

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 § AGREED ORDER
Registered Nurse License Number 797144 §
issued to CHRISTINE MARIE HOFFMAN §
§

On this day the Texas Board of Nursing, hereinafter referred to as the Board, considered the matter of CHRISTINE MARIE HOFFMAN, Registered Nurse License Number 797144, 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)(12), Texas Occupations Code.

Respondent waived notice and hearing and agreed to the entry of this Agreed Order approved by Katherine A. Thomas, MN, RN, FAAN, Executive Director, on May 11, 2020.

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 Agreed Order.
3. Respondent's license to practice as a professional nurse in the State of Texas is in current status.
4. Respondent received an Associate Degree in Nursing from Western Oklahoma State College, Altus, Oklahoma, on May 15, 2009. Respondent was licensed to practice professional nursing in the State of Texas on February 8, 2011.
5. Respondent's nursing employment history includes:

2/2011 – 6/2013	RN	Texas Regional Medical Center Sunnvale, Texas
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Respondent's nursing employment history continued:

7/2013 – 7/2014	RN	University General Hospital Dallas, Texas
7/2014 – 1/2015	RN	Crescent Medical Center Lancaster, Texas
1/2015 – 7/2015	RN	Texas Health Resources Arlington, Texas
7/2015 – Unknown	RN	Walnut Hill Medical Center Dallas, Texas
4/2017 – 5/2019	RN	Methodist Charlton Medical Center Dallas, Texas
6/2019 – Present	Unknown	

6. On or about January 27, 2011, Respondent was issued an Eligibility Agreed Order through an Order of the Board. On or about July 22, 2011, Respondent successfully completed the terms of the Order. A copy of the January 27, 2011, Order is attached and incorporated herein by reference as part of this Agreed Order.
7. At the time of the initial incident, Respondent was employed as a Registered Nurse with Methodist Charlton Medical Center, Dallas, Texas, and had been in that position for one (1) year and eight (8) months.
8. On or about December 11, 2018, while employed as a Registered Nurse with Methodist Charlton Medical Center, Dallas, Texas, co-workers expressed concerns that Respondent was exhibiting possible signs of impairment.
9. Respondent denies the conduct outlined in Finding of Fact Number Eight (8). Respondent states at no time on that date was she impaired. Respondent agrees to this order solely for the purpose of avoiding the time and expense of a trial.
10. On or about July 18, 2019, Respondent completed a forensic evaluation by Jim Womack, Ph.D. Dr. Womack states Respondent is capable of conforming to Board requirements and rules.
11. Formal Charges were filed on April 26, 2019.

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)(12), Texas Occupations Code, to take disciplinary action against Registered Nurse License Number 797144, heretofore issued to CHRISTINE MARIE HOFFMAN.
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 **WARNING WITH STIPULATIONS** 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. As a result of this Order, RESPONDENT'S license(s) will be designated "single state" and RESPONDENT may not work outside the State of Texas in another nurse licensure compact party state.

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 Nursing Education, Licensure and Practice, 22 TEX.

ADMIN. CODE §§211.1 *et seq.*, and this Agreed Order.

III. UNDERSTANDING BOARD ORDERS

Within thirty (30) days of entry of this Order, RESPONDENT must successfully complete the Board's online course, "Understanding Board Orders", which can be accessed on the Board's website from the "Discipline & Complaints" drop-down menu or directly at: <http://www.bon.texas.gov/UnderstandingBoardOrders/index.asp>. Upon successful completion, RESPONDENT must submit the course verification at the conclusion of the course, which automatically transmits the verification to the Board.

IV. 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 course(s) **within one (1) year of the effective date of this Order, unless otherwise specifically indicated:**

- A. **A Board-approved 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 and video programs will not be approved.
- B. **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.

V. EMPLOYMENT REQUIREMENTS

In order to complete the terms of this Order, RESPONDENT must work as a nurse in the State of Texas, providing direct patient care in a clinical healthcare setting, for a minimum of sixty-four (64) hours per month for four (4) quarterly periods [one (1) year] of employment. This requirement will not be satisfied until four (4) quarterly periods of employment as a nurse have elapsed. Periods of unemployment or of employment that do not require the use of a registered nurse (RN) or a vocational nurse (LVN) license, as appropriate, will not apply to this period and will not count towards completion of this requirement.

