



I do hereby certify this to be a complete, accurate, and true copy of the document which is on file or is of record in the offices of the Texas Board of Nursing.  
*Katherine A. Thomas*  
Executive Director of the Board

BEFORE THE BOARD OF NURSE EXAMINERS  
FOR THE STATE OF TEXAS

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In the Matter of Vocational Nurse License Number 119315           §     **AGREED**  
Issued to MARY ANNE CROCKETT   §     **ORDER**

On this day the Board of Nurse Examiners for the State of Texas, hereinafter referred to as the Board, considered the matter of MARY ANNE CROCKETT, Vocational Nurse License Number 119315, hereinafter referred to as Respondent.

Information received by the Board produced evidence that Respondent may have violated Section 302.402(a)(10), Texas Occupations Code. Respondent waived informal conference, notice and hearing, and agreed to the entry of this Order offered on May 5, 2006, 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 conference, 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 Valley College of Medical and Dental Careers, North Hollywood, California, on December 23, 1983. Respondent was licensed to practice vocational nursing in the State of Texas on December 2, 1987.
5. Respondent's complete vocational nursing employment history is unknown.
6. At the time of the initial incident, Respondent was employed as a Licensed Vocational Nurse with Nursefinders, Inc., Fort Worth, Texas, and had been in this position for approximately six (6) years and eight (8) months.

7. On or about November 7, 2002 through January 1, 2003, while employed as a Licensed Vocational Nurse with Nursefinders, Inc., Fort Worth, Texas, and assigned at John Peter Smith (JPS) Hospital, Fort Worth, Texas, Respondent withdrew Morphine 10mg/1ml Injectables, Hydrocodone/APAP 5/500mg Tablets, and Chlordiazepoxide 25mg Capsules from the Medication Dispensing System (Pyxis) for patients, but failed to document, or accurately document the administration of the medications in the patients' 24 Hour Flow Sheets and Nurse's Notes, as follows:

Patient and MR #	Physician's Order	Medication Dispensing System Record (Pyxis) Date/Time and Dose	24 Hour Flow Sheets	Nurse's Notes
QF 31372410	MS04 2-10mg IV titrated for relief of moderate or severe pain	Morphine 10mg/1ml Inj 11-07-02 @ 14:56 (1)	Not Documented	No entry by Respondent between 1400 and 1600 indicating that patient had any c/o pain.
QF 31372410	MS04 2-10mg IV titrated for relief of moderate or severe pain	Morphine 10mg/1ml Inj 11-07-02 @ 19:03 (1)	Not Documented	No entry by Respondent between 1600 and 1900 indicating that patient had any c/o pain. 1900 entry by Respondent indicates patient was being discharged at that time. (NOTE: Respondent discharged patient at 1848.)
MDN 4336780	Vicodin 5/500 1 or 2 po q4-6h prn	Hydrocodone/APAP 5/500mg Tab 11-08-02 @ 18:58 (2)	Not Documented	1700 entry by Respondent states in part: "Patient in no acute distress". Next entry made by Respondent (1900 entry) states: Report given to on-coming shift.
EA 31360746	Lortab 5/500 2 po q4h prn pain	Hydrocodone/APAP 5/500mg Tab 11-09-02 @ 08:00 (1)	Not Documented	0800 entry by Respondent states: Pt requesting pain pill for c/o pain 9/10 generalized discomfort med with Hydrocodone 5/500 1 po as ordered.
EA 31360746	Lortab 5/500 2 po q4h prn pain	Hydrocodone/APAP 5/500mg Tab 11-09-02 @ 14:39 (1)	Not Documented	1330 entry by Respondent states: Pt's sister here and d/c instructions gone over with her. Verbalized understanding. Sister down to pharmacy to pick up pt's d/c meds.
HS 31383102	Librium 25mg po q6h	Chlordiazepoxide 25mg Cap 11-14-02 @ 10:08 (2)	Not Documented	No entry by Respondent between 1000 and 1200 indicating that any Librium was given to patient.
DR 30344238	MS04 4mg IM q3-4h prn pain	Morphine 10mg/1ml Inj 11-14-02 @ 09:04 (1)	Not Documented	0830 entry by Respondent states in part: "Patient med with MS04 4mg for c/o abd pain". Next entry by Respondent (1130 entry) states in part: "Patient med with MS04 4mg".
DR 30344238	MS04 4mg IM q3-4h prn pain	Morphine 10mg/1ml Inj 11-14-02 @ 13:46 (1)	Not Documented	1300 entry by Respondent states in part: "Patient sleeping on these rounds". Next entry by Respondent (1530 entry) states in part: Patient "med with MS04 4mg"

