

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

In the Matter of Vocational Nurse License Number 179171 § AGREED
issued to CHAD LANE TEAGUE § ORDER

On this day the Texas Board of Nursing, hereinafter referred to as the Bo considered the matter of CHAD LANE TEAGUE, Vocational Nurse License Number 1791 hereinafter referred to as Respondent.

Information received by the Board produced evidence that Respondent may have violated Section 301.452(b)(9),(10),(12)&(13), Texas Occupations Code. Respondent waived representation by counsel, informal proceedings, notice and hearing, and agreed to the entry of this Order offered on December 3, 2009, 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 representation by counsel, informal proceedings, notice and hearing, and agreed to the entry of this Order.
3. Respondent is currently licensed to practice vocational nursing in the State of Texas.
4. Respondent received a Certificate in Vocational Nursing from St. Philips College, San Antonio, Texas, on December 14, 2000. Respondent was licensed to practice vocational nursing in the State of Texas on February 8, 2001.
5. Respondent's vocational nursing employment history includes:

03/01 - 10/04	Unknown	
11/04 - 04/05	LVN	Mathis Nursing Center Mathis, TX

Respondent's vocational nursing employment history (continued):

04/05 - 01/06	LVN	Three Rivers Nursing Home Three Rivers, TX
01/06 - 01/07	LVN	Odessa Regional Hospital Odessa, TX
02/07 - Present	Unknown	

6. At the time of the incidents in Findings of Fact Numbers Seven (7) through Eleven (11) Respondent was employed as a Licensed Vocational Nurse with Odessa Regional Hospital, Odessa, Texas, and had been in this position for approximately one (1) year.
7. On or about January 3, 2007, through January 4, 2007, while employed as a Licensed Vocational Nurse with Odessa Regional Hospital, Odessa, Texas, Respondent withdrew medications from the Medication Dispensing System (Pyxis) for patients in excess frequency/dosage of physicians' orders, as follows:

Date	Patient ID #	Physician's Orders	Medication Dispensing System (Pyxis)	Medication Administration Record (MAR)	Nurses Notes	Wastage
01/03/07	0700200094	Demerol 25mg IV Q 2-3hrs PRN Pain	(1) Meperidine HCL 25mg/1ml Inj @ 05:58	Not documented as administered	Not documented as administered	None
01/03/07	0700200094	Demerol 25mg IV Q 2-3hrs PRN Pain	(2) Meperidine HCL 25mg/1ml Inj @ 06:20	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(1) Meperidine HCL 50mg/1ml Inj @ 01:17	Not documented as administered	"Medicated (see MAR" @ 01:15	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 01:52	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 02:05	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 03:41	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 04:12	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 05:57	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 07:16	Not documented as administered	"Medicated (see MAR" @ 08:20	None

01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 19:23	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 19:48	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 20:10	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(1) Meperidine HCL 50mg/1ml Inj @ 21:12	Not documented as administered	"Medicated (see MAR)" @ 21:03	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(1) Meperidine HCL 50mg/1ml Inj @ 21:13	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 22:16	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/ml @ 22:17	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 22:59	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/1ml @ 22:59	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(1) Meperidine HCL 50mg/1ml Inj @ 23:49	Not documented as administered	"Medicated (see MAR)" @ 23:21	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 00:58	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 01:23	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg.ml @ 03:00	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 03:01	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/ml @ 03:46	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 03:46	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(1) Meperidine HCL 50mg/ml Inj @ 06:16	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/ml @ 06:17	Not documented as administered	Not documented as administered	None

01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(1) Meperidine HCL 50mg/1ml Inj @ 06:19	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 06:56	Not documented as administered	Not documented as administered	None

Respondent's conduct was likely to injure the patient in that the administration of narcotics in excess of, or without physicians' orders, could result in the patient suffering from adverse reactions.

- 8 On or about January 3, 2007, through January 4, 2007, while employed as a Licensed Vocational Nurse with Odessa Regional Hospital, Odessa, Texas, Respondent withdrew medication from the medication dispensing system (PYXIS) for patients, but failed to document, or accurately document, the administration of the narcotics in the medical records for the patients, as follows:

