

BEFORE THE TEXAS BOARD OF NURSING



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

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In the Matter of Registered Nurse                   §        AGREED  
License Number 697520                               §  
issued to KELLY RENEE WILSON                   §        ORDER

On this day the Texas Board of Nursing, hereinafter referred to as the Board, considered the matter of KELLY RENEE WILSON, Registered Nurse License Number 697520 hereinafter referred to as Respondent.

Information received by the Board produced evidence that Respondent may have violated Section 301.452(b)(10)&(13), Texas Occupations Code. Respondent waived informal proceedings, notice and hearing, and agreed to the entry of this Order offered on April 23, 2010, by Katherine A. Thomas, MN, RN, Executive Director, subject to ratification by the Board.

FINDINGS OF FACT

1. Prior to the institution of Agency proceedings, notice of the matters specified below in these Findings of Fact was served on Respondent and Respondent was given an opportunity to show compliance with all requirements of the law for retention of the license.
2. Respondent waived informal proceedings, notice and hearing, and agreed to the entry of this Order.
3. Respondent is currently licensed to practice professional nursing in the State of Texas.
4. Respondent received an Associate Degree in Nursing from Tarrant County Junior College, Fort Worth, Texas, on May 9, 2003. Respondent was licensed to practice professional nursing in the State of Texas on July 1, 2003.
5. Respondent's professional nursing employment history includes:

2003 - 04/07	RN	John Peter Smith Hospital Fort Worth, Texas
04/07 - 08/08	RN	VITAS Innovated Hospice Care Fort Worth, Texas

Respondent's professional nursing employment history continued:

09/08 - Present                      RN                      Season's Hospice and Palative Care  
Fort Worth, Texas

6. At the time of the initial incident, Respondent was employed as a registered nurse with VITAS Innovative Hospice Care, Fort Worth, Texas, and has been in this position for one (1) year and four (4) months.
7. On or about August 14, 2008, while employed with VITAS Innovative Hospice Care, Fort Worth, Texas, Respondent discontinued Fentanyl, Hydrocodone and Oxycodone for Patient Medical Record Number 40021453, but failed to follow the facility's policy and procedure for wastage of the unused portions of the medications. Respondent's conduct was likely to deceive the facility and placed them in violation of Chapter 481 of the Texas Health & Safety Code (Controlled Substances Act).
8. In response to the incident in Finding of Fact Number Seven (7), Respondent states she determined a more efficient method of medication disposal was for the medications to be dissolved in a bleach solution and then dumped into an absorbent compound (kitty litter) and disposed of with garbage. Respondent states she discussed this method of disposal in the Vitas "Team Meeting" on multiple occasions. Respondent states she began to carry a small bottle of bleach to her appointments - she put the unused medication in the bleach after having accounted for the medications in front of a witness.
9. On or about August 14, 2008, while employed with VITAS Innovative Hospice Care, Fort Worth, Texas, Respondent discontinued Fentanyl, Hydrocodone and Oxycodone for Patient Medical Record Number 40021453 without a valid physician's order. Respondent's conduct was likely to injure the patients in that discontinuing medications without a physician's order could result in non-efficacious treatment.
10. In response to the incident in Finding of Fact Number Nine (9), Respondent states that the patient in question was a "little woman" who was bedridden. Respondent thinks she may have had problems eating and swallowing, so she was probably being switched to Roxanol. Respondent states that she has never changed a patient's medication without first speaking to a physician personally. Respondent states she is completely certain that on the day in question, if medication was being changed, she personally spoke to a physician about the patient *prior* to making any changes.
11. On or about August 14, 2008, while employed with VITAS Innovative Hospice Care, Fort Worth, Texas, Respondent misappropriated, or failed to take precautions to prevent such misappropriation of, Fentanyl, Hydrocodone and Oxycodone from Patient Medical Record Number 40021453. Respondent's conduct was likely to defraud the facility and patient of the cost of the medications.

