BEFORE THE ARIZONA STATE BOARD OF NURSING

IN THE MATTER OF THE APPLICATION FOR REGISTERED NURSE LICENSURE BY ENDORSEMENT OF KAREN RAE MOCHAL; AKA KAREN RAE KLEMAK

APPLICANT

CONSENT AGREEMENT

AND

ORDER NO. 0809089

CONSENT AGREEMENT

A complaint charging KAREN RAE MOCHAL; AKA KAREN RAE KLEMAK, ("Applicant") with violation of the Nurse Practice Act has been received by the Arizona State of Nursing ("Board"). In the interest of prompt and speedy settlement of the above-captioned matter, consistent with the public interest, statutory requirements and the responsibilities of the Board, and pursuant to A.R.S. § 41-1092.07 (F) (5), the undersigned parties enter into this Consent Agreement as a final disposition of this matter.

Based on the evidence before it, the Board makes the following Findings of Fact and Conclusions of Law:

FINDINGS OF FACT

1. On or about September 30, 2008, Applicant submitted an application for registered nurse licensure by endorsement. Under the section on Applicant’s endorsement application entitled “Disciplinary Questions”, she answered “yes” to the following question, “Are you presently under investigation or is a disciplinary action pending against your nursing, license, CNA certificate or any other license or certificate you hold in any state or territory of the United States?”

2. On or about September 30, 2008, Applicant provided the Board with a Proposed Decision issued on July 25, 2008, by the Iowa (IA) Department of Inspections and Appeals, Division of Administrative Hearings, captioned, “Karen Mochal vs. Division of Health
Facilities.” The Administrative Law Judge denied Applicant’s appeal and upheld the Division’s December 6, 2007 findings of dependent adult abuse:

a. Applicant admitted that on July 13, 2007, she wrote a medication order for Lortab without physician approval for a dependent adult resident assigned to her, while employed with Lantern Park Nursing & Rehabilitation in Iowa City, Iowa (“the facility”). The Lortab was delivered to the facility, and signed in by another licensed nurse. During a standard facility narcotic count, the Lortab could not be located. Applicant denied diverting the Lortab, but admitted diverting Tylenol #3 tablets from other facility residents for her own use.

b. On September 3, 2007, Cedar County and Mount Vernon law enforcement officers in Linn County, IA, were alerted to a vehicle weaving all over a road. Officers located the vehicle, in which Applicant appeared to be asleep in the driver’s seat. The officers reported difficulty in awakening Applicant, after which she appeared confused and disoriented. On September 4, 2007, Applicant was admitted to St. Luke’s Hospital, Cedar Rapids, IA for medical evaluation.

c. On September 4, 2007, Applicant tested positive for narcotic medication consistent with the ingestion of Lortab, for which she had no known valid prescription.

d. That during Applicant’s medical treatment at St. Luke’s Hospital, she admitted to Dr. Tracy Reittinger, that she diverted controlled substances from Lantern Park and from her son and that she abused the controlled substances prescribed by her physician.

e. Upon discharge from St. Luke’s Hospital, Applicant was transferred to an inpatient psychiatric facility for further management of her narcotic dependency and diagnosis of severe depression.

3. On or about January 29, 2009, in an open public meeting, the Board voted to
continue the investigation and allow Applicant the opportunity to obtain a psychological
evaluation by a Board approved evaluator who specialized in addiction and return to the Board.

4. On or about February 28, 2009, Applicant was evaluated by Lynda K. Hemann, Ph.D., M.P.H., L.I.S.A.C. According to Dr. Hemann’s report, Applicant exhibited symptoms characteristic of a generalized anxiety disorder and a major depressive disorder; these symptoms however are controlled through the use of prescription medications and risk conditions for relapse are fairly low based upon the SUDDS-IV measurement tool. Applicant reported the she last used alcohol four years ago and she acknowledged past abuse of Benadryl, Lorazepam, and Lortab. Dr. Hemann reported that Applicant met the criteria for Alcohol Dependence in full sustained remission and that symptoms of an active substance abuse disorder lasted presented in 2007. Dr. Hemann opined that Applicant could safely practice nursing in a Board ordered monitoring probationary program with continued medical treatment for depression, and generalized panic and anxiety disorders.