Date	Patient ID #	Physician's Orders	Medication Dispensing System (Pyxis)	Medication Administration Record (MAR)	Nurses Notes	Wastage
01/03/07	0700200094	Phenergan 25mg IM Q 3-4hrs PRN	(1) Promethazine Inj 25mg/1ml @ 04:11	25mg administered @ 01:35	Not documented as administered	None
01/03/07	0700200094	Demerol 25mg IV Q 2-3hrs PRN Pain	(1) Meperidine HCL 25mg/1ml Inj @ 05:58	Not documented as administered	Not documented as administered	None
01/03/07	0700200094	Phenergan 25mg IM Q 3-4hrs PRN	(1) Promethazine 25mg/1ml Inj @ 05:58	Not documented as administered	Not documented as administered	None
01/03/07	0700200094	Demerol 25mg IV Q 2-3hrs PRN Pain	(2) Meperidine HCL 25mg/1ml Inj @ 06:20	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 01:52	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 02:05	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 03:41	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 04:12	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 05:57	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 19:23	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-	(2) Meperidine HCL 50mg/1ml Inj @ 19:48	Not documented as administered	Not documented as administered	None

		6 hrs PRN				
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 20:10	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(1) Meperidine HCL 50mg/1ml Inj @ 21:13	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 22:16	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/ml @ 22:17	Not documented as administered	Not documented as administered	None
01/03/07	0636300024	Morphine 2mg IV Q H PRN pain	(1) Morphine Inj 2mg/ml @ 22:57	2mg @ 20:18	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 22:59	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/1ml @ 22:59	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 00:58	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 01:23	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/ml @ 03:00	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 03:01	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/ml @ 03:46	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 03:46	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(1) Meperidine HCL 50mg/ml Inj @ 06:16	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/ml @ 06:17	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(1) Meperidine HCL 50mg/1ml Inj @ 06:19	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 06:56	Not documented as administered	Not documented as administered	None
01/04/07	0700300165	Demerol 25-50mg IV Q 4-6 Hrs PRN Pain	(1) Meperidine HCL 50mg/1ml Inj @ 04:52	Not documented as administered	Not documented as administered	None

Respondent's conduct was likely to injure the patient in that subsequent care givers would rely on her documentation to further medicate the patient which could result in an overdose.

9. On or about January 3, 2007, through January 4, 2007, while employed as a Licensed Vocational Nurse with Odessa Regional Hospital, Odessa, Texas, Respondent withdrew medication from the medication dispensing system (PYXIS) for patients, but failed to properly waste unused portions, if any, of the medication, as follows:

Date	Patient ID #	Physician's Orders	Medication Dispensing System (Pyxis)	Medication Administration Record (MAR)	Nurses Notes	Wastage
01/03/07	0700200094	Demerol 25mg IV Q 2-3hrs PRN Pain	(2) Meperidine HCL 25mg/1ml Inj @ 01:14	25mg administered @ 01:35	Not documented as administered	None
01/03/07	0700200094	Demerol 25mg IV Q 2-3hrs PRN Pain	(2) Meperidine HCL 25mg/1ml Inj @ 04:11	25mg administered @ 05:00	Not documented as administered	None
01/03/07	0700200094	Demerol 25mg IV Q 2-3hrs PRN Pain	(1) Meperidine HCL 25mg/1ml Inj @ 05:58	Not documented as administered	Not documented as administered	None
01/03/07	0700200094	Phenergan 25mg IM Q 3-4hrs PRN	(1) Promethazine 25mg/1ml Inj @ 05:58	Not documented as administered	Not documented as administered	None
01/03/07	0700200094	Demerol 25mg IV Q 2-3hrs PRN Pain	(2) Meperidine HCL 25mg/1ml Inj @ 06:20	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 01:52	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 02:05	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 03:41	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 04:12	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 05:57	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 19:23	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 19:48	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 20:10	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with	(1) Meperidine HCL	Not documented as	Not documented	None

		Vistaril 23mg IM Q 4-6 hrs PRN	50mg/1ml Inj @ 21:13	administered	as administered	
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 22:16	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/ml @ 22:17	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 22:59	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/1ml @ 22:59	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 00:58	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 01:23	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg.ml @ 03:00	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 03:01	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/ml @ 03:46	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 03:46	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(1) Meperidine HCL 50mg/ml Inj @ 06:16	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/ml @ 06:17	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(1) Meperidine HCL 50mg/1ml Inj @ 06:19	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 06:56	Not documented as administered	Not documented as administered	None
01/04/07	0700300165	Demerol 25-50mg IV Q 4-6 Hrs PRN Pain	(1) Meperidine HCL 50mg/1ml Inj @ 04:52	Not documented as administered	Not documented as administered	None

Respondent's conduct was likely to deceive the hospital pharmacy and placed them in violation of Chapter 481 of the Texas Health and Safety Code (Controlled Substance Act).

