2010, of the Texas Board of Nursing (BON), at 333 Guadalupe, Room 2-225, Austin, Texas, in which the Temporary Suspension of Permanent Registered Nurse License Number 644485, issued to CHRISTINE MORRISON was considered pursuant to Section 301.455, TEXAS OCCUPATIONS CODE. Staff of the Texas Board of Nursing appeared and presented information and evidence concerning the conduct of CHRISTINE MORRISON and whether her continued practice as a nurse would constitute a continuing and imminent threat to the public welfare.

After review and due consideration of the evidence and information presented and the questions, the Board finds that the following charges are substantiated:

CHARGE I.

On or about September 2006 and October 2006, while employed as a Certified Registered Nurse Anesthetist (CRNA) with Memorial City Hospital, Houston, Texas, Respondent misappropriated Fentanyl, Demerol, and Propofol belonging to the facility and/or the patients thereof, in that she admitted to the misappropriation of the medications for her own use. Possession of Demerol and Fentanyl is prohibited by Chapter 481 of the Texas Health & Safety Code (Controlled Substances Act) and the use of Propofol without a prescription is prohibited by Chapter 483 of the Texas Health & Safety Code (Dangerous Drug Act). Respondent's conduct was likely to defraud the facility and patients of the cost of the medications.

The above action constitutes grounds for disciplinary action in accordance with Section 301.452(b)(10), Texas Occupations Code, and is a violation of 22 TEX. ADMIN. CODE §217.12(6)(G),(8),&(11)(B).

CHARGE II.

On or about September 2006 and October 2006, while employed as a CRNA with Memorial City Hospital, Houston, Texas, Respondent engaged in the intemperate use of Fentanyl, Demerol, and Propofol, in that Respondent admitted to diverting the medications for her own use. Possession of Demerol and Fentanyl is prohibited by Chapter 481 of the Texas Health & Safety Code (Controlled Substances Act) and the use of Propofol without a prescription is prohibited by Chapter 483 of the Texas Health & Safety Code (Dangerous Drug Act). The use of Demerol, Fentanyl, and Propofol by a Registered Nurse, while subject to call or duty, could impair the nurse's ability to recognize subtle signs, symptoms or changes in the patient's condition, and could impair the nurse's ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.

The above action constitutes grounds for disciplinary action in accordance with Section 301.452(b)(9)&(10), Texas Occupations Code, and is a violation of 22 TEX. ADMIN. CODE §217.12(4),(5),(10)(A),&(11)(B).

CHARGE III.

On or about May 23, 2007, while employed with Memorial City Hospital, Houston, Texas, and participating in the Texas Peer Assistance Program for Nurses, Respondent engaged in the intemperate use of Alcohol in that she submitted a specimen for a drug screen which resulted positive for Ethyl Glucuronide (1700 ng/ml). The use of Alcohol by a Registered Nurse, while subject to call or duty, could impair the nurse's ability to recognize subtle signs, symptoms or changes in the patient's condition, and could impair the nurse's ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.

The above action constitutes grounds for disciplinary action in accordance with Section 301.452(b)(9)&(10), Texas Occupations Code, and is a violation of 22 TEX. ADMIN. CODE §217.12(4),(5),&(10)(A).

CHARGE IV.

On or about March 17, 2009, while employed as a CRNA with Northstar Anesthesia, Arlington, Texas, and on assignment with Spring Branch Medical Center, Dallas, Texas, Respondent engaged in the intemperate use of Propofol in that while on duty she was found unconscious in the restroom with a 10cc syringe containing a white solution and she admitted to the use of Propofol. The use of Propofol without a prescription is prohibited by Chapter 483 of the Texas Health & Safety Code (Dangerous Drug Act). The use of Propofol by a Registered Nurse, while subject to call or duty, could impair the nurse's ability to recognize subtle signs, symptoms or changes in the patient's condition, and could impair the nurse's ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.

The above action constitutes grounds for disciplinary action in accordance with Section 301.452(b)(9)&(10), Texas Occupations Code, and is a violation of 22 TEX. ADMIN. CODE §217.12(4),(5),(10)(A),&(11)(B).

CHARGE V.

On or about March 17, 2009, while employed as a CRNA with Northstar Anesthesia, Arlington, Texas, and on assignment with Spring Branch Medical Center, Dallas, Texas, Respondent lacked fitness to practice nursing in that while on duty she was found unconscious in the restroom and taken to the emergency department. Respondent was later transported to the Memorial Adult Prevention and Treatment facility for evaluation and treatment. While at this facility Respondent was again found unconscious in the restroom with two (2) vials of Propofol in her possession. The use of Propofol without a prescription is prohibited by Chapter 483 of the Texas Health & Safety Code (Dangerous Drug Act). The use of Propofol by a Registered Nurse, while subject to call or duty, could impair the nurse's ability to recognize subtle signs, symptoms or changes in the patient's condition, and could impair the nurse's ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.