- A. **Notifying Present and Future Employers:** RESPONDENT SHALL notify each present employer in nursing and present each with a complete copy of this Order, including all attachments, if any, within five (5) days of receipt of this Order. While under the terms of this Order, RESPONDENT SHALL notify all future employers in nursing and present each with a complete copy of this Order, including all attachments, if any, prior to accepting an offer of employment.
- B. **Notification of Employment Forms:** RESPONDENT SHALL CAUSE each present employer in nursing to submit the Board's "Notification of Employment" form to the Board's office within ten (10) days of receipt of this Order. RESPONDENT SHALL CAUSE each future employer to submit the Board's "Notification of Employment form" to the Board's office within five (5) days of employment as a nurse.
- C. **Indirect Supervision:** RESPONDENT SHALL be supervised by a Registered Nurse, if licensed as a Registered Nurse, or by a Licensed Vocational Nurse or a Registered Nurse, if licensed as a Licensed Vocational Nurse, who is on the premises. The supervising nurse 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 nurse shall have a minimum of two (2) years of experience in the same or similar practice setting to which the RESPONDENT is currently working. 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.

- D. **Nursing Performance Evaluations:** 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 individual who supervises the RESPONDENT and these reports shall be submitted by the supervising individual to the office of the Board at the end of each three (3) month quarterly period for four (4) quarters [one (1) year] of employment as a nurse.

VI. DRUG AND ALCOHOL RELATED REQUIREMENTS

- A. While under the terms of this Order, RESPONDENT SHALL abstain from the use of alcohol, nalbuphine, propofol and all controlled substances, except as prescribed by a licensed practitioner for a legitimate purpose. If prescribed, RESPONDENT SHALL CAUSE the licensed practitioner to submit a written report identifying the medication, dosage and the date the medication was prescribed. The report shall be submitted directly to the office of the Board by the prescribing practitioner, within ten (10) days of the date of the prescription. In the event that the prescriptions for controlled substances are required for periods of two (2) weeks or longer, the Board may require and RESPONDENT SHALL submit to a pain management and/or chemical dependency evaluation by a Board approved evaluator. The performing evaluator must submit a written report meeting the Board's requirements to the Board's office within thirty (30) days from the Board's request.
- B. While working as a nurse under the terms of this Order, RESPONDENT SHALL submit to random periodic screens for alcohol, nalbuphine, propofol and all controlled substances. The Board will provide instructions on how to enroll in the Board's drug and alcohol testing program following the entry of this Order and screening will begin when RESPONDENT obtains employment and submits the Notification of Employment form to the Board.
- For the duration of this Order, random screens shall be performed at least once per month.

All random screens SHALL BE conducted through urinalysis. Any test result for a period of time in which the RESPONDENT is not working as a nurse under the terms of this Order will not count towards satisfaction of this requirement. 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 stipulation/probation period.

Specimens shall be screened for any or all of the following substances and/or their metabolites:

Amphetamine	Methamphetamine	MDMA
MDA	Alprazolam	Diazepam
Alpha-o-alprazolam	Alpha-Hydroxytriazolam	Clonazepam
Desmethyldiazepam	Lorazepam	Midazolam
Oxazepam	Temazepam	Amobarbital
Butabarbital	Butalbital	Pentobarbital
Phenobarbital	Secobarbital	Codeine
Hydrocodone	Hydromorphone	Methadone
Morphine	Opiates	Oxycodone
Oxymorphone	Propoxyphene	Cannabinoids
Cocaine	Phencyclidine	Ethanol
Heroin	Fentanyl	Tramadol
Meperidine	Carisoprodol	Butorphanol
Nalbuphine	Ketamine	Propofol

Upon enrollment in the Board's drug and alcohol testing program, **RESPONDENT SHALL, on a daily basis, call or login online to the Board's designated drug and alcohol testing vendor to determine whether or not RESPONDENT has been selected to produce a specimen for screening that day** and SHALL, if selected, produce a specimen for screening that same day at an approved testing location and/or comply with any additional instructions from the vendor or Board staff. Further, **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.