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CONCLUSIONS OF LAW

Pursuant to A.R.S. §§ 32-1606, 32-1663 and 32-1664, the Board has subject matter and personal jurisdiction in this matter.

The conduct and circumstances described in the Findings of Fact constitute violations of A.R.S. § 32-1663(A) as defined in § 32-1601(d), (i), and (j); and A.A.C. R4-19-403(B), (16), (17), (18), and (31) (Adopted and effective November 13, 2005).

The conduct and circumstances described in the Findings of Fact constitute sufficient cause pursuant to A.R.S. § 32-1663(A) to deny, or issue a conditional license to Applicant.

 Applicant admits the Board’s Findings of Fact and Conclusions of Law.

In lieu of a formal hearing on these issues, Applicant agrees to issuance of the attached Order and waives all rights to a hearing, rehearing, appeal or judicial review relating to the Order except in the limited circumstance(s) specified in Paragraph 20 of this Order.

Applicant understands that all investigative materials prepared or received by the Board concerning these violations and all notices and pleadings relating thereto may be retained in the Board’s file concerning this matter.

Applicant understands that the admissions in the Findings of Fact are conclusive evidence of a violation of the Nurse Practice Act and may be used for purposes of determining sanctions in any future disciplinary matter.

Applicant understands the right to consult legal counsel prior to entering into this Consent Agreement and such consultation has either been obtained or is waived.

Applicant understands that this Consent Agreement is effective upon its acceptance by the Board and by Applicant as evidenced by the respective signatures thereto. Applicant’s signature obtained via facsimile shall have the same effect as an original signature. Once signed
by the Applicant, the agreement cannot be withdrawn without the Board’s approval or by stipulation between Applicant and the Board’s designee. The effective date of this Order is the date the Consent Agreement is signed by the Board and by Applicant. If the Consent Agreement is signed on different dates, the later date is the effective date.

Karen R. Mochal, Applicant

Dated: 5/16/09

ARIZONA STATE BOARD OF NURSING

Joey Ridenour, R.N., M.N., F.A.A.N.
Executive Director

Dated: March 26, 2009

ORDER

In view of the above Findings of Fact, Conclusions of Law and the consent of Applicant, the Board hereby issues the following Order:

A. Applicant’s consent to the terms and conditions of the Order and waiver of public hearing is accepted.

B. Upon Applicant’s signature on this consent agreement, and acceptance by the Board, Applicant will be granted a professional nursing license, and that license is placed on probation for thirty-six (36) months. Prior to termination of probation, Applicant shall work as a registered nurse for a minimum of eighteen (18) months, (not less than sixteen hours a week).
C. This Order becomes effective upon the Board and Applicant’s acceptance of the Consent Agreement. The effective date of this Order is the date the Consent Agreement is signed by the Board and by Applicant. If the Consent Agreement is signed on different dates, the later is the effective date. Probation is to commence the effective date of this Order.

D. If Applicant is noncompliant with any of the terms of the Order, Applicant’s noncompliance shall be reviewed by the Board for consideration of possible further discipline on Applicant's nursing license.

E. If Applicant is convicted of a felony, Applicant’s license shall be automatically revoked for a period of five (5) years. Applicant waives any and all rights to a hearing, re hearing or judicial review of any revocation imposed pursuant to this paragraph.

F. Probation is subject to the following terms and conditions:

**TERMS OF PROBATION**

1. **Stamping of License**

   Upon acceptance by the Board and the Applicant of this Consent Agreement as evidenced their respective signatures on this Consent Agreement, Applicant will be granted a registered nursing license stamped “Probation.” While this consent agreement is in effect, if the Board issues any licenses or certificates authorized by statute except a nursing assistant certificate, such certificate or license shall be stamped “Probation.” Applicant is not eligible for a multi-state “Compact” license.