The above action constitutes grounds for disciplinary action in accordance with Section 301.452(b)(9),(10), &(12), Texas Occupations Code, and is a violation of 22 TEX. ADMIN. CODE §217.12(4),(5),(10)(A),&(11)(B).

CHARGE VI.

On or about March 17, 2009, while employed as a CRNA with Northstar Anesthesia, Arlington, Texas, and on assignment with Spring Branch Medical Center, Dallas, Texas, Respondent misappropriated Propofol, Demerol, Versed, Dilaudid, Zofran, and Fentanyl belonging to the facility and/or the patients thereof. Possession of Demerol, Versed, Dilaudid, and Fentanyl is prohibited by Chapter 481 of the Texas Health & Safety Code (Controlled Substances Act) and possession of Propofol and Zofran is prohibited by Chapter 483 of the Texas Health & Safety Code (Dangerous Drug Act). Respondent's conduct was likely to defraud the facility and patients of the cost of the medications.

The above action constitutes grounds for disciplinary action in accordance with Section 301.452(b)(10), Texas Occupations Code, and is a violation of 22 TEX. ADMIN. CODE §217.12(6)(G),(8),&(11)(B).

CHARGE VII.

On or about August 7, 2009, while employed as a CRNA with Alliance Recruiting Resources, Kingwood, Texas, and on assignment with Pain Resources, Inc., The Woodlands, Texas, Respondent misappropriated thirty-five (35) vials of Propofol. The incident was reported to the Montgomery County Sheriff's Department, Conroe, Texas. During her shift as a CRNA, in which Respondent controlled access to a cabinet containing Propofol, all the inventoried vials of Propofol had been removed and the cabinet was empty. Respondent admitted to taking two (2) boxes of Propofol for her assigned patients on that day which would have far exceeded any known therapeutic need. Possession of Propofol without a prescription is prohibited by Chapter 483 of the Texas Health & Safety Code (Dangerous Drug Act). Respondent's conduct was likely to defraud the facility and patients of the cost of the medications.

The above action constitutes grounds for disciplinary action in accordance with Section 301.452(b)(10), Texas Occupations Code, and is a violation of 22 TEX. ADMIN. CODE §217.12(6)(G),(8),&(11)(B).

CHARGE VIII.

On or about August 7, 2009, while employed as a CRNA with Alliance Recruiting Resources, Kingwood, Texas, and on assignment with Pain Resources, Inc., The Woodlands, Texas, Respondent lacked fitness to practice in that while on duty she was observed going to the restroom in between cases and a staff member found a syringe with Propofol after Respondent's restroom break, she had slurred speech, and refused to have staff search her duffle bag. Respondent's conduct could have affected her ability to recognize subtle signs, symptoms or changes in the patient's condition, and could have affected her ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.

The above action constitutes grounds for disciplinary action in accordance with Section 301.452(b)(9),(10),&(12), Texas Occupations Code, and is a violation of 22 TEX. ADMIN. CODE §217.12(1)(E),(4),(5),(10)(A)&(11)(B).

CHARGE IX.

On or about August 7, 2009, while employed as a CRNA with Alliance Recruiting Resources, Kingwood, Texas, and on assignment with Pain Resources, Inc., The Woodlands, Texas, Respondent engaged in the intemperate use of Propofol while on duty that resulted in the incident described in Charge VIII. The use of Propofol without a prescription is prohibited by Chapter 483 of the Texas Health & Safety Code (Dangerous Drug Act). The use of Propofol by a Registered Nurse, while subject to call or duty, could impair the nurse's ability to recognize subtle signs, symptoms or changes in the patient's condition, and could impair the nurse's ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.

The above action constitutes grounds for disciplinary action in accordance with Section 301.452(b)(9)&(10), Texas Occupations Code, and is a violation of 22 TEX. ADMIN. CODE §217.12(4),(5),(10)(A),&(11)(B).

CHARGE X.

On or about August 7, 2009, while employed as a CRNA with Alliance Recruiting Resources, Kingwood, Texas, and on assignment with Pain Resources, Inc., The Woodlands, Texas, Respondent failed to accurately and completely document the anesthesia care she provided to ten (10) patients. Respondent documented the incorrect dates of the procedure, she failed to document the age, weight, height, medications (Propofol and Lidocaine) given, and her handwriting was progressively less legible. Respondent's conduct resulted in an inaccurate, incomplete medical record and was likely to deceive subsequent care givers who relied on the information while providing care to the patient.