Consequences of Positive or Missed Screens. Any positive result for which RESPONDENT does not have a valid prescription or refusal to submit to a drug or alcohol screen may subject RESPONDENT to further disciplinary action, including TEMPORARY SUSPENSION pursuant to Section 301.4551, Texas Occupations Code, or REVOCATION of Respondent's license(s) and nurse licensure compact privileges, if any, to practice nursing in the State of Texas. Further, failure to report for a drug screen, excessive dilute specimens, or failure to call in for a drug screen may be considered the same as a positive result or refusal to submit to a drug or alcohol screen.

VII. RESTORATION OF UNENCUMBERED LICENSE(S)

Upon full compliance with the terms of this Agreed Order, all encumbrances will be removed from RESPONDENT'S license(s) and/or privilege(s) to practice nursing in

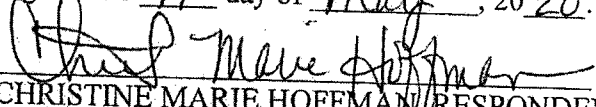
the State of Texas and, subject to meeting all existing eligibility requirements in Texas Occupations Code Chapter 304, Article III, RESPONDENT may be eligible for nurse licensure compact privileges, if any.

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RESPONDENT'S CERTIFICATION

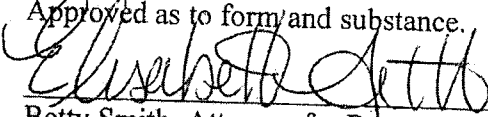
I understand that I have the right to legal counsel prior to signing this Order. I have reviewed this Order. I neither admit nor deny the violation(s) alleged herein. By my signature on this Order, I agree to the entry of this Order, and any conditions of said Order, to avoid further disciplinary action in this matter. I waive judicial review of this Order. I understand that this Order is subject to ratification by the Texas Board of Nursing and a copy of this Order will be mailed to me once the Order becomes effective. 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) and/or privileges to practice nursing in the State of Texas, as a consequence of my noncompliance.

Signed this 11 day of May, 2020.

CHRISTINE MARIE HOFFMAN, RESPONDENT

Sworn to and subscribed before me this _____ day of _____, 20____.

SEAL

Notary Public in and for the State of _____

Approved as to form and substance.

Betty Smith, Attorney for Respondent

Signed this 11th day of May, 2020.

WHEREFORE, PREMISES CONSIDERED, the Texas Board of Nursing does hereby ratify and adopt the Agreed Order that was signed on the 11th day of May, 2020, by CHRISTINE MARIE HOFFMAN, Registered Nurse License Number 797144, and said Agreed Order is final.

Effective this 9th day of June, 2020.



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



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 § AGREED
CHRISTINE MARIE LONJIN, §
PETITIONER for Eligibility for Licensure § ELIGIBILITY ORDER

On this day, the Texas Board of Nursing, hereinafter referred to as the Board considered the Endorsement Application, which has been processed as a Petition for Declaratory Order pursuant to 22 TEX. ADMIN. CODE §217.5(e) and §213.30, and supporting documents filed by CHRISTINE MARIE LONJIN, hereinafter referred to as PETITIONER, together with any documents and information gathered by staff and Petitioner's Certification contained herein.

Information received by the Board produced evidence that PETITIONER may be ineligible for licensure pursuant to Sections 301.452(b)(8)&(10) and 301.453, Texas Occupations Code.

PETITIONER waived representation by counsel, notice and hearing, and agreed to the entry of this Order offered on November 15, 2010, by Katherine A. Thomas, MN, RN, Executive Director.

FINDINGS OF FACT

1. On or about April 29, 2010, PETITIONER submitted an Endorsement Application requesting a determination of eligibility for licensure in compliance with Sections 301.252, 301.257, and 301.260, Texas Occupations Code, and the Board's Rules at 22 TEX. ADMIN. CODE §217.5(e) and §213.30.
2. Petitioner waived representation by counsel, informal proceedings, notice and hearing, and consented to the entry of this Order.
3. Petitioner received an Associate Degree in Nursing from Western Oklahoma State College, Altus, Oklahoma, on May 1, 2009.

