

Respondent's nursing employment history continued:

11/99 - 9/03	Staff Nurse	Christus Spohn Beeville Beeville, Texas
9/03 - 9/05	Assistant Director of Nurses	Live Oak Nursing Center George West, Texas
10/05 - Present	Staff Nurse	South Texas Regional Medical Center Jourdanon, Texas

6. At the time of the initial incident, Respondent was employed as a Staff Nurse with South Texas Regional Medical Center, Jourdanon, Texas, and had been in this position for one (1) year and six (6) months.
7. On or about April 9, 2007, while employed as a Staff Nurse at South Texas Regional Medical Center, Jourdanon, Texas, Respondent failed to notify the physician that Patient 000075720 had arrived at the facility in preterm labor and with vaginal bleeding. According to facility policy and the facility's "Medical Screening Exam" form, had one been completed and documented, this patient was a high risk obstetric patient that mandated physician notification. Respondent's conduct was likely to injure the patient from lack of timely and appropriate medical care, based upon the physician's expertise, that may have been needed to stabilize the patient and/or prevent complications, including possible demise.
8. On or about April 9, 2007, while employed as a Staff Nurse at South Texas Regional Medical Center, Jourdanon, Texas, Respondent failed to correctly interpret signs indicating the fetus of the aforementioned Patient 000075720 was in distress and failed to timely and accurately notify the physician of the condition of the patient and her fetus. Although the patient's fetal heart had been demonstrating progressing signs of ominous outcome for almost 3.5 hours, including late long decelerations and decreases in baseline rate to a range of 120-130, when Respondent did notify the physician, she informed him that the baseline rate had decreased to the 140 range. When the physician ordered that Respondent continue to monitor the patient, Respondent did not clarify that the patient needed to be evaluated by the physician and Respondent did not notify the Charge Nurse of the order. During the hour that followed, the fetal heart rate continued to decline before Respondent again paged the physician, and by the time the physician arrived nearly 30 minutes later, it was determined that the patient had suffered intrauterine fetal demise. Respondent's conduct may have contributed to the fetal demise.
9. In response to the incidents in Findings of Fact Numbers Seven (7) and Eight (8), Respondent states that on admission, the patient in question would have scored an eight out of ten on the "Medical Screening Exam" form, which Respondent admits does require a physician exam; however, Respondent asserts that the policy does not state how soon the physician must see the patient. According to Respondent, the patient indicated that her vaginal bleeding began 24 hours earlier, after having intercourse, and the patient had a small

amount of vaginal bleeding after voiding but did not have a rigid abdomen, severe pain or active bleeding, which would be typical signs of a placental abruption. Respondent states that when she notified the physician, she received orders to continued to monitor the patient and to give intravenous fluids and medication to stop the contractions, which improved the fetal heart tones somewhat. Respondent states that initially she was the only nurse on the floor, with two (2) patients, but that a LVN was called in later when a third patient arrived in preterm labor. According to Respondent, the LVN was not skilled in reading fetal monitor strips and she did not feel comfortable allowing the untrained LVN admit a patient who was in preterm labor, so Respondent admitted the new patient, which required extra time due to administration of intravenous fluids and medications. According to Respondent, the patient in question became nauseated, had increased vaginal bleeding and felt lightheaded after getting up to the bathroom, so she assisted her back to bed and placed her back on the fetal monitor. Respondent says that the fetal heart tones were in the 90's and she called the physician who instructed her to "give the fetus time to recover from the patient's dry heaving in the bathroom." Respondent asserts that she continued with interventions but that the fetal heart tones continued to drop and she therefore notified the physician of the patient's status. Respondent regrets that she did not insist that the physician come in on admission when the heart tones were unreassuring, and states that having not documented the physician's words, "It will take a lot more than a few lates (decelerations) for me to cut a 32 weeker," has come back to haunt her.

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 violations of Section 301.452(b)(10)&(13), Texas Occupations Code, and 22 TEX. ADMIN. CODE §§ 217.11(1)(A),(1)(B), (1)(D),(1)(M),(1)(N)&(1)(P) and 217.12(1)(A),(1)(B)&(4).
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 657896, heretofore issued to DEANNA HUGHES, including revocation of Respondent's license to practice professional nursing in the State of Texas.

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ORDER

IT IS THEREFORE AGREED and ORDERED, subject to ratification by the Texas Board of Nursing, that Registered Nurse License Number 657896, previously issued to DEANNA HUGHES, to practice nursing in Texas is hereby SUSPENDED for a period of two (2) years with the suspension STAYED and Respondent is hereby placed on PROBATION for two (2) years with the following agreed terms of probation:

IT IS FURTHER AGREED and ORDERED that this Order SHALL be applicable to Respondent's multistate privilege, if any, to practice professional 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 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.

(1) 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 Nurse Education, Licensure and Practice, 22 TEX. ADMIN. CODE §211.01 *et seq.* and this Order.

(2) RESPONDENT SHALL deliver the wallet-sized license issued to DEANNA HUGHES, to the office of the Texas Board of Nursing within ten (10) days of the date of this Order for appropriate notation.

(3) RESPONDENT SHALL, within one (1) year 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) contact 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 Chemical Dependency, 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/about/stipscourses.html>.*

(4) RESPONDENT SHALL, within one (1) year 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/about/stipscourses.html>.

(5) RESPONDENT SHALL, within one (1) year 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://www.learningext.com/products/generalce/critical/ctabout.asp>.*

(6) RESPONDENT SHALL, within one (1) year of this Order, successfully complete a course in “Intermediate Fetal Monitoring.” The course must be of at least 15 contact hours in duration and must be approved by the Association of Women’s Health, Obstetric and Neonatal Nurses (AWHONN). 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.