Patient and MR #	Physician's Order	Medication Dispensing System Record (Pyxis) Date/Time and Dose	24 Hour Flow Sheets	Nurse's Notes
DR 30344238	MS04 4mg IM q3-4h prn pain	Morphine 10mg/1ml Inj 11-14-02 @ 18:08 (1)	Not Documented	No entry by Respondent between 1630 and 1900 indicating that patient was given any Morphine.
KRH 2211845	MS04 1-5mg IVP q2h prn breakthrough pain	Morphine 10mg/1ml Inj 12-01-02 @ 11:09 (1)	Not Documented	No entry by Respondent between 0930 and 1400 indicating that patient was given any Morphine.
KRH 2211845	MS04 1-5mg IVP q2h prn breakthrough pain	Morphine 10mg/1ml Inj 12-01-02 @ 14:00 (1)	Not Documented	1400 entry by Respondent states in part: "Morphine PCA D/C'd".
FG 31382013	MS04 1-3mg IV q2h prn pain	Morphine 10mg/1ml Inj 12-04-02 @ 09:12 (1)	Not Documented	No entry by Respondent between 0715 and 1000 indicating that patient was given any Morphine. Late Entry by Respondent at 0915 indicates that patient was medicated with Lortab for c/o pain.
FG 31382013	MS04 1-3mg IV q2h prn pain	Morphine 10mg/1ml Inj 12-04-02 @ 15:05 (1)	Not Documented	Late Entry by Respondent at 1500 states in part: "Patient med with MS04 3mg".
EG 2409225	Lortab 7.5mg 1 or 2 po q4h prn	Hydrocodone/APAP 7.5/500mg Tab 12-07-02 @ 08:56 (2)	Not Documented	Late Entry by Respondent at 1000 states: Pt c/o pain of 9/10 body aches, medicated with Hydrocodone 7.5 (2) po.
KRH 2211845	MS04 2- 4mg IVP q4h prn severe pain	Morphine 10mg/1ml Inj 12-13-04 @ 15:56 (1)	Not Documented	1610 entry by Respondent states in part: "Pt med with MS04 3mg".
AD 7180854	MS04 2mg IV q4h prn pain	Morphine 10mg/1ml Inj 12-27-02 @ 10:18 (1)	Not Documented	No entry by Respondent between 0715 and 1200 indicating that patient was given any Morphine.
AD 7180854	MS04 2mg IV q4h prn pain	Morphine 10mg/1ml Inj 12-27-02 @ 14:36 (1)	Not Documented	1315 entry by Respondent states that Pt was med with MS04 2mg; but Respondent did not dispense Morphine for patient until 14:36. No entry by Respondent between 1400 and 1900 indicating that patient was given any Morphine.
NW 9822693	MS04 2-4mg IV q4h prn	Morphine 10mg/1ml Inj 12-27-02 @ 14:36 (1)	Not Documented	No entry by Respondent between 0830 and 1800 indicating that patient was given any Morphine.
NW 9822693	MS04 2-4mg IV q4h prn	Morphine 10mg/1ml Inj 12-27-02 @ 18:22 (1)	Not Documented	1830 entry by Respondent states in part: "Pt med with MS04 4mg"
NW 5091921	MS04 2-4mg IV q2-4h prn severe CP	Morphine 10mg/1ml Inj 01-01-03 @ 12:35	Not Documented	No entry by Respondent between 1015 and 1510 indicating that patient was given any Morphine.