4. Petitioner completed the Endorsement Application and answered "yes" to the question which reads as follows: *"For any criminal offense, including those pending appeal, have you:*
- A. *been convicted of a misdemeanor?*
 - B. *been convicted of a felony?*
 - C. *pled nolo contendere, no contest, or guilty?*
 - D. *received deferred adjudication?*
 - E. *been placed on community supervision or court-ordered probation, whether or not adjudicated guilty?*
 - F. *been sentenced to serve jail or prison time? court-ordered confinement?*
 - G. *been granted pre-trial diversion?*
 - H. *been arrested or have any pending criminal charges?*
 - I. *been cited or charged with any violation of the law?*
 - J. *been subject of a court-martial; Article 15 violation; or received any form of military judgment/punishment/action?*
- (You may only exclude Class C misdemeanor traffic violations.)"*
5. Petitioner disclosed the following criminal history, to wit:
- On or about August 24, 2003, Information was filed in the Circuit Court of Randolph County, Illinois, Case NO. 2003-CF-148, charging Petitioner with Theft (over \$200). On November 6, 2003, Petitioner entered a plea of guilty and was placed on conditional discharge for a period of two (2) years and was ordered to pay fees, fines and court costs.
6. There is no evidence of any subsequent criminal conduct.
7. Petitioner completed the Endorsement Application and answered "no" to the question which reads as follows: *"Has any licensing authority refused to issue you a license or ever revoked, annulled, cancelled, accepted surrender of, suspended, placed on probation, refused to renew a professional license, certificate or multi-state privilege held by you now or previously, or ever fined, censured, reprimanded or otherwise disciplined you?"*
8. On July 28, 2009, Petitioner was issued a Stipulation, Settlement and Order by the Oklahoma State Board of Nursing. A copy of the July 28, 2009, Stipulation, Settlement and Order is attached and incorporated by reference as part of this Order.
9. After considering the action taken by the Oklahoma State Board of Nursing, along with Petitioner's subsequent conduct, the Executive Director is satisfied that Petitioner should be able to meet the requirements of the Nursing Practice Act, the Board's Rules and Regulations, and generally accepted standards of nursing practice.
10. Petitioner has sworn that, with the exception of matters disclosed in connection with the Endorsement Application, her past behavior conforms to the Board's professional character requirements at 22 TEX. ADMIN. CODE §213.27.

11. Petitioner presented no evidence of behavior which is inconsistent with good professional character.
12. The Executive Director considered evidence of Petitioner's past behavior in light of the character factors set out in 22 TEX. ADMIN. CODE §213.27 and determined that Petitioner currently demonstrates the criteria required for good professional character.
13. The Executive Director considered evidence of Petitioner's past criminal conduct in light of the considerations and criteria provided in 22 TEX. ADMIN. CODE §§213.28 & 213.33, and, if applicable, Chapter 53, Section 53.001 *et seq.*, Texas Occupations Code.
14. Licensure of Petitioner poses no direct threat to the health and safety of patients or the public provided Petitioner complies with the stipulations outlined in this Order.
15. The Executive Director's review of the grounds for potential ineligibility has been made on the basis of Petitioner's disclosures.
16. Petitioner has been advised by the Board that any information found to be incomplete, incorrect or misleading to the Board or a subsequent discovery of a basis of ineligibility will be considered by the Board and may result in an ultimate determination of ineligibility or the later revocation of a license obtained through fraud or deceit.
17. Petitioner shall immediately notify the Board of any fact or event that could constitute a ground of ineligibility for licensure under Section 301.452(b), Texas Occupations Code.

CONCLUSIONS OF LAW

1. The Board has jurisdiction over this matter pursuant to Sections 301.452 and 301.453, Texas Occupations Code.
2. On or about April 29, 2010, PETITIONER submitted an Endorsement Application requesting a determination of eligibility for licensure in compliance with Sections 301.252, 301.257, and 301.260, Texas Occupations Code, and the Board's Rules at 22 TEX. ADMIN. CODE §217.5(e) and §213.30.
3. Petitioner's history reflects conduct which may constitute grounds for denial of a license under Section 301.452(b)(8)&(10), Texas Occupations Code.
4. The Board may probate the denial of a license under conditions for a specified term pursuant to Section 301.453, Texas Occupations Code.
5. The Board may license an individual who has been previously convicted, adjudged guilty by a court, pled guilty or pled nolo contendere to any crime whether or not a sentence was

imposed upon consideration of the factors set out in 22 TEX. ADMIN. CODE §213.28 and evaluating the direct relationship to nursing according to 22 TEX. ADMIN. CODE §213.28 and, if applicable, Chapter 53, Section 53.001 *et seq.*, Texas Occupations Code.