The above action constitutes grounds for disciplinary action in accordance with Section 301.452(b)(10)&(13), Texas Occupations Code, and is a violation of 22 TEX. ADMIN. CODE §§217.11(1)(A)&(1)(D) and 217.12(1)(A),(1)(C),(4),&(10)(B).

CHARGE XI.

On or about August 7, 2009, while employed as a CRNA with Alliance Recruiting Resources, Kingwood, Texas, and on assignment with Pain Resources, Inc., The Woodlands, Texas, Respondent made false entries in the Anesthesia Record for Patient Medical Record Number 2316, in that she documented information regarding the patient's procedure, including the medications given, when in fact the patient did not have the procedure done on that date. Respondent's conduct resulted in an inaccurate medical record and was likely to deceive subsequent care givers who relied on the information while providing care to the patient.

The above action constitutes grounds for disciplinary action in accordance with Section 301.452(b)(10)&(13), Texas Occupations Code, and is a violation of 22 TEX. ADMIN. CODE §§217.11(1)(A)&(1)(D) and 217.12(1)(A),(1)(C),(4),(6)(A),(6)(H),&(10)(B).

CHARGE XII.

On or about December 23, 2009, while employed as a contract Certified Registered Nurse Anesthetist (CRNA) with Texas Ambulatory Surgical Center, Houston, Texas, Respondent misappropriated five (5) doses of Nubain and Phenergan belonging to the facility. Respondent's conduct was likely to defraud the facility of the cost of the medications.

The above action constitutes grounds for disciplinary action in accordance with Section 301.452(b)(10), Texas Occupations Code, and is a violation of 22 TEX. ADMIN. CODE §217.12(6)(G),(8),&(11)(B).

CHARGE XIII.

On or about December 23, 2009, while employed as a contract CRNA with Texas Ambulatory Surgical Center, Houston, Texas, Respondent engaged in the intemperate use of Nubain and Phenergan. The use of Phenergan and Nubain without a prescription is prohibited by Chapter 483 of the Texas Health & Safety Code (Dangerous Drug Act). The use of Nubain and Phenergan by a Nurse, while subject to call or duty, could impair the nurse's ability to recognize subtle signs, symptoms or changes in the patient's condition, and could impair the nurse's ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.

The above action constitutes grounds for disciplinary action in accordance with Section 301.452(b)(9)&(10), Texas Occupations Code, and is a violation of 22 TEX. ADMIN. CODE §217.12(4),(5),(10)(A),&(11)(B).

CHARGE XIV.

On or about December 23, 2009, while employed as a contract CRNA with Texas Ambulatory Surgical Center, Houston, Texas, Respondent lacked fitness to practice in that while on duty she fell off her stool and/or passed out while administering anesthesia to a patient during a procedure, she was observed to have an unsteady gait, staggering, thick tongued when speaking, and glassy eyes. Respondent's conduct could have affected her ability to recognize subtle signs, symptoms or changes in the patient's condition, and could have affected her ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.

The above action constitutes grounds for disciplinary action in accordance with Section 301.452(b)(9),(10),&(12), Texas Occupations Code, and is a violation of 22 TEX. ADMIN. CODE §217.12(1)(E),(4),(5),(10)(A)&(11)(B).

The Texas Board of Nursing further finds, after review and due consideration of the evidence and information presented during the open meeting that given the nature of the allegations concerning Respondent's fitness to practice, the continued practice of nursing by CHRISTINE MORRISON constitutes a continuing and imminent threat to public welfare and that the temporary suspension of the Registered Nurse License No. 644485 is justified pursuant to Section 301.455, TEXAS OCCUPATIONS CODE.

NOW, THEREFORE, IT IS ORDERED that Permanent Certificate Number 644485, issued to CHRISTINE MORRISON, to practice nursing in the State of Texas be, and the same is hereby, SUSPENDED IMMEDIATELY in accordance with Section 301.455, TEXAS OCCUPATIONS CODE.

IT IS FURTHER ORDERED that a probable cause hearing be conducted in accordance with Section 301.455(c) not later than fourteen (14) days following the date of the entry of this order, and a final hearing on the matter be conducted in accordance with 301.455(d) not later than the 61st day following the date of the entry of this order.

Entered this 9th day of February, 2010.

TEXAS BOARD OF NURSING

BY:

Katherine A. Thomas
KATHERINE A. THOMAS, MN, RN
EXECUTIVE DIRECTOR