Respondent's conduct was likely to injure the patients in that subsequent care givers would rely on her documentation to further medicate the patients which could result in an overdose and placed the hospital in violation of Chapter 481 of the Texas Health and Safety Code (Controlled Substances Act).

8. On or about November 7, 2002 through January 1, 2003, while employed as a Licensed Vocational Nurse with Nursefinders, Inc., Fort Worth, Texas, and assigned at John Peter Smith (JPS) Hospital, Fort Worth, Texas, Respondent withdrew Morphine 10mg/1ml Injectables, Hydrocodone/APAP 5/500mg Tablets, and Chlordiazepoxide 25mg Capsules from the Medication Dispensing System (Pyxis) for patients, but failed to follow the facility's policy and procedure for wastage of the unused portions of the medications, as follows:

Patient and MR #	Physician's Order	Medication Dispensing System Record (Pyxis) Date/Time and Dose	24 Hour Flow Sheets	Nurse's Notes	Wastage
QF 31372410	MS04 2-10mg IV titrated for relief of moderate or severe pain	Morphine 10mg/1ml Inj 11-07-02 @ 14:56 (1)	Not Documented	No entry by Respondent between 1400 and 1600 indicating that patient had any c/o pain.	None Documented
QF 31372410	MS04 2-10mg IV titrated for relief of moderate or severe pain	Morphine 10mg/1ml Inj 11-07-02 @ 19:03 (1)	Not Documented	No entry by Respondent between 1600 and 1900 indicating that patient had any c/o pain. 1900 entry by Respondent indicates patient was being discharged at that time. (NOTE: Respondent discharged patient at 1848.)	None Documented
MDN 4336780	Vicodin 5/500 1 or 2 po q4-6h prn	Hydrocodone/APAP 5/500mg Tab 11-08-02 @ 18:58 (2)	Not Documented	1700 entry by Respondent states in part: "Patient in no acute distress". Next entry made by Respondent (1900 entry) states: Report given to on-coming shift.	None Documented
EA 31360746	Lortab 5/500 2 po q4h prn pain	Hydrocodone/APAP 5/500mg Tab 11-09-02 @ 14:39 (1)	Not Documented	1330 entry by Respondent states: Pt's sister here and d/c instructions gone over with her. Verbalized understanding. Sister down to pharmacy to pick up pt's d/c meds.	None Documented
DR 30344238	MS04 4mg IM q3-4h prn pain	Morphine 10mg/1ml Inj 11-13-02 @ 17:07 (1)	MS04 4mg @ 1700	1700 entry by Respondent states in part: Patient "med with MS04 4mg".	None Documented
HS 31383102	Librium 25mg po q6h	Chlordiazepoxide 25mg Cap 11-14-02 @ 10:08 (2)	Not Documented	No entry by Respondent between 1000 and 1200 indicating that any Librium was given to patient.	None Documented
DR 30344238	MS04 4mg IM q3-4h prn pain	Morphine 10mg/1ml Inj 11-14-02 @ 09:04 (1)	Not Documented	0830 entry by Respondent states in part: "Patient med with MS04 4mg for c/o abd pain". Next entry by Respondent (1130 entry) states in part: "Patient med with MS04 4mg".	None Documented