6. The Board may license an individual with prior behaviors inconsistent with the Board's character requirements if, upon evaluation of the factors in 22 TEX. ADMIN. CODE §213.27, and pursuant to 22 TEX. ADMIN. CODE §213.33, the Board is satisfied that the individual is able to consistently conform her conduct to the requirements of the Nursing Practice Act, the Board's Rules and Regulations, and generally accepted standards of nursing practice.
7. This Order is conditioned upon the accuracy and completeness of Petitioner's disclosures. Any subsequently discovered discrepancies will result in investigation and possible disciplinary action, up to revocation of Petitioner's license(s).

ORDER

NOW, THEREFORE, IT IS AGREED that the application of PETITIONER is hereby GRANTED, and upon payment of the required fees, PETITIONER SHALL be issued the applicable license to practice nursing in the State of Texas, which shall be subject to the following stipulations:

PETITIONER SHALL obtain and read the Texas Nursing Practice Act and the Rules and Regulations Relating to Nurse Education, Licensure, and Practice.

PETITIONER 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.

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

IT IS FURTHER AGREED and ORDERED that while PETITIONER'S license(s) is/are encumbered by this Order, PETITIONER 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 PETITIONER wishes to work.

(1) PETITIONER SHALL, within one (1) year of licensure, successfully complete a course in Texas nursing jurisprudence and ethics. PETITIONER 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. PETITIONER 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 PETITIONER'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>.

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

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

PETITIONER'S CERTIFICATION

I am the Petitioner in this matter. I have fully and truthfully disclosed all of my past conduct which could constitute grounds for licensure ineligibility, and I have caused a complete and accurate criminal history to be submitted to the Texas Board of Nursing from each jurisdiction in which I have been adjudged guilty by way of conviction or deferred order. I certify that my past behavior, except as disclosed in my application, has been in conformity with the Board's character rule. I have provided the Board with complete and accurate documentation of my past conduct in violation of the penal law of any jurisdiction which was disposed of through any procedure short of conviction, such as: conditional discharge, deferred adjudication or dismissal. I have no criminal prosecution pending in any jurisdiction.

In connection with my application, I acknowledge that I have read and I understand Sections 301.157(d), 301.252, 301.253, 301.257, 301.258, 301.260, 301.452, and 301.453, Texas Occupations Code, and Chapter 53, Section 53.001 *et seq.*, Texas Occupations Code, and 22 TEX. ADMIN. CODE §§213.27, 213.28, 213.29, and 213.30. I agree with all terms of this Order, including the Findings of Fact and Conclusions of Law and any stipulations as set out in this Order. I acknowledge that this Order is stipulated and I understand that I am not eligible to receive a Temporary Permit to practice nursing. I agree to inform the Board of any other fact or event that could constitute a ground for denial of licensure prior to accepting any license from the Texas Board of Nursing.

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(s) to practice nursing in the State of Texas, as a consequence of my noncompliance.

I understand that I can be represented by an attorney in this matter. I waive representation, notice, administrative hearing, and judicial review of this Order and request that the Texas Board of Nursing ratify this Order.

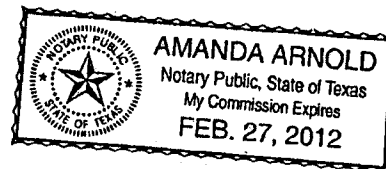
Signed this 24 day of Jan, 2011.

Christine Marie Lonjin
CHRISTINE MARIE LONJIN, PETITIONER

Sworn to and subscribed before me this 24 day of January, 2011.