2. **Relapse Prevention Evaluation**

   At eighteen months (18) during Applicant’s probationary period, Applicant shall be evaluated by a Board approved relapse prevention therapist. Prior to the evaluation, Applicant shall provide a copy of the Findings of Fact, Conclusions of Law and the Order, and the relapse
prevention therapist shall verify receipt of the Order in writing in a report on letterhead to the Board. Applicant shall immediately execute the appropriate release of information forms, to allow the evaluator to communicate with Applicant's health care provider who prescribes her psychotropic medications (if any), and the Board or its designee. The report from the relapse prevention evaluator should include a history of substance abuse, past treatment, present status of recovery and participation in recovery activities, and recommendations for on-going treatment. Applicant will complete all recommendations as recommended by the relapse prevention evaluator, and the Board reserves the right to amend the Order based on the recommendations of the relapse prevention therapist.

If recommended, Applicant shall enroll in a relapse prevention program or other recommended therapy within thirty (30) days of being notified by the Board of the recommendations from the evaluator. Applicant shall cause the program facilitator to inform the Board in writing verifying enrollment in the program. Prior to entry into a relapse prevention program or any type of other recommended therapy, Applicant shall provide a copy of this Consent Agreement and Order to include Findings of Fact and Conclusions of Law, and Order to the program facilitator. Applicant shall immediately execute the appropriate release of information form(s) to allow the facilitator to communicate information with the Board or its designee. Applicant shall participate in the relapse prevention program or therapy until the Board receives verification from the facilitator in writing that Applicant has successfully completed the program. During participation in the program Applicant shall cause the program facilitator to submit to the Board, in writing on a Board-approved form, evidence of satisfactory attendance, participation, discharge and successful completion of the program. Such reports are due beginning on the first quarterly reporting date after entry into the relapse prevention program.
and quarterly thereafter, according to schedule, for the remainder of the probationary period or verification of successful completion of the program.

3. **Nurse Recovery Group**

   Within seven (7) days of the effective date of this Order, Applicant shall enroll in a Board-acceptable Nurse Recovery Group if a group is available within forty miles. Applicant shall sign release of information forms allowing the group facilitator to inform the Board, in writing and on letterhead, of Applicant’s entry and progress in the group. Applicant shall attend a Nurse Recovery Group once per week and have no “Unexcused” absences or “No call/No show” occurrences.

4. **Drug Testing**

   Within seven (7) days of the effective date of this Order, Applicant shall enroll in a program that meets Board criteria for random drug testing. Random drug testing shall be done at a minimum of once per month and may be required more frequently as requested by the Board or its designee. Applicant shall notify the drug testing laboratory and the Board, in writing, of unavailability to test before the anticipated absence. If Applicant is unable to submit a specimen on a date requested due to illness, Applicant must provide in writing within seven (7) days of the missed specimen, documentation from a medical provider who has personally seen Applicant on the day of the requested drug test confirming that Applicant was not physically able to report to the laboratory for drug testing. In addition, any occurrence of the following conditions constitutes noncompliance: a positive drug test showing evidence of any drug other than an authorized drug; submission of a specimen where the integrity has been compromised, as indicated by the presence of adulterants; failure to submit to a drug test on a day when a drug test has been requested by either the Board, its designee, or the laboratory; and submission of a urine
sample that is below the acceptable volume or temperature to be tested. A positive drug test showing evidence of any drug other than an authorized drug shall result in immediate notification of Applicant’s employer by the Board.

5. **Abstain from Alcohol Use**

   Applicant shall abstain completely from the personal use of alcoholic beverages.

6. **Abstain From Unauthorized Drug Use/Proof of Prescription**

   Applicant shall abstain completely from the personal use or possession of controlled substances, as defined in the State Controlled Substances Act, and dangerous drugs as defined by law, or any drugs requiring a prescription.