Patient and MR #	Physician's Order	Medication Dispensing System Record (Pyxis) Date/Time and Dose	24 Hour Flow Sheets	Nurse's Notes	Wastage
DR 30344238	MS04 4mg IM q3-4h prn pain	Morphine 10mg/1ml Inj 11-14-02 @ 13:46 (1)	Not Documented	1300 entry by Respondent states in part: "Patient sleeping on these rounds". Next entry by Respondent (1530 entry) states in part: Patient "med with MS04 4mg"	None Documented
DR 30344238	MS04 4mg IM q3-4h prn pain	Morphine 10mg/1ml Inj 11-14-02 @ 18:08 (1)	Not Documented	No entry by Respondent between 1630 and 1900 indicating that patient was given any Morphine.	None Documented
DR 30344238	MS04 4mg IM q3-4h prn	Morphine 10mg/1ml Inj 11-16-02 @ 11:50 (1)	MS04 4mg @ 1155	1200 entry by Respondent states in part: "Patient c/o pain and medicated with MS04 4mg".	None Documented
DR 30344238	MS04 4mg IM q3-4h prn	Morphine 10mg/1ml Inj 11-16-02 @ 15:25 (1)	MS04 4mg @ 1555	1600 entry by Respondent states in part: "Patient c/o abd pain. Med with MS04 4mg".	None Documented
EA 31407091	MS04 2-10mg IV titrated for relief of moderate or severe pain	Morphine 10mg/1ml Inj 12-01-02 @ 08:10 (1)	MS04 2mg @ 0800	No entry by Respondent indicating amount of Morphine given to patient.	None Documented
EA 31407091	MS04 2-10mg IV titrated for relief of moderate or severe pain	Morphine 10mg/1ml Inj 12-01-02 @ 15:58 (1)	MS04 2mg @ 1555	1600 entry by Respondent states in part: Patient "medicated with MS04 2mg".	None Documented
KRH 2211845	MS04 2-4mg IVP q4h prn breakthrough pain	Morphine 10mg/1ml Inj 12-01-02 @ 11:09 (1)	Not Documented	No entry by Respondent between 0930 and 1400 indicating that patient was given any Morphine.	None Documented
KRH 2211845	MS04 2-4mg IVP q4h prn breakthrough pain	Morphine 10mg/1ml Inj 12-01-02 @ 14:00 (1)	Not Documented	1400 entry by Respondent states in part: "Morphine PCA D/C'd".	None Documented
FG 31382013	MS04 1-3mg IV q2h prn pain	Morphine 10mg/1ml Inj 12-04-02 @ 09:12 (1)	Not Documented	No entry by Respondent between 0715 and 1000 indicating that patient was given any Morphine. Late Entry by Respondent at 0915 indicates that patient was medicated with Lortab for c/o pain.	None Documented
FG 31382013	MS04 1-3mg IV q2h prn pain	Morphine 10mg/1ml Inj 12-04-02 @ 15:05 (1)	Not Documented	Late Entry by Respondent at 1500 states in part: "Patient med with MS04 3mg".	None Documented
AS 30730386	MS04 1-2mg IV prn CP	Morphine 10mg/1ml Inj 12-04-02 @ 17:56 (1)	MSO4 2mg @ 1740	1730 entry by Respondent states in part: "MS04 2mg given for c/o pain".	None Documented