SEAL

Amanda Arnold
Notary Public in and for the State of Texas



WHEREFORE, PREMISES CONSIDERED, the Executive Director on behalf of the Texas Board of Nursing does hereby ratify and adopt the Agreed Eligibility Order that was signed on the 24th day of January, 2011, by CHRISTINE MARIE LONJIN, PETITIONER for Eligibility for Licensure, and said Order is final.

Effective this 27th day of January, 2011.



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

BEFORE THE OKLAHOMA BOARD OF NURSING

IN THE MATTER OF CHRISTINE MARIE LESEMAN LONJIN
NCLEX-R.N. APPLICANT

STIPULATION, SETTLEMENT AND ORDER

This matter comes on for hearing before the Oklahoma Board of Nursing on the 28th day of July, 2009, at the Wyndham Garden Hotel Conference Center, 2101 South Meridian Avenue, Oklahoma City, Oklahoma.

Jan Sinclair, R.N., a Nurse Investigator with the Board, and Christine Marie Leseman Lonjin, (hereinafter, "Applicant") appeared in person without counsel for an investigative conference on June 11, 2009 and subsequently consented to this Order.

STIPULATION

Applicant and the Board hereby stipulate and agree to the following joint stipulation and proposed Order of the Board incorporating this stipulation and agreement in the above-styled matter.

1. On or about May 22, 2009, the Oklahoma Board of Nursing ("Board") received a completed RN Application for Licensure by Examination ("Application"). The Application is attached as Exhibit "A" and made a part hereof.
2. On or about August 24, 2003, Information was filed in the Circuit Court of Randolph County, Illinois, Case No. 2003-CF-148, charging Applicant with Theft (over \$300.00). On November 6, 2003, Applicant entered a plea of guilty and was placed on conditional discharge for a period of two (2) years, fees, fines, and court costs.
3. This stipulation is executed by the Applicant for the purpose of avoiding

further administrative action with respect to this cause. In this regard, Applicant authorizes the Board to review and examine all investigative file materials concerning Applicant prior to or in conjunction with consideration of this stipulation. Furthermore, should this joint stipulation not be accepted by the Board, it is agreed that presentation to and consideration of this stipulation and other documents and matters by the Board shall not unfairly or illegally prejudice the Board or any of its members from further participation, consideration or resolution of these proceedings.

4. Applicant fully understands that this joint stipulation and subsequent Final Order incorporating same will in no way preclude additional proceedings by the Board against Applicant for acts or omissions not specifically made a part of this stipulation.

5. Applicant expressly waives all further procedural steps, and expressly waives all rights to seek judicial review of or to otherwise challenge or contest the validity of this joint stipulation of facts, conclusions of law and imposition of discipline, and the Final Order of the Board incorporating said stipulation.

6. It is expressly understood that this stipulation is subject to approval of the Board and has no force and effect until approved and Ordered by the Board.

7. This Stipulation, Settlement, and Order does constitute formal disciplinary action.

STIPULATED DISPOSITION AND ORDER

IT IS THEREFORE ORDERED by the Oklahoma Board of Nursing that the Application to write the NCLEX-RN filed herein by Applicant be, and the same is hereby granted, upon the following terms and conditions:

1. Applicant shall, within **ninety (90) days** from the Applicant's receipt of

license, successfully complete a course on **Nursing Jurisprudence**. Applicant shall obtain Board approval of the course prior to enrollment. Home study courses, Internet and video programs will not be approved. In order for the course to be approved, the target audience must include licensed nurses. It must be a minimum of four (4) contact hours in length. The course must include an examination of the scope of nursing practice from the Oklahoma Nursing Practice Act and Rules of the Board, other laws, policies, and accreditation guidelines that govern the practice of nursing, the role of delegation and supervision, and an exploration of the ethical basis of nursing practice. Courses focusing on malpractice issues will not be accepted. The course description must indicate goals and objectives for the course, resources to be utilized, and the methods to be used to determine successful completion of the course. Applicant shall cause the sponsoring institution to submit verification of Applicant's successful completion of the course to the Board office.

IT IS FURTHER ORDERED that a **severe reprimand** be placed in Applicant's file upon licensure.