10. On or about January 3, 2007, through January 4, 2007, while employed as a Licensed Vocational Nurse with Odessa Regional Hospital, Odessa, Texas, Respondent misappropriated, or failed to take precautions to prevent such misappropriation, of narcotics, as follows:

Date	Patient ID #	Physician's Orders	Medication Dispensing System (Pyxis)	Medication Administration Record (MAR)	Nurses Notes	Wastage
01/03/07	0700200094	Demerol 25mg IV Q 2-3hrs PRN Pain	(2) Meperidine HCL 25mg/1ml Inj @ 01:14	25mg administered @ 01:35	Not documented as administered	None
01/03/07	0700200094	Demerol 25mg IV Q 2-3hrs PRN Pain	(2) Meperidine HCL 25mg/1ml Inj @ 04:11	25mg administered @ 05:00	Not documented as administered	None
01/03/07	0700200094	Demerol 25mg IV Q 2-3hrs PRN Pain	(1) Meperidine HCL 25mg/1ml Inj @ 05:58	Not documented as administered	Not documented as administered	None
01/03/07	0700200094	Phenergan 25mg IM Q 3-4hrs PRN	(1) Promethazine 25mg/1ml Inj @ 05:58	Not documented as administered	Not documented as administered	None
01/03/07	0700200094	Demerol 25mg IV Q 2-3hrs PRN Pain	(2) Meperidine HCL 25mg/1ml Inj @ 06:20	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 01:52	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 02:05	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 03:41	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 04:12	Not documented as administered	Not documented as administered	None
01/03/07	0636400071	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 05:57	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 19:23	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 19:48	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 20:10	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(1) Meperidine HCL 50mg/1ml Inj @ 21:13	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-	(2) Meperidine HCL 50mg/1ml Inj @ 22:16	Not documented as administered	Not documented as administered	None

		6 hrs PRN				
01/03/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/ml @ 22:17	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 22:59	Not documented as administered	Not documented as administered	None
01/03/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/1ml @ 22:59	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 00:58	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 01:23	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg.ml @ 03:00	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 03:01	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/ml @ 03:46	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 03:46	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(1) Meperidine HCL 50mg/ml Inj @ 06:16	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Phenergan 25-50mg IM Q 4-6hrs PRN	(1) Promethazine Inj 25mg/ml @ 06:17	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(1) Meperidine HCL 50mg/1ml Inj @ 06:19	Not documented as administered	Not documented as administered	None
01/04/07	0700300156	Demerol 50mg with Vistaril 23mg IM Q 4-6 hrs PRN	(2) Meperidine HCL 50mg/1ml Inj @ 06:56	Not documented as administered	Not documented as administered	None
01/04/07	0700300165	Demerol 25-50mg IV Q 4-6 Hrs PRN Pain	(1) Meperidine HCL 50mg/1ml Inj @ 04:52	Not documented as administered	Not documented as administered	None

Respondent's conduct was likely to defraud the facility and patients of the cost of the medication.

11. On or about January 3, 2007, through January 4, 2007, while employed as a Licensed Vocational Nurse with Odessa Regional Hospital, Odessa, Texas, Respondent lacked fitness to practice vocational nursing in that he had slurred speech, was falling asleep mid-sentence, and was not coherent. Respondent's condition could have affected his ability to recognize subtle signs, symptoms or changes in patients' conditions, and could have affected her ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patients in potential danger.

12. In response to Findings of Fact Numbers Seven (7) through Eleven (11), Respondent states that the Pyxis System at Odessa Regional Hospital was different from any other Pyxis system that he has used in the past. Respondent states that the Pyxis machine would take a long time to log the user off. Respondent states that he had occasionally returned to the system to find that he was still logged in, which would give someone an opportunity to remove narcotics under his name. Additionally, Respondent states that it was common practice to waste narcotics at a different location and enter the waste at a later time in the Pyxis system. Respondent states that he recalls several occasions where the official waste was done at the end of the shift.
13. In Response to Finding of Fact Number Twelve (12), Respondent states that the night in question was very stressful because they were short handed and busy. Respondent admits to taking Xanax while on shift. Respondent states he had never taken the medication at work before and did not know how the medication would affect him. Respondent states that after taking the medication, he had become very drowsy and had informed the charge nurse of the situation.
14. On or about July 29, 2009, Respondent underwent a psychological evaluation, conducted by Dr. Joyce M. Gayles, PhD, Clinical Psychologist, Bellaire, Texas. Dr. Gayles concludes that Respondent is in need of therapeutic intervention. Dr. Gayles states that Respondent is not classifiable as substance dependent, but he has been relying heavily upon Xanax to cope with stress and anxiety, which could lead to problems related to drug use. Dr. Gayles states that psychotropic medication for treating Respondent's anxiety and psychotherapy aimed at lowering his anxiety and providing support and guidance would be beneficial. Additionally, Dr. Gayles states that Respondent would also benefit from a review of generally accepted nursing standards, standards of patient care, and protocols related to the administration of medication.
15. 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 violation of Section 301.452(b)(9),(10),(12)&(13), Texas Occupations Code, 22 TEX. ADMIN. CODE §217.11(1)(A),(B),(C)&(D)(iv), and 22 TEX. ADMIN. CODE §217.12(1)(A)&(B),(4),(5),(6)(G),(10)(A),(B)&(C)&(11)(B).