Patient and MR #	Physician's Order	Medication Dispensing System Record (Pyxis) Date/Time and Dose	24 Hour Flow Sheets	Nurse's Notes	Wastage
EG 2409225	Lortab 7.5mg 1 or 2 po q4h prn	Hydrocodone/APAP 7.5/500mg Tab 12-07-02 @ 08:56 (2)	Not Documented	Late Entry by Respondent at 1000 states: Pt c/o pain of 9/10 body aches, medicated with Hydrocodone 7.5 (2) po.	None Documented
EG 2409225	MS04 1-2mg IV q2h prn CP not relieved at night	Morphine 10mg/1ml Inj 12-07-02 @ 1320 (1)	MS04 2mg IV @ 1305	No entry by Respondent between 1100 and 1900 indicating that patient was given any Morphine.	None Documented
KRH 2211845	MS04 1-2mg IV q1-2h prn breakthrough pain	Morphine 10mg/1ml Inj 12-13-02 @ 08:39 (1)	MS04 2mg @ 0800	0815 entry by Respondent states in part: "Patient med with MS04 2mg IV"	3mg given 7mg wasted @ 17:40 on 12-13-02
KRH 2211845	MS04 1- 2mg IV q1-2h prn breakthrough pain	Morphine 10mg/1ml Inj 12-13-04 @ 15:56 (1)	Not Documented	1610 entry by Respondent states in part: "Pt med with MS04 3mg".	2mg given 8mg wasted @ 17:40 on 12-13-02
AD 7180854	MS04 2mg IV q4h prn pain	Morphine 10mg/1ml Inj 12-27-02 @ 10:18 (1)	Not Documented	No entry by Respondent between 0715 and 1200 indicating that patient was given any Morphine.	None Documented
AD 7180854	MS04 2mg IV q4h prn pain	Morphine 10mg/1ml Inj 12-27-02 @ 14:36 (1)	Not Documented	1315 entry by Respondent states that Pt was med with MS04 2mg; but Respondent did not dispense Morphine for patient until 14:36. No entry by Respondent between 1400 and 1900 indicating that patient was given any Morphine.	None Documented
NW 9822693	MS04 2-4mg IV q4h prn	Morphine 10mg/1ml Inj 12-27-02 @ 14:36 (1)	Not Documented	No entry by Respondent between 0830 and 1800 indicating that patient was given any Morphine.	None Documented
NW 9822693	MS04 2-4mg IV q4h prn	Morphine 10mg/1ml Inj 12-27-02 @ 18:22 (1)	Not Documented	1830 entry by Respondent states in part: "Pt med with MS04 4mg"	None Documented
NW 9822693	MS04 2-4mg IV q2-4h prn severe CP	Morphine 10mg/1ml Inj 12-28-02 @ 15:48 (1)	MS04 4mg @ 1500	No entry by Respondent between 0715 and 1745 indicating that patient was given any Morphine. 1500 entry by Respondent states in part: "Pt in no acute distress".	None Documented
NW 5091921	MS04 2-4mg IV q2-4h prn severe CP	Morphine 10mg/1ml Inj 01-01-03 @ 08:39 (1)	MS04 3mg @ 08:35	0900 entry by Respondent states in part: Pt "med with MS04 3mg".	None Documented

Patient and MR #	Physician's Order	Medication Dispensing System Record (Pyxis) Date/Time and Dose	24 Hour Flow Sheets	Nurse's Notes	Wastage
NW 5091921	MS04 2-4mg IV q2-4h prn severe CP	Morphine 10mg/1ml Inj 01-01-03 @ 12:35	Not Documented	No entry by Respondent between 1015 and 1510 indicating that patient was given any Morphine.	None Documented

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 Substances Act).

12. 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 302.402(a)(10), Texas Occupations Code, and 22 TEX. ADMIN. CODE §239.11(2),(3),(4),(27)(G)&(28).
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 119315, heretofore issued to MARY ANNE CROCKETT, 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 Board of Nurse Examiners, that RESPONDENT SHALL receive the sanction of a REPRIMAND WITH STIPULATIONS, and RESPONDENT SHALL comply in all respects with the Nursing Practice Act, Revised Civil Statutes of Texas as amended, Texas Occupations Code, §§301.001 *et seq.*, the Rules and Regulations Relating to Vocational Nurse Education, Licensure and Practice, 22 TEX. ADMIN. CODE §211.01 *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 vocational 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 State of Texas 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 MARY ANNE CROCKETT, to the office of the Board of Nurse Examiners within ten (10) days from the date of ratification of this Order for appropriate notation.