12. In response to the incident in Finding of Fact Number Eleven (11), Respondent states it was unreasonable for the employer to assume she was misappropriating medications when they knew her method of medication disposal. Respondent is willing to admit that she made a mistake in failing to dispose of the medication in front of a witness on August 14, 2008.
13. On or about August 14, 2008, while employed with VITAS Innovative Hospice Care, Fort Worth, Texas, Respondent engaged in the intemperate use of marijuana in that she produced a specimen for a for-cause urine drug screen which resulted positive for marijuana. Possession of marijuana is prohibited by Chapter 481 of the Texas Health & Safety Code (Controlled Substances Act). The use of marijuana by a Registered Nurse, while subject to call or duty, could impair the nurse's ability to recognize subtle signs, symptoms or changes in the patient's condition, and could impair the nurse's ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.
14. In response to the incident in Finding of Fact Number Thirteen (13), Respondent admits to occasional marijuana use. Ms. Wilson has discontinued marijuana use as of the date of the incident and would be willing to submit to further drug testing if necessary to maintain her nursing license.
15. On or about March 24, 2010, Respondent underwent a Psychological Evaluation with Emily Fallis, Ph.D., wherein Dr. Fallis advised essentially the following:

“This examiner is of the opinion that Ms. Wilson is at moderate risk for relapse in terms of substance abuse. This risk is based on her early substance abuse, which interfered with developing appropriate coping methods. This assessment of risk is based also on her use of mind-altering, illegal drugs (marijuana) throughout her life, including her entire nursing career, which ended only when she was caught. Finally, this opinion about moderate risk is based also on her recent use of another’s prescription medication even while under investigation by the Board. Furthermore, she appears to have few other coping resources, including a limited social support network. Her painful, chronic, and disheartening medical problems put her at more risk than other without such problems. She also appears to be more vulnerable to substance abuse given her serious level of depression which is layered on top of years of low-level, chronic depression...She is in need of substance abuse treatment, as well as mental health treatment. Participation in a support group such as Narcotics Anonymous would reinforce a plan of appropriate use of prescribed drugs and abstinence from illegal drugs. Finally, she is in need of a comprehensive pain management program, part of which she appears to be receiving. This examiner is of the opinion that the prognosis is good if Ms. Wilson participates in recommended treatment. Moreover, she is likely to perform adequately professionally both during and after treatment, as long as strict monitoring is in place.”

In Summary:

1. Ms. Wilson demonstrated evidence of current psychopathology, including Major Depression, Dysthymic Disorder, Cannabis Abuse (in remission), and possible abuse of benzodiazepines, through interview and observation. She has a history of methamphetamine dependence which she apparently overcame without treatment.
  2. In this examiner's opinion, without treatment Ms. Wilson may have difficulty avoiding behaviors which the Board of Nursing has identified as constituting unprofessional conduct. In particular, this examiner found evidence that she may abuse substances either while on duty as a nurse or in other contexts. This opinion is based on her general history, data generated during the evaluation, and review of records.
  3. Without treatment, Ms. Wilson may have difficulty behaving consistently in accordance with the requirements of Rules 213.27 to 213.29 at 22 TEX ADMIN CODE, as well as the minimum standards set by the Board's rules 217.11 at 22 TEX ADMIN CODE and generally accepted nursing standards."
16. 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 to prove a violation of Section 301.452(b)(10)&(13), Texas Occupations Code, and 22 TEX. ADMIN. CODE §§217.11(1)(A),(C)&(D) and 217.12(1)(A),(1)(B),(1)(C),(4),(6)(G),(10)(A),(10)(C),(10)(D)&(11)(B).
4. The evidence received is sufficient cause pursuant to Section 301.452(b), Texas Occupations Code, to take disciplinary action against Registered Nurse License Number 697520, heretofore issued to KELLY RENEE WILSON, including revocation of Respondent's license to practice nursing in the State of Texas.

ORDER

IT IS THEREFORE AGREED and ORDERED, subject to ratification by the Texas Board of Nursing, that Registered Nurse License Number 697520, previously issued to KELLY RENEE WILSON, to practice nursing in Texas is hereby SUSPENDED and said suspension is ENFORCED until Respondent completes a treatment program approved by the Board, provides documentation of successful completion, and has obtained twelve (12) consecutive months of sobriety. Any relapse prior to the completion of the twelve (12) consecutive months of sobriety will result in an extension of the enforced suspension until such twelve (12) consecutive months of sobriety and additional treatment have been attained.

IT IS FURTHER ORDERED that Permanent Certificate Number 697520 previously issued to KELLY RENEE WILSON, upon receipt of this Order, be immediately delivered to the office of the Texas Board of Nursing.

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

IT IS FURTHER AGREED and ORDERED that while Respondent's license is encumbered by this order the Respondent may not work outside the State of Texas pursuant to a nurse licensure compact privilege without the written permission of the Texas Board of Nursing and the Board of Nursing in the party state where Respondent wishes to work.