IT IS FURTHER ORDERED that any failure to comply with submission of the administrative penalty or written documentation by the due date, including but not limited to proof of successful completion of educational courses, will result in a three (3) month suspension of license. At the completion of the three month suspension, any application for reinstatement may be submitted for processing by Board Staff for approval in accordance to the agency approval process or for referral to the Board. An Administrative penalty of \$500 for each violation of Applicant's Board Order shall be paid by certified check, money order, or cash prior to reinstatement pursuant to statute, 59 O.S. §567.8.J.1. and 2, and §485:10-11-2(d) of the Rules promulgated by the Board.

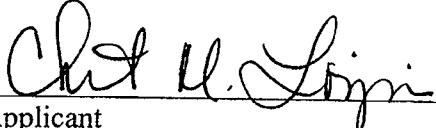
IT IS FURTHER ORDERED that the parties agree that both (all) parties have

participated in the drafting of this Stipulation, Settlement and Order and that no presumption or construction against any party as the drafter of this **Stipulation, Settlement and Order**, shall apply or be applied in the event of a claim of ambiguity of the document or a provision thereof.

IT IS FURTHER ORDERED that this stipulation shall not be effective until the fully executed Order is received in the Board office.

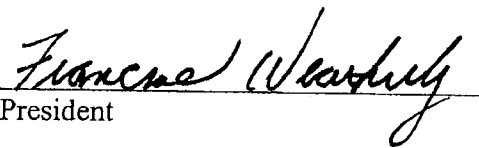
IT IS FURTHER ORDERED that upon successful completion of all of the terms and conditions of this Order, no further Order of the Board shall be deemed necessary.

IT IS FURTHER ORDERED that this Order constitutes disciplinary action by the Board and may be used in any subsequent hearings by the Board. In the event other misconduct is reported to the Board, this Order may be used as evidence against Applicant to establish a pattern of behavior and for the purpose of proving additional acts of misconduct.


Applicant

Approved and ordered this 28th day of July, 2009.

OKLAHOMA BOARD OF NURSING

By: 
President

JS:sr

OKLAHOMA BOARD OF NURSING

2915 N. Classen Blvd., Suite 524

Oklahoma City, OK 73106

(405) 962-1800

RECEIVED

APR 06 2009

OBN

APPLICATION FOR LICENSURE BY EXAMINATION

TYPE OR PRINT IN BLACK INK ONLY

I hereby make application for licensure as a Registered Nurse/Licensed Practical Nurse in accordance with the statutes of the State of Oklahoma (59 O.S. 567.1-567.17).

SECTION I: APPLICANT INFORMATION

RN LPN

Female Male

Social Security# _____

My full legal name is Christine Marie Leseman Lonjin
First Middle Maiden (if applicable) Last

Name to appear on license: (3 Full Names) Christine Marie Lonjin
First Middle or Maiden Last

Mailing Address is: 1107 NW Oak Ave

Lawton OK 73507 (580) 284-8551
City State Zip Telephone Number

Email Address christine.lillard@us.army.mil Birth Place Granada Hills, CA Birth Date _____

SECTION II: EDUCATION

High School Name Bryan Adams High Location Dallas, Texas

Date of high school graduation _____ or Date of GED March 1995

Name of nursing education program from which you graduated Western Oklahoma State College

Campus Location Lawton Oklahoma School Name 73505

Type of Program: PN Associate Degree Diploma Bachelor's Degree Other

Date you entered program Aug/2007 Date you completed program May/2009
Mo/Yr Mo/Yr

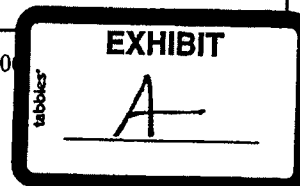
SECTION III: LICENSURE HISTORY

Have you ever held a license or certificate in any health care field? Yes No

If yes, state held: _____ Lic/Cert type: _____ Lic/Cert Number: _____

Have you ever applied for registered nurse or practical nurse licensure by exam in any state? Yes No

If yes, identify date(s) and state(s): _____



SECTION VI: PHOTOGRAPH

RECEIVED

Chet M. Ojima
3/12/09



APR 06 2009

Photograph must meet the following guidelines:

OBN

- Size 2" x 2" with minimum 1" full face view without glasses;
- Neutral clothing; light colored clothing;
- Signed and dated on the front. Do not sign across the face.