(2) RESPONDENT SHALL, within one (1) year of entry of this Order, successfully complete a course in Texas nursing jurisprudence. 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) contact hours in length. The course's content shall include the Nursing Practice Act, standards of practice, and documentation of care. 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 on the Board's website, [www.bne.state.tx.us](http://www.bne.state.tx.us) (under BNE events).*

(3) 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. 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 on the Board's website, [www.bne.state.tx.us](http://www.bne.state.tx.us) (under BNE events).*

(4) 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 on the Board's website, [www.bne.state.tx.us](http://www.bne.state.tx.us) (under BNE events).*

(5) RESPONDENT SHALL, within one (1) year of entry of this Order, successfully complete a course in nursing 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. The course shall be a minimum of six (6) contact hours in length. In order for the course to be approved, the target audience shall include Nurses. The course shall include content on the following: principles of nursing ethics; confidentiality; and professional boundaries. RESPONDENT SHALL CAUSE the sponsoring institution to submit a Verification of Course Completion form, provided by the Board, to verify RESPONDENT's successful completion of the course. This course is to be taken in addition to any continuing

education requirements the Board may have for relicensure. *Board approved courses may be found on the Board's website, [www.bne.state.tx.us](http://www.bne.state.tx.us) (under BNE events).*

**IT IS FURTHER AGREED, SHOULD RESPONDENT PRACTICE AS A LICENSED VOCATIONAL 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(S) 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:**

(6) RESPONDENT SHALL notify each present employer in vocational nursing of this Order of the Board and the stipulations 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 vocational nursing of this Order of the Board and the stipulations 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.

(7) RESPONDENT SHALL CAUSE each present employer in vocational 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 vocational nurse.

(8) For the duration of the stipulation period, 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.

(9) 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 vocational 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) months for one (1) year(s) of employment as a vocational nurse.

(10) 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.**

(11) 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 second three (3) month period, random screens shall be performed at least once per month. For the remainder of the stipulation period, random screens shall be performed at least once every three (3) months.

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 will be regarded as non-compliance with the terms of this Order and may subject the nurse to further disciplinary action by this Board. Failure to report for a drug screen may be considered the same as a positive result and may result in further disciplinary action by this Board.

IT IS FURTHER AGREED, that upon full compliance with the terms of this Order, RESPONDENT SHALL be issued an unencumbered license and multistate licensure privileges, if any, to practice vocational nursing in the State of Texas.

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CONTINUED ON NEXT PAGE.

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 vocational nursing in the State of Texas, as a consequence of my noncompliance.

Signed this 27 day of Oct, 2006

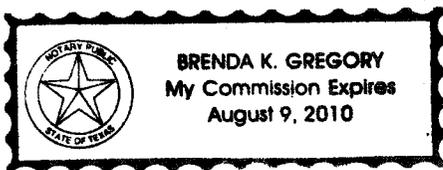
Maryanne Crockett  
MARYANNE CROCKETT, Respondent

Sworn to and subscribed before me this 27 day of Oct, 2006

SEAL

Brenda K. Gregory

Notary Public in and for the State of TEXAS



Approved as to form and substance.

\_\_\_\_\_  
ROBERT L. LOCKRIDGE, Attorney for Respondent

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

WHEREFORE, PREMISES CONSIDERED, the Board of Nurse Examiners for the State of Texas does hereby ratify and adopt the Agreed Order that was signed on the 27<sup>th</sup> day of October, 2006, by MARY ANNE CROCKETT, Vocational Nurse License Number 119315, and said Order is final.

Effective this 11<sup>th</sup> day of December, 2006.



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

I, Mary Anne Crockett, am writing this letter stating that Robert Lockridge is no longer representing me as my attorney. Due to the fact that he is not returning my phone calls and not being able to get in touch with him forces me to no longer need his services.

Sincerely,  
Mary Anne Crockett

*Mary Anne Crockett*

5533 Cross Creek Ranch  
Ft. Worth, Tx. 76109  
(817)735-1819

State of Texas

County of Tarrant

Subscribed and sworn to (or affirmed) before me  
this 27 day of October

*Brenda K. Gregory*  
Notary Public