IT IS FURTHER AGREED, upon verification of successful completion of the approved treatment and twelve (12) consecutive months of sobriety as set out in this Order, the Suspension will be STAYED, and RESPONDENT will be placed on PROBATION for three (3) years with the following agreed terms of probation:

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

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

(3) RESPONDENT SHALL, within one (1) year of the suspension being stayed, successfully complete a course in Texas nursing jurisprudence and ethics. RESPONDENT SHALL obtain Board approval of the course prior to enrollment only if the course is not being offered by a pre-approved provider. Home study courses and video programs will not be approved. In order for the course to be approved, the target audience shall include nurses. It shall be a minimum of six (6) hours in length. The course's content shall include the Nursing Practice Act, standards of practice, documentation of care, principles of nursing ethics, confidentiality, professional boundaries, and the Board's Disciplinary Sanction Policies regarding: Sexual Misconduct; Fraud, Theft and Deception; Nurses with Substance Abuse, Misuse, Substance Dependency, or other Substance Use Disorder; and Lying and Falsification. Courses focusing on malpractice issues will not be accepted. RESPONDENT SHALL CAUSE the sponsoring institution to submit a Verification of Course Completion form, provided by the Board, to the Office of the Board to verify RESPONDENT's successful completion of the course. This course shall be taken in addition to any other courses stipulated in this Order, if any, and in addition to any continuing education requirements the Board has for relicensure. *Board-approved courses may be found at the following Board website address:*  
<http://www.bon.state.tx.us/disciplinaryaction/stipscourses.html>

(4) RESPONDENT SHALL, within one (1) year of the suspension being stayed, successfully complete a course in medication administration. RESPONDENT SHALL obtain Board approval of the course prior to enrollment only if the course is not being offered by a pre-approved provider. Home study courses and video programs will not be approved. In order for the course to be approved, the target audience shall include Nurses. The didactic portion of this course shall be a minimum of six (6) hours in length. The course shall contain a minimum twenty-four (24) hour clinical component which is to be provided by the same Registered Nurse who provides the didactic portion of this course. The clinical component SHALL focus on tasks of medication administration only. In order for the course to be approved, the course's content shall include: a review of proper administration procedures for all standard routes; computation of drug dosages; the five (5) rights of medication administration; factors influencing the choice of route; and possible adverse effects resulting from improper administration. 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. RESPONDENT SHALL successfully complete both the didactic and clinical portions of the course to satisfy this stipulation. RESPONDENT SHALL CAUSE the instructor to submit a Verification of Course Completion form, provided by the Board, to the office of the Board to verify RESPONDENT's successful completion of the course. This course shall be taken in addition to any other courses stipulated in this Order, if any, and in addition to any continuing education requirements the Board has for relicensure. *Board-approved courses may be found at the following Board website address:*

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

(5) RESPONDENT SHALL, within one (1) year of the suspension being stayed, successfully complete a course in nursing documentation. RESPONDENT SHALL obtain Board approval of the course prior to enrollment only if the course is not being offered by a pre-approved provider. Home study courses and video programs will not be approved. The course shall be a minimum of six (6) hours in length of classroom time. In order for the course to be approved, the target audience shall include Nurses. The course shall include content on the following: nursing standards related to accurate and complete documentation; legal guidelines for recording; methods and processes of recording; methods of alternative record-keeping; and computerized documentation. RESPONDENT SHALL cause the instructor to submit a Verification of Course Completion form, provided by the Board, to the Board's office to verify RESPONDENT's successful completion of the course. This course shall be taken in addition to any other courses stipulated in this Order, if any, and in addition to any continuing education requirements the Board has for relicensure. *Board-approved courses may be found at the following Board website address: <http://www.bon.state.tx.us/disciplinaryaction/stipscourses.html>.*

(6) RESPONDENT SHALL, within one (1) year of the suspension being stayed, successfully complete 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 program, RESPONDENT SHALL SUBMIT the continuing education certificate of completion for this program to the Board's office, to the attention of Monitoring. This course is to be taken in addition to any continuing education requirements the Board may have for relicensure. *Information regarding this workshop may be found at the following web address: <http://ncsbn.hivelive.com/hives/a0f6f3e8a0/summary>.*

