



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 Advanced Practice Registered	§	AGREED
Nurse License Number AP118196	§	
& Registered Nurse License Number 773425	§	
issued to GAIL BOWERS SHERIDAN	§	ORDER

On this day the Texas Board of Nursing, hereinafter referred to as the Board, considered the matter of GAIL BOWERS SHERIDAN, Advanced Practice Registered Nurse License Number AP118196 and Registered Nurse License Number 773425, hereinafter referred to as Respondent.

Information received by the Board produced evidence that Respondent may be subject to discipline pursuant to Section 301.452(b)(8), Texas Occupations Code. Respondent waived notice and hearing and agreed to the entry of this Order approved by Katherine A. Thomas, MN, RN, FAAN, Executive Director, on June 7, 2015.

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(s).
2. Respondent waived notice and hearing and agreed to the entry of this Order.
3. Respondent's license to practice as a professional nurse in the State of Texas is in current status. Respondent's license to practice as an advanced practice registered nurse in the State of Texas is in current status.
4. Respondent received an Associate Degree in Nursing from Bellevue Community College, Bellevue, Washington, on June 1, 1975, and received a Master of Science in Nursing from University of California-Los Angeles, Los Angeles, California, on June 13, 1997. Respondent was licensed to practice professional nursing in the State of Texas on July 23, 2009, and was licensed to practice advanced practice registered nursing in the role of Family Nurse Practitioner in the State of Texas on September 9, 2009.

5. Respondent's nursing employment history includes:

08/99 - 08/00	APRN	Bend Memorial Clinic La Pine, Oregon
08/00 - 07/10	APRN	High Lakes Health Care Bend, Oregon
08/10 - 07/13	APRN	Medical Clinic of North Texas Denton, Texas
08/13 - 05/14	APRN	Lewisville Family Medical Associates Lewisville, Texas
06/14 - 10/14	Unknown	
11/14 - Present	APRN	VA Hospital Amarillo, Texas

6. On or about February 18, 2015, the Voluntary Surrender of Respondent's Oregon registered nurse license and Oregon Nurse Practitioner certificate was accepted by the Oregon State Board of Nursing, Portland, Oregon. A copy of the Oregon State Board of Nursing's Stipulated Order for Voluntary Surrender of RN License and FNP Certificate dated February 18, 2015, is attached and incorporated, by reference, as part of this Order.
7. Regarding the conduct outlined in Finding of Fact Number Six (6), Respondent states that she surrendered her licences, in lieu of proposed disciplinary action, due to the expense and lack of means to dispute the proposed Oregon Board action, and because of the lack of intent to practice in Oregon in the future. Respondent explains that on or about May 12, 2014, her medical malpractice insurance carrier settled a lawsuit in which she was a named defendant and was based upon her alleged failure to diagnose and treat a pulmonary embolism that resulted in the patient's death.

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 AP118196 and Registered Nurse License Number 773425, heretofore issued to GAIL BOWERS SHERIDAN, including revocation of Respondent's license(s) to practice nursing in the State of Texas.

4. Pursuant to Section 301.463(d), Texas Occupations Code, this Agreed Order is a settlement agreement under Rule 408, Texas Rules of Evidence, in civil or criminal litigation.

TERMS OF ORDER

I. SANCTION AND APPLICABILITY

IT IS THEREFORE AGREED and ORDERED that RESPONDENT SHALL receive the sanction of **REPRIMAND WITH STIPULATIONS AND A FINE** in accordance with the terms of this Order.

- A. This Order SHALL apply to any and all future licenses issued to Respondent to practice nursing in the State of Texas.
- B. This Order SHALL be applicable to Respondent's nurse licensure compact privileges, if any, to practice nursing in the State of Texas.
- C. Respondent may not work outside the State of Texas in another nurse licensure compact party state without first obtaining the written permission of the Texas Board of Nursing and the Board of Nursing in the nurse licensure compact party state where Respondent wishes to work.

II. COMPLIANCE WITH LAW

While under the terms of this Order, RESPONDENT agrees to 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.

III. REMEDIAL EDUCATION COURSE(S)

In addition to any continuing education requirements the Board may require for licensure renewal, RESPONDENT SHALL successfully complete the following remedial education courses **within one (1) year of the effective date of this Order, unless otherwise specifically indicated:**

- A. **A course in Texas nursing jurisprudence and ethics** that 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. Home study courses and video programs will not be approved.
- B. **A Board-approved academic course in advanced practice physical assessment** of at least three (3) semester credit hours, including not less than one (1) semester credit hour, or three (3) clock hours per week, of clinical practicum with a minimum passing grade of not less than "C" or "Pass" if using a "Pass/Fail" grading system. RESPONDENT SHALL obtain Board approval of the course prior to enrollment. Instruction SHALL BE provided by an Advanced Practice Registered Nurse. RESPONDENT SHALL perform physical assessments on live patients in the clinical practicum component; performing assessments on mock patients or mannequins WILL NOT be accepted. The course description shall indicate goals and objectives for the course, resources to be utilized, and the methods to be used to determine successful completion of the course. Successful completion of this course requires RESPONDENT to successfully complete both the didactic and clinical portions of the course.
- C. **The course "Sharpening Critical Thinking Skills,"** a 3.6 contact hour online program provided by the National Council of State Boards of Nursing (NCSBN) Learning Extension.