SECTION V: CITIZENSHIP STATUS

Please check one of the following:

- I am a U.S. citizen.
An Evidence of Status form and documentation as identified on the form must be submitted in order for the application to be complete.
- I am a U.S. national.
An Evidence of Status form and documentation as identified on the form must be submitted in order for the application to be complete.
- I am a legal permanent resident alien.
An Evidence of Status form and documentation as identified on the form must be submitted in order for the application to be complete.
- I am a qualified alien.
Please bring the Evidence of Status form, original unexpired documentation of alien status, and your completed application to the Board office.

SECTION VII: HISTORY OF ARREST, DISCIPLINARY ACTION, OR MENTAL INCOMPETENCE

- | | | | |
|----|---|---|--|
| 1. | Have you ever been arrested for any offense in any state, territory, or country, including expunged offenses, with the exception of minor traffic (Minor traffic violations do not include DUI.) | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 2. | Have you ever been convicted of any offense in any state, territory, or country, including expunged offenses, with the exception of minor traffic violations? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 3. | Have you ever received a deferred sentence, for any offense in any state, territory, or country, including expunged offenses? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 4. | Have you ever been convicted of a felony in any state, territory, or country? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 5. | Have you ever had disciplinary action taken against your nursing license, recognition, or certificate; any health-related license, recognition, or certificate; or any application for a nursing or health-related license, recognition, or certificate in any state, territory or country? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 6. | Have you ever been judicially declared incompetent in any state, territory, or country? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |

If any answer to any question #1 through #4 is yes, please submit a letter of description and certified copies of Information Sheet, Charges, Judgment and Sentence, or a certified copy of the Order of Expungement. If you answered yes to question #5, please submit a letter of description and certified copies of the charges/complaints, findings of fact, and orders of the Board. If you answered yes to question #6, please submit a letter of description and a certified copy of the Court Order.

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SECTION VIII: APPLICANT'S STATEMENT

APR 06 2009

Please check each of the following to verify your understanding:

OBN

- I understand that I must complete all questions on the application form, typed or in black ink, with no white-out.
- I understand that I must sign the application using my full legal name in the presence of a Notary Public.
- I understand that I must attach a cashier's check or money order for \$85.00 to my application form prior to submission.
- I understand I must tape an original 2" x 2" photograph with my signature and date to the application form.
- I understand that I must attach an original Criminal History Records Search completed by the OSBI within the last 90 days prior to receipt of my application in the Board office.
- I understand that if I am a U.S. citizen, national, or permanent legal resident alien, I must attach an *Evidence of Status Form* and a photocopy of supporting documentation. If I am a qualified alien, I must bring an *Evidence of Status Form* and original copy of supporting documentation to the Board office.
- I understand that if I've completed my nursing education greater than two years prior to submitting this application, I must request that an original transcript or approved refresher course certificate be submitted to verify my additional required education.
- I understand that if I answer "yes" to any question from #1 through #6, I must attach an original letter of description with my signature and certified copies of court records or the Board order.

AFFIDAVIT

Sign full name LEGIBLY - No initials - DO NOT PRINT - If no middle name, indicate "NMN".

I declare and affirm that the statements made in this application, including accompanying documents, are true, complete and correct. I understand that any false or misleading information in, or in connection with, my application, may be cause for denial or loss of licensure.

Signature of Applicant: _____

FIRST

MIDDLE

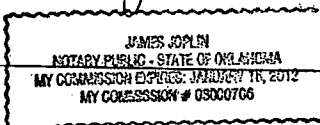
MAIDEN (IF APPLICABLE)

LAST

I certify that on the date set forth below, the individual named above did appear personally before me and that I did identify this applicant by: (a) comparing his/her physical appearance with the photograph on the identifying document presented by the applicant and with the photograph affixed hereto, and (b) comparing the applicant's signature made in my presence on this form with the signature on his/her identifying document. The statements on this document are subscribed and sworn to before me by the applicant on this 12 date of March 2009

Notary Public Signature: _____

My Commission Expires _____



(SEAL)