**IT IS FURTHER AGREED, SHOULD RESPONDENT PRACTICE AS A NURSE IN THE**

**STATE OF TEXAS, RESPONDENT WILL PROVIDE DIRECT PATIENT CARE AND PRACTICE IN A HOSPITAL, NURSING HOME, OR OTHER CLINICAL SETTING AND RESPONDENT MUST WORK IN SUCH SETTING A MINIMUM OF SIXTY-FOUR (64) HOURS PER MONTH UNDER THE FOLLOWING PROBATION CONDITIONS FOR THREE (3) YEARS OF EMPLOYMENT. THE LENGTH OF THE PROBATIONARY PERIOD WILL BE EXTENDED UNTIL SUCH THIRTY-SIX (36) MONTHS HAVE ELAPSED. PERIODS OF UNEMPLOYMENT OR OF EMPLOYMENT THAT DO NOT REQUIRE THE USE OF A REGISTERED NURSE (RN) LICENSE WILL NOT APPLY TO THIS PROBATIONARY PERIOD:**

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

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

(9) For the first year of employment as a nurse under this Order, RESPONDENT SHALL be directly supervised by a Registered Nurse. Direct supervision requires another nurse to be working on the same unit as RESPONDENT and immediately available to provide assistance and intervention. RESPONDENT SHALL work only on regularly assigned, identified and predetermined unit(s). The RESPONDENT SHALL NOT be employed by a nurse registry,

temporary nurse employment agency, hospice, or home health agency. RESPONDENT SHALL NOT be self-employed or contract for services. Multiple employers are prohibited.

(10) For the remainder of the probation period, RESPONDENT SHALL be supervised by a Registered 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 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.

(11) RESPONDENT SHALL NOT practice as a nurse on the night shift, rotate shifts, work overtime, accept on-call assignments, or be used for coverage on any unit other than the identified, predetermined unit(s) to which Respondent is regularly assigned for one (1) year of employment as a nurse.

(12) RESPONDENT SHALL NOT practice as a nurse in any critical care area for one (1) year of employment as a nurse. Critical care areas include, but are not limited to, intensive care units, emergency rooms, operating rooms, telemetry units, recovery rooms, and labor and delivery units.

(13) RESPONDENT SHALL NOT administer or have any contact with controlled substances, Nubain, Stadol, Dalgan, Ultram, or other synthetic opiates for one (1) year of employment as a nurse.

(14) RESPONDENT SHALL CAUSE each employer to submit, on forms provided

to the Respondent by the Board, periodic reports as to RESPONDENT's capability to practice nursing. These reports shall be completed by the nurse who supervises the RESPONDENT. These reports shall be submitted by the supervising nurse to the office of the Board at the end of each three (3) months for three (3) years of employment as a nurse.

(15) RESPONDENT SHALL abstain from the consumption of alcohol, Nubain, Stadol, Dalgan, Ultram, or other synthetic opiates, and/or the use of controlled substances, except as prescribed by a licensed practitioner for a legitimate purpose. 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 prescriptions for controlled substances are required for periods of two (2) weeks or longer, the Board may require and RESPONDENT SHALL submit to an evaluation by a Board approved physician specializing in Pain Management or Psychiatry. The performing evaluator will submit a written report to the Board's office, including results of the evaluation, clinical indications for the prescriptions, and recommendations for on-going treatment within thirty (30) days from the Board's request.**

(16) RESPONDENT SHALL submit to random periodic screens for controlled substances, tramadol hydrochloride (Ultram), and alcohol. For the first three (3) month period, random screens shall be performed at least once per week. For the next three (3) month period, random screens shall be performed at least twice per month. For the next six (6) month period, random screens shall be performed at least once per month. For the remainder of the probation period, random screens shall be performed at least once every three (3) months. All random screens SHALL BE conducted through urinalysis. Screens obtained through urinalysis are the sole method

accepted by the Board.

Specimens shall be screened for at least the following substances:

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

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

All screens shall be properly monitored and produced in accordance with the Board's policy on Random Drug Testing. A complete chain of custody shall be maintained for each specimen obtained and analyzed. RESPONDENT SHALL be responsible for the costs of all random drug screening during the probation period.

Any positive result for which the nurse does not have a valid prescription or failure to report for a drug screen, which may be considered the same as a positive result, will be regarded as non-compliance with the terms of this Order and may subject the nurse to further disciplinary action including EMERGENCY SUSPENSION pursuant to Section 301.4551, Texas Occupations Code, or REVOCATION of Respondent's license and nurse licensure compact privileges, if any, to practice nursing in the State of Texas.