   Orders prohibiting Applicant from personal use or possession of controlled substances or dangerous drugs do not apply to medications lawfully prescribed to Applicant for a bona fide illness or condition by a medical provider. During the duration of this Order, Applicant shall select one medical provider to coordinate her health care needs and to be aware of all prescriptions utilized by Applicant. Applicant shall immediately submit to that provider a copy of this Consent Agreement and Order to include the Findings of Fact and Conclusions of Law and shall execute all release of information form(s) as required by the Board or its designee. The medical provider shall, within one (1) week of the effective date of the consent agreement, inform the Board, in writing, of knowledge of Applicant’s Order and provide a list of medications prescribed for Applicant. **DURING THE DURATION OF THE CONSENT AGREEMENT, APPLICANT SHALL CAUSE ALL PROVIDERS TO NOTIFY THE BOARD OF ANY ADDITIONAL MEDICATIONS ORDERED BY THE PROVIDER. THE NOTIFICATION SHALL BE MADE IN WRITING WITHIN ONE WEEK OF THE PROVIDER’S ISSUANCE OF THE PRESCRIPTION.**
If Applicant has a lawful prescription for a narcotic or mood-altering drug, Applicant shall cause her prescribing provider to submit monthly reports to the Board by the 30th day of each month regarding the continued need for the prescribed narcotic or mood-altering medications. The Board or its designee may, at any time, request the provider to document the continued need for prescribed medications. Applicant shall keep a written record of medications taken, including over-the-counter drugs, and produce such record upon request by the Board or its designee.

7. Notification of Practice Settings

Any setting in which Applicant accepts employment, which requires RN licensure, shall be provided with a copy of the entire Order on or before the date of hire. Within seventy-two hours of Applicant’s date of hire, Applicant shall cause her immediate supervisor to inform the Board, in writing and on employer letterhead, acknowledgment of the supervisor’s receipt of a copy of this Consent Agreement and Order and the employer’s ability to comply with the conditions of probation. In the event Applicant is attending a nursing program, Applicant shall provide a copy of the entire Consent Agreement and Order to the Program Director. Applicant shall cause the Program Director to inform the Board, in writing and on school letterhead, acknowledgment of the program’s receipt of a copy of the Consent Agreement and Order and the program’s ability to comply with the conditions of probation during clinical experiences.

8. Quarterly Reports

Within thirty (30) days of the effective date of this Order, and quarterly thereafter, Applicant shall cause every employer Applicant has worked for during the quarter to submit to the Board, in writing, employer evaluations on the Board-approved form. Receipt of notice of an
unsatisfactory employer evaluation, verbal or written warning, counseling or disciplinary action, or termination from a place of employment shall constitute a violation of this paragraph. In the event Applicant is not employed in nursing or attending school during any quarter or portion thereof, Applicant shall submit to the Board, in writing, a self-report describing other employment or activities on the Board-approved form.

Receipt of confirmation of employment disciplinary action, including written counseling(s), suspension, termination or resignation in lieu of termination from a place of employment, any of which pertains to improper patient care, unsafe practice, inappropriate medication removal or administration, sub-standard documentation, or impairment on duty, positive drug test showing evidence of any drug other than an authorized drug, and/or refusal to submit to an employer requested drug screen/testing, shall be investigated by Board staff and reviewed and substantiated by the Board’s designee. If so investigated, reviewed and substantiated, the employment disciplinary action shall be considered as noncompliance with the terms of the Order.

Failure to provide employer evaluations or if not working in nursing, self-reports, within seven days of the reporting date is non-compliance with this Order and is not subject to further review.

9. Practice Under On-Site/Direct Supervision

Applicant shall practice as a professional nurse, only under the direct supervision of a professional nurse in good standing with the Board, for the first 12 months. Direct supervision is defined as having a professional nurse present on the same unit with the Applicant whenever Applicant is practicing as a professional nurse. Thereafter and until completion of probation, Applicant shall practice only under the on-site supervision of a professional nurse in
good standing with the Board. On-site supervision is defined as having a professional nurse in present in the building while Applicant is on duty. The supervising nurse shall have read this Consent Agreement and Order to include the Findings of Fact and Conclusions of Law, and Order, and shall provide input on Applicant’s employer evaluations to the Board. The supervising nurse shall be primarily one person, who may periodically delegate to other qualified personnel, who shall also have read this Consent Agreement and Order to include Findings of Fact, Conclusions of Law. In the event the assigned supervising nurse is no longer responsible for the supervision required by this paragraph, Applicant shall cause her new assigned supervising nurse to inform the Board, in writing and on employer letterhead, acknowledgment of the new supervising nurse’s receipt of a copy of this Consent Agreement and Order to include Findings of Fact and Conclusions of Law and the new supervising nurse’s agreement to comply with the conditions of probation within seven (7) days of assignment of a new supervising nurse.