In order to receive credit for completion of this/these course(s), RESPONDENT SHALL CAUSE the instructor to submit a Verification of Course Completion form or SHALL submit the continuing education certificate, as applicable, to the attention of Monitoring at the Board's office. RESPONDENT SHALL first obtain Board approval of any course prior to enrollment if the course is not being offered by a pre-approved provider. *Information about Board-approved courses and Verification of Course Completion forms are available from the Board at www.bon.texas.gov/compliance.*

IV. MONETARY FINE

RESPONDENT SHALL pay a monetary fine in the amount of two hundred fifty dollars (\$250.00) within forty-five (45) days of entry of this Order. 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.

V. EMPLOYMENT REQUIREMENTS

In order to complete the terms of this Order, RESPONDENT must work as an advanced practice registered nurse, providing direct patient care in a licensed healthcare setting, for a minimum of sixty-four (64) hours per month for eight (8) quarterly periods [two (2) years] of employment. This requirement will not be satisfied until eight (8) quarterly periods of employment as an advanced practice registered nurse have elapsed. Any quarterly period without continuous employment as an advanced practice registered nurse with the same employer for all three (3) months will not count towards completion of this requirement. Periods of unemployment or of employment that do not require the use of a advanced practice registered nurse (APRN) license will not apply to this period and will not count towards completion of this requirement. Further, Respondent may not work as a registered nurse (RN) or a vocational nurse (LVN) license, as applicable, while under the terms of this Order.

- A. Notifying Present and Future Employers, Practice Sites and Credentialing Agencies:** RESPONDENT SHALL notify each present employer, practice site and/or credentialing agency in nursing of this Order of the Board and the stipulations on RESPONDENT'S license(s). 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, practice site and/or credentialing agency in nursing within five (5) days of receipt of this Order. While under the terms of this Order, RESPONDENT SHALL notify all future employers, practice sites and/or credentialing agencies in nursing and present a complete copy of this Order, including all attachments, if any, to each future employer, practice site and/or credentialing agency in nursing prior to accepting an offer of employment and/or assignment.
- B. Notification of Employment Forms:** RESPONDENT SHALL CAUSE each present employer, practice site and/or credentialing agency in nursing to

submit the Board's "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, practice site and/or credentialing agency in nursing to submit the Board's "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.

- C. **Direct Supervision:** For the first year [four (4) quarters] of employment as a Nurse under this Order, RESPONDENT SHALL be directly supervised by an Advanced Practice Registered Nurse or Physician. Direct supervision requires another Advanced Practice Registered Nurse or Physician, as applicable, to be working on the same unit as RESPONDENT and immediately available to provide assistance and intervention. If being supervised by an Advanced Practice Registered Nurse, the supervising APRN must be in the same advanced role and population focus area as Respondent. RESPONDENT SHALL work only on regularly assigned, identified and predetermined unit(s). 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.
- D. **Indirect Supervision:** For the remainder of the stipulation/probation period, RESPONDENT SHALL be supervised by an Advanced Practice Registered Nurse or Physician who is on the premises. The supervising Advanced Practice Registered Nurse or Physician is not required to be on the same unit or ward as RESPONDENT, but should be on the facility grounds and readily available to provide assistance and intervention if necessary. The supervising Advanced Practice Registered Nurse or Physician shall have a minimum of two (2) years experience in the same or similar practice setting to which the Respondent is currently working. If being supervised by an Advanced Practice Registered Nurse, the supervising APRN must be in the same advanced role and population focus area as Respondent. RESPONDENT SHALL work only regularly assigned, identified and predetermined unit(s). 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.
- E. **Nursing Performance Evaluations:** RESPONDENT SHALL CAUSE each supervising Advanced Practice Registered Nurse or Physician 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 Advanced Practice Registered Nurse or Physician who

supervises the RESPONDENT and these reports shall be submitted by the supervising Advanced Practice Registered Nurse or Physician to the office of the Board at the end of each three (3) month quarterly period for eight (8) quarters [two (2) years] of employment as a nurse.

VI. RESTORATION OF UNENCUMBERED LICENSE(S)

Upon full compliance with the terms of this Order, all encumbrances will be removed from RESPONDENT'S license(s) to practice nursing in the State of Texas and RESPONDENT may be eligible for nurse licensure compact privileges, if any.

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RESPONDENT'S CERTIFICATION

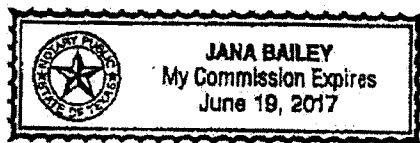
I understand that I have the right to legal counsel prior to signing this Agreed Order. I have reviewed this Order. I neither admit nor deny the violation(s) alleged herein. By my signature on this Order, I agree to the entry of this Order, and any conditions of said Order, to avoid further disciplinary action in this matter. I waive judicial review of this Order. I understand that when this Order becomes final and the terms of this Order become effective, 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 possible revocation of my license(s) to practice nursing in the State of Texas, as a consequence of my noncompliance.