(17) RESPONDENT SHALL participate in therapy with a "professional counselor" possessing credentials approved by the Board. RESPONDENT SHALL CAUSE the therapist to submit written reports, on forms provided by the Board, as to the RESPONDENT's progress in therapy, rehabilitation and capability to safely practice professional nursing. The report must indicate whether or not the RESPONDENT's stability is sufficient to provide direct patient care

safely. Such reports are to be furnished each and every month for three (3) months. If therapy is recommended for beyond three (3) months, the reports shall then be required at the end of each three (3) month period for the duration of the probation period, or until RESPONDENT is dismissed from therapy.

(18) RESPONDENT SHALL attend at least two (2) support group meetings each week, one of which must be for substance abuse and provided by Alcoholics Anonymous, Narcotics Anonymous, or another comparable recovery program that has been pre-approved by the Board. RESPONDENT SHALL provide acceptable evidence of attendance. Acceptable evidence shall consist of a written record of at least: the date of each meeting; the name of each group attended; and the signature and printed name of the chairperson of each group attended by RESPONDENT. RESPONDENT SHALL submit the required evidence on the forms provided by the Board at the end of every three (3) months. No duplications, copies, third party signatures, or any other substitutions will be accepted as evidence.

(19) RESPONDENT SHALL undergo a pain management evaluation. The evaluation shall be performed by a Board approved Medical Doctor or Doctor of Osteopathy, licensed by the Texas Medical Board, and certified as a Diplomat with the American Board of Pain Medicine. The evaluation shall be completed within sixty (60) days from the date of this Order. RESPONDENT SHALL CAUSE the performing physician to send a report of the evaluation to the Board office. The report shall include:

1. The clinical indications and medication regimen, if any, consisting of non-addictive, non-mood-altering substance(s), or rationale for the chronic use of controlled substances;
2. A statement as to the RESPONDENT's fitness to safely practice nursing

while taking the prescribed medication(s); and

3. Recommendations for pain management therapy and/or other follow-up(s).

If the evaluation states that Respondent lacks fitness to practice nursing, RESPONDENT SHALL cease to provide direct patient care until such time that the same evaluator deems Respondent safe to return to direct patient care. Direct patient care involves a personal relationship between the Nurse and the client, and includes, but is not limited to: teaching; counseling; assessing the client's needs and strengths; and providing skilled nursing care. If the results of the evaluation reveal further violations of the Nursing Practice Act, further disciplinary action may be taken, including revocation of Respondent's license to practice nursing in the State of Texas.

RESPONDENT SHALL comply with the recommendations for pain management and/or other follow-ups. If pain management therapy is recommended, RESPONDENT SHALL participate in pain management therapy with a Board approved Medical Doctor or Doctor of Osteopathy, licensed by the Texas Medical Board, and certified as a Diplomat with the American Board of Pain Medicine. RESPONDENT SHALL CAUSE the physician to submit written reports to the Board, which shall include, at a minimum, the clinical indications and rationale for the chronic use of controlled substances, RESPONDENT's progress and compliance with pain management therapy, and a prognosis as to RESPONDENT's ability to safely practice nursing in a direct patient care setting. Such reports are to be furnished each and every month for three (3) months. If therapy is recommended for beyond three (3) months, the reports shall then be required at the end of each three (3) month period for the duration of the probation period, or until RESPONDENT no longer requires the use of addictive, mood-altering, and/or controlled substances.

IT IS FURTHER AGREED and ORDERED that if during the period of probation, an additional allegation, accusation, or petition is reported or filed against the Respondent's license,

the probationary period shall not expire and shall automatically be extended until the allegation, accusation, or petition has been acted upon by the Board.

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

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

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RESPONDENT'S CERTIFICATION

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

Signed this 27 day of Sept, 2010.

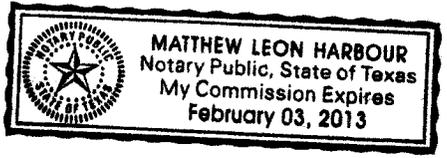
Kelly Renee Wilson  
KELLY RENEE WILSON, Respondent

Sworn to and subscribed before me this 27 day of September, 2010.

SEAL

Matthew Leon Harbour  
Matthew Leon Harbour

Notary Public in and for the State of Texas



Approved as to form and substance.  
Leslie J. Burgoyne  
Leslie J. Burgoyne, Attorney for Respondent

Signed this 27 day of September, 2010.

WHEREFORE, PREMISES CONSIDERED, the Texas Board of Nursing does hereby ratify and adopt the Agreed Order that was signed on the 27th day of September, 2010, by KELLY RENEE WILSON, Registered Nurse License Number 697520, and said Order is final.

Effective this 21st day of October, 2010.



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