10. **Access to Drugs**

Applicant shall not administer or have access to controlled substance and/or any other potentially addictive substance, including but not limited to, Nubain and Stadol medications, a minimum period of six (6) months and while on probationary status. Upon evidence of full compliance with the probationary terms, the Board or its designee shall evaluate and provide written notification of Applicant’s ability to administer controlled substances.

11. **Acceptable Hours of Work**

**Applicant shall work only the day or evening shift.** Evening shift is defined as a shift that ends prior to midnight. Within a 14-day period Applicant shall not work more than 84 scheduled hours.
Applicant may work three 12-hour shifts in one seven day period and four 12-hour
shifts in the other seven-day period, but Applicant may not work more than 3 consecutive 12-
hour shifts during this probationary period. Applicant shall not work 2 consecutive 8 hour shifts
within a 24-hour period or be scheduled to work 16 hours within a 24-hour period.

12. Registry Work Prohibited

Applicant may not work for a nurse’s registry, home health, traveling nurse agency,
any other temporary employing agencies, float pool, or position that requires on-call status.

13. Out-of-State Practice/Residence

Before any out-of-state practice or residence can be credited toward fulfillment of
these terms and conditions, it must first be approved by the Board prior to leaving the state. If
Applicant fails to receive such approval before leaving the state, none of the time spent out-of-
state will be credited to the fulfillment of the terms and conditions of this Order.

14. Release of Information Forms

Applicant shall sign all release of information forms as required by the Board or
its designee and return them to the Board within ten (10) days of the Board’s written request.
Failure to provide for the release of information, as required by this paragraph constitutes non-
compliance with this Order.

15. Interview With the Board or Its Designee

Applicant shall appear in person or if residing out of state telephonically for
interviews with the Board or its designee upon request at various intervals and with reasonable
notice.

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16. **Renewal of License**

In the event the license is scheduled to expire while this Order if in effect, Applicant shall apply for renewal of the license, pay the applicable fee, and otherwise maintain qualification to practice nursing in Arizona.

17. **Change of Employment/Personal Address/Telephone Number**

Applicant shall notify the Board, in writing, within seven (7) days of any change in nursing employment, personal address or telephone number. Changes in nursing employment include the acceptance, resignation or termination or employment.

18. **Obey All Laws**

Applicant shall obey laws/rules governing the practice of nursing in this state and obey all federal, state and local criminal laws. Applicant shall report to the board, within ten (10) days, any misdemeanor or felony arrest or conviction.

19. **Costs**

Applicant shall bear all costs of complying with this Order.

20. **Violation of Probation**

If Applicant is noncompliant with this Order in any respect, the Board or its designee may notify Applicant’s employer of the noncompliance. Additionally, the Board may revoke probation and take further disciplinary action for noncompliance with this Order after affording Applicant notice and the opportunity to be heard. If a complaint or petition to revoke probation is filed against Applicant during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.

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21. Voluntary Surrender of License

Applicant may, at any time this Order is in effect, voluntarily request surrender of her license.

22. Completion of Probation

When Applicant has nine (9) months left in the probationary period Applicant’s compliance will be reviewed by the Board’s designee. If Applicant has demonstrated full compliance with all terms of the Order, Applicant will be eligible to participate in a “stepdown” component of the Order where a report from Nurse Recovery Group will no longer be required.

Upon successful completion of the terms of the Order, Applicant shall request formal review by the Board, and after formal review by the Board, Applicant’s nursing license may be fully restored by the appropriate Board action if compliance with this Order has been demonstrated.

ARIZONA STATE BOARD OF NURSING

SEAL

Joey Ridenour, R.N., M.N., F.A.A.N.
Executive Director

Dated: March 26, 2009

COPY mailed this 4th day of May, 2009, by First Class Mail to:

KAREN R. MOCHAL
3060 SHOW LOW LAKE ROAD, APT. 206
SHOW LOW, AZ 85901

By: Trina Smith