



5. On or about September 3, 2014, the Voluntary Relinquishment of Respondent's Florida Registered Nurse license was accepted by the State of Florida Board of Nursing, Tallahassee, Florida. A copy of the State of Florida Board of Nursing Final Order dated September 3, 2014, is attached and incorporated, by reference, as part of this order.
6. Formal Charges were filed on February 4, 2015.
7. Formal Charges were mailed to Respondent on February 6, 2014.
8. On March 4, 2015, 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 March 4, 2015, is attached and incorporated herein by reference as part of this Order.
9. The Board policy implementing Rule 213.29 in effect on the date of this Agreed Order provides discretion by the Executive Director for consideration of conditional reinstatement after proof of twelve (12) consecutive months of abstinence from alcohol and drugs followed by licensure limitations/stipulations and/or peer assistance program participation.
10. 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.

#### 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 cause pursuant to Section 301.452(b)(8), Texas Occupations Code, to take disciplinary action against Advanced Practice Registered Nurse License Number AP105668, and Registered Nurse License Number 600292, heretofore issued to MICHAEL PETER LAZOR, including revocation of Respondent's license(s) to practice nursing in the State of Texas.
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 301.453(d), Texas Occupations Code, and 22 TAC §§213.26-.29, and any amendments thereof in effect at the time of the reinstatement.

ORDER


NOW, THEREFORE, IT IS ORDERED that the voluntary surrender of Advanced Practice Registered Nurse License Number AP105668, and Registered Nurse License Number 600292, heretofore issued to MICHAEL PETER LAZOR, to practice nursing in the State of Texas, is/are 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 advanced practice nursing or professional nursing, use the title of "advanced practice registered nurse" or "registered nurse" or the abbreviation "APRN" or "RN" or wear any insignia identifying himself as a advanced practice registered nurse or registered nurse or use any designation which, directly or indirectly, would lead any person to believe that RESPONDENT is an advanced practice registered nurse or a registered nurse during the period in which the licenses are surrendered.
2. RESPONDENT SHALL NOT petition for reinstatement of licensure until: one (1) year has elapsed from the date of this Order; and, RESPONDENT has obtained objective, verifiable proof of twelve (12) consecutive months of sobriety immediately preceding the petition.
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 nursing in the State of Texas.

Effective this 4th day of March, 2015.

TEXAS BOARD OF NURSING

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

ATTN PAUL LONGORIA  
FAX 512 305 6870

One Lake Drive South  
Clearwater, Fla 33755

March 3, 2015

To Whom it May Concern:

I Michael Peter Lazor, who obtained  
a reciprocal nursing license from  
the state of Texas in (approx) 1994 but  
let it expire and never worked in the state  
of Texas and assumed an expired license  
was tantamount to no license, do hereby  
relinquish whatever nursing license I  
might still possess in the eyes of the  
state of Texas to the state of Texas  
via Paul Longoria.

3-4-15

Michael P. Lazor

State of FL  
County of Pinellas

Susan Stanina



SUSAN STANINA  
NOTARY PUBLIC  
STATE OF FLORIDA  
Comm# EE841457  
Expires 12/10/2016

FILED DATE SEP 03 2014

Department of Health

*Angela S. Sudas*  
Deputy Agency Clerk

STATE OF FLORIDA  
BOARD OF NURSING

DEPARTMENT OF HEALTH,

Petitioner,

vs.

Case No.: 2014-08203

License No.: ARNP 2156672

MICHAEL PETER LAZOR,

Respondent:

\_\_\_\_\_ /

FINAL ORDER

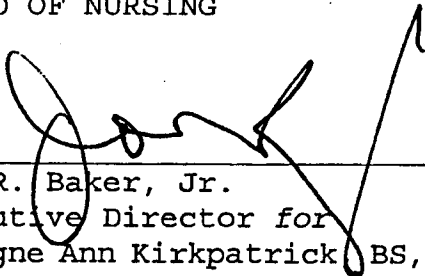
THIS CAUSE came before the BOARD OF NURSING (Board) pursuant to Sections 120.569 and 120.57(4), Florida Statutes, on August 8, 2014, in Orlando, Florida, for consideration of Respondent's voluntary relinquishment (attached hereto as Exhibit A). Upon consideration of the voluntary relinquishment, the documents submitted in support thereof, the arguments of the parties, and being otherwise fully advised in the premises, it is hereby

ORDERED AND ADJUDGED that the voluntary relinquishment is accepted as a resolution of this case.

This Final Order shall take effect upon being filed with the Clerk of the Department of Health.

DONE AND ORDERED this 3<sup>rd</sup> day of Sept, 2014.

BOARD OF NURSING

  
\_\_\_\_\_  
Joe R. Baker, Jr.  
Executive Director for  
Lavigne Ann Kirkpatrick, BS, RN  
Chair

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing Final Order has been provided by U.S. Mail to MICHAEL PETER LAZOR, One Lake Drive South, Clearwater, Florida 33755; and by interoffice delivery to and by interoffice delivery to Lee Ann Gustafson, Senior Assistant Attorney General, Department of Legal Affairs, PL-01 The Capitol, Tallahassee FL 32399-1050, Department of Health-PSU, 4052 Bald Cypress Way, Bin C-65, Tallahassee, Florida 32399-3265 this 3<sup>rd</sup> day of Sept., 2014.

  
\_\_\_\_\_

**Deputy Agency Clerk**

STATE OF FLORIDA  
DEPARTMENT OF HEALTH

FILED  
DEPARTMENT OF HEALTH  
DEPUTY CLERK  
CLERK ANGEL SANDERS  
DATE JUN 12 2014

DEPARTMENT OF HEALTH,  
Petitioner,

v.

DOH Case No. 2014-08203

MICHAEL PETER LAZOR R.N.  
Respondent.

VOLUNTARY RELINQUISHMENT OF LICENSE

Respondent MICHAEL PETER LAZOR, R.N. license No. RN 2156672 hereby voluntarily relinquishes Respondent's license to practice Nursing in the State of Florida and states as follows:

1. Respondent's purpose in executing this Voluntary Relinquishment is to avoid further administrative action with respect to this cause. Respondent understands that acceptance by the Board of Nursing (hereinafter the Board) of this Voluntary Relinquishment shall be construed as disciplinary action against Respondent's license pursuant to Section 456.072(1)(f), Florida Statutes. As with any disciplinary action, this relinquishment will be reported to the National Practitioner Data Bank as disciplinary action. Licensing authorities in other states may impose discipline in their jurisdiction based on discipline taken in Florida.

2. Respondent agrees to voluntarily cease practicing Nursing immediately upon executing this Voluntary Relinquishment. Respondent further agrees to refrain from the practice of Nursing until such time as this Voluntary Relinquishment is presented to the Board and the Board issues a written final order in this matter.

3. In order to expedite consideration and resolution of this action by the Board in a public meeting, Respondent, being fully advised of the consequences of so doing, hereby waives the statutory privilege of confidentiality of Section 456.073(10), Florida Statutes, and waives a determination of probable cause, by the Probable Cause Panel, or the Department when appropriate, pursuant to Section 456.073(4), Florida Statutes, regarding the complaint, the investigative report of the Department of Health, and all other information obtained pursuant to the Department's investigation in the above-styled action. By signing this waiver, Respondent understands that the record and complaint become public record and remain public record and that information is immediately accessible to the public.

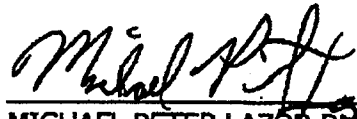
4. Upon the Board's acceptance of this Voluntary Relinquishment, Respondent agrees to waive all rights to seek judicial review of, or to otherwise challenge or contest the validity of, this Voluntary Relinquishment and of the Final Order of the Board Incorporating this Voluntary Relinquishment.

5. Petitioner and Respondent hereby agree that upon the Board's acceptance of this Voluntary Relinquishment, each party shall bear its own attorney's fees and costs related to the prosecution or defense of this matter.

6. Respondent authorizes the Board to review and examine all investigative file materials concerning Respondent in connection with the Board's consideration of this Voluntary Relinquishment. Respondent agrees that consideration of this Voluntary Relinquishment and other related materials by the Board shall not prejudice or preclude the Board, or any of its members, from further participation, consideration, or resolution of these proceedings if the terms of this Voluntary Relinquishment are not accepted by the Board.

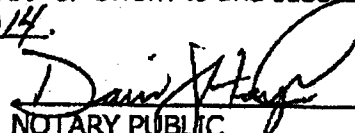


DATED this 29<sup>th</sup> day of May, 2014.

  
MICHAEL PETER LAZOR RM

STATE OF FLORIDA  
COUNTY OF: PINELLAS

Before me, personally appeared MICHAEL P. LAZOR, whose identity is known to me by FL LICENSE (of Identification) and who, under oath, acknowledges that his signature appears above. Sworn to and subscribed before me this 29<sup>th</sup> day of MAY, 2014.

  
NOTARY PUBLIC

My Commission Expires:





STATE OF FLORIDA

DEPARTMENT OF HEALTH



INVESTIGATIVE REPORT

Office: St. Petersburg	Date of Complaint: 05/28/2014	Case Number: 201408203
Subject: MICHAEL PETER LAZOR ARNP One Lake Drive South Clearwater FL 34698 Phone: (727) 415-4250	Source: LINDA SMITH, ARNP, DOH Consultant Intervention Project for Nurses Post Office Box 49130 Jacksonville Beach, FL 32240 Phone: (904) 270-1620	
Profession: Advanced Registered Nurse Practitioner	License Number and Status: ARNP 2156672/ Obligations, Active	
Related Case(s): NONE	Period of Investigation and Type of Report: 05/29/14 through 06/02/14 FINAL	

Alleged Violation: FS 456.072 (1) (k) (q) (z) (dd)( hh), FS 464.018 (1) (j) (l) (o)

**Synopsis:** This investigation is predicated upon receipt of a Case Summary and documents (EXH. 1) from SMITH, DOH Consultant at the Intervention Project for Nurses (IPN), relating that LAZOR had his file closed effective 05/20/14 due to noncompliance with their monitoring requirements. LAZOR was a previous participant in IPN and was noncompliant which precipitated IPN termination in February 2009. LAZOR re-contacted IPN in July 2009 and his file was re-opened. LAZOR was re-evaluated on 09/08/09 with diagnoses of AXIS I- Methamphetamine dependence, probably binge type, currently in remission by patient history. As a result of the aforementioned evaluation, LAZOR engaged in and successfully completed partial hospital treatment at Healthcare Alternatives of West Florida in February 2010. LAZOR executed an IPN Monitoring Contract which provided monitoring from 02/09/10 through 02/09/15. LAZOR was authorized to resume RN clinical practice after providing a negative hair test under IPN toxicology protocol.

In April 2010, LAZOR was on the Florida Board of Nursing agenda as a Proposed Settlement Agreement related to Administrative Complaint Case # 2009-05106. It was the action of the Board to refer LAZOR to IPN for full participation. In June 2010, LAZOR was seen for an evaluation which resulted in the following diagnoses; AXIS I-methamphetamine dependency. The evaluator approved LAZOR'S return to CRNA practice with the condition that as soon as he obtained employment, he would have weekly urine drug screens for at least six (6) months and then have urine drug screens twice a month in addition to quarterly hair tests. In August 2010 during IPN participation, LAZOR had a significant period of progress and documented abstinence. Throughout monitoring, LAZOR had trouble obtaining employment as a CRNA and as an RN and did not work during this current IPN participation. On 04/28/14 LAZOR tested positive for alcohol and was refrained from practice by IPN and required to obtain an IPN facilitated evaluation within a specified timeframe. LAZOR failed to reschedule the required evaluation and IPN has had no further contact with LAZOR.

LAZOR agreed to a Voluntary Relinquishment of his license provided a written response (Exhibit 9) in which he denied the allegations contained in this report.

- Yes  No Subject Notification Completed?
- Yes  No Patient Notification Completed?
- Yes  No Above referenced licensure checked in database/COMPAS?
- Yes  No Board certified? Name of Board: Date:
- Specialty: Anesthesia
- Yes  No Law Enforcement Notification? Date: Agency:
- Yes  No Subject represented by an attorney?
- Attorney information: NONE

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Investigator/Date: David Hayden, MQAI (PI-44) 06/02/14	Approved By/Date: Matthew Knispel, Investigation Manager 06/02/14
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Distribution: HQ/ISU