Signed this 19 day of April, 2016.

Gail Bowers Sheridan
GAIL BOWERS SHERIDAN, Respondent

Sworn to and subscribed before me this 19th day of April, 2016.

SEAL



Jana Bailey
Notary Public in and for the State of Texas

Approved as to form and substance,

Amanda J. Ellis
Amanda J. Ellis, Attorney for Respondent

Signed this 20th day of April, 2016.

WHEREFORE, PREMISES CONSIDERED, the Texas Board of Nursing does hereby ratify and adopt the Agreed Order that was signed on the 19th day of April, 2016, by GAIL BOWERS SHERIDAN, Advanced Practice Registered Nurse License Number AP118196 and Registered Nurse License Number 773425, and said Order is final.

Effective this 10th day of May, 2016.

A handwritten signature in cursive script, reading "Katherine A. Thomas".

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

**BEFORE THE OREGON
STATE BOARD OF NURSING**

In the Matter of
Gail Sheridan, NP

) STIPULATED ORDER FOR
) VOLUNTARY SURRENDER
) OF RN LICENSE AND FNP
) CERTIFICATE

License No. 099006171N1, 099006171RN) Reference No. 14-01936

The Oregon State Board of Nursing (Board) is the state agency responsible for licensing, regulating and disciplining certain health care providers, including Registered Nurses and Nurse Practitioners. Gail Sheridan (Licensee) was issued a Registered Nurse License on February 16, 1999, and a Nurse Practitioner Certificate by the Board on April 21, 1999. Both licenses expired May 01, 2012.

On June 16, 2014, the Board received notification of a Medical Malpractice Claim alleging that Licensee failed to evaluate and treat a patient for pulmonary embolism (PE) resulting in a patient's death in May 2008. The case was settled out of court.

The Complainant alleged the patient had been taking Yasmin for premenstrual syndrome for approximately seven months prior to her initial visit with Licensee in December 2007. Licensee refilled this medication throughout her care.

On May 9, 2008, the patient presented to the clinic complaining of shortness of breath and was given a breathing treatment with good response. Six days later the patient suffered a pulmonary embolism and expired.

The Board has authority to discipline pursuant to ORS 678.111 (1)(f) and OAR 851-045-0015 (1)(a)(b)(c), which read as follows:

ORS 678.111 Causes for denial, revocation or suspension of license or probation, reprimand or censure of licensee. In the manner prescribed in ORS chapter 183 for a contested case;

(1) Issuance of the license to practice nursing, whether by examination or by indorsement, of any person may be refused or the license may be revoked or suspended or the licensee may be placed on probation for a period specified by the Oregon State Board of Nursing and subject to such condition as the board may impose or may be issued a limited license or may be reprimanded or censured by the board, for any of the following causes:

(f) Conduct derogatory to the standards of nursing.

OAR 851-045-0015

Conduct Derogatory to the Standards of Nursing Defined

Nurses, regardless of role, whose behavior fails to conform to the legal standard and accepted standards of the nursing profession, or who may adversely affect the health, safety, and

welfare of the public, may be found guilty of conduct derogatory to the standards of nursing. Such conduct shall include, but is not limited to the following:

- (1) Conduct related to the client's safety and integrity:
 - (a) Developing, modifying, or implementing standards of nursing practice/care which jeopardize patient safety.
 - (b) Failing to take action to preserve or promote the client's safety based on nursing assessment and judgment.
 - (c) Failing to develop, implement and/or follow through with the plan of care.

Licensee wishes to voluntarily surrender her Oregon Registered Nurse license and Oregon Nurse Practitioner certificate.

Therefore, the following will be proposed to the Oregon State Board of Nursing and is agreed to by Licensee:

That the voluntary surrender of Gail Sheridan's Oregon Registered Nurse license and Oregon Nurse Practitioner certificate be accepted. If, after a minimum of three years, Ms. Sheridan wishes to reinstate her Registered Nurse license and Nurse Practitioner certificate in Oregon, she may submit an application to the Board to request reinstatement.

Licensee agrees that she will not practice in Oregon as a Registered Nurse or Nurse Practitioner from the date she signs this Order.

Licensee understands that this Order will be submitted to the Board of Nursing for its approval and is subject to the Board's confirmation.

Licensee understands that by signing this Stipulated Order, she waives the right to an administrative hearing under ORS 183.310 to 183.540, and to any judicial review or appeal thereof. Licensee acknowledges that no promises, representations, duress or coercion have been used to induce her to sign this Order.

Licensee understands that this Order is a document of public record.

Licensee has read this Stipulated Order, understands this Order completely, and freely signs this Stipulated Order for Voluntary Surrender.

Gail Sheridan RN, FNP
Gail Sheridan RN, FNP

1/30/2015
Date

ORDER

IT IS SO ORDERED:

BOARD OF NURSING FOR THE STATE OF OREGON

Gary Hickmann
Kay Carnegie, RN, MS
Board President

2-18-2015
Date

GARY HICKMANN, RN