4. The evidence received is sufficient cause pursuant to Section 301.452(b), Texas Occupations Code, to take disciplinary action against Vocational Nurse License Number 179171, heretofore issued to CHAD LANE TEAGUE, including revocation of Respondent's license to practice vocational nursing in the State of Texas.

ORDER

IT IS THEREFORE AGREED and ORDERED, subject to ratification by the Texas Board of Nursing, that RESPONDENT SHALL receive the sanction of a WARNING WITH STIPULATIONS, and 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.

IT IS FURTHER AGREED and ORDERED that this Order SHALL be applicable to Respondent's multistate licensure privilege, if any, to practice nursing in compact states.

IT IS FURTHER AGREED and ORDERED that while Respondent's license is encumbered by this Order, Respondent may not work outside the State of Texas pursuant to a multistate licensure 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 that:

(1) RESPONDENT SHALL deliver the wallet-sized license issued to CHAD LANE TEAGUE, to the office of the Texas Board of Nursing within ten (10) days from the date of ratification of this Order.

(2) RESPONDENT SHALL pay a monetary fine and monitoring fee in the amount of two hundred fifty (\$250.00) dollars. RESPONDENT SHALL pay this fine within forty-five (45) days of entry of this Order. Payment is to be made directly to the Texas Board of Nursing in the form of cashier's check or U.S. money order. Partial payments will not be accepted.

(3) RESPONDENT SHALL, within one (1) year of entry of this Order, 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 entry of this Order, 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. The didactic portion of this course shall be a minimum of sixty-four (64) hours in length and the course shall include a minimum of forty-eight (48) hours in clinical practice 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 entry of this Order, 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 entry of this Order, 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 STIPULATIONS FOR ONE (1) YEAR OF EMPLOYMENT. THE LENGTH OF THE STIPULATION PERIOD WILL BE EXTENDED UNTIL SUCH TWELVE (12) MONTHS HAVE ELAPSED. PERIODS OF UNEMPLOYMENT OR OF EMPLOYMENT THAT DO NOT REQUIRE THE USE OF A VOCATIONAL NURSE (LVN) LICENSE WILL NOT APPLY TO THIS STIPULATION PERIOD:

(7) RESPONDENT SHALL notify each present employer in nursing of this Order of the Board and the stipulations 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 present employer within five (5) days of receipt of this Order. RESPONDENT SHALL notify all future employers in nursing of this Order of the Board and the stipulations 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) RESPONDENT SHALL be supervised by a Registered Nurse or 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 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.

(10) 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 Registered Nurse or Licensed Vocational 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) month period for one (1) year of employment as a nurse.

(11) 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.

(12) 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. All random screens SHALL BE conducted through urinalysis. Screens obtained through urinalysis is 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 stipulation 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 stipulation 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 multistate licensure privileges, if any, to practice nursing in the State of Texas.

(13) 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 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 stipulation period, or until RESPONDENT is dismissed from therapy.

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

RESPONDENT'S CERTIFICATION

I understand that I have the right to legal counsel prior to signing this Agreed Order. I waive representation by counsel. 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 vocational nursing in the State of Texas, as a consequence of my noncompliance.

Signed this ____ day of _____, 20____.

CHAD LANE TEAGUE, Respondent

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

SEAL

Notary Public in and for the State of _____

RESPONDENT'S CERTIFICATION

I understand that I have the right to legal counsel prior to signing this Agreed Order. I waive representation by counsel. 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 vocational nursing in the State of Texas, as a consequence of my noncompliance.

Signed this 24 day of Dec, 2009.

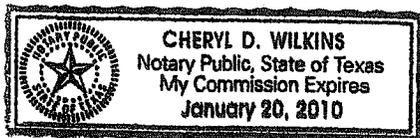

CHAD LANE TEAGUE, Respondent

Sworn to and subscribed before me this 24 day of Dec, 2009.

SEAL



Notary Public in and for the State of TEXAS



WHEREFORE, PREMISES CONSIDERED, the Texas Board of Nursing does hereby ratify and adopt the Agreed Order that was signed on the 24th day of December, 2009, by CHAD LANE TEAGUE, Vocational Nurse License Number 179171, and said Order is final.

Effective this 9th day of February, 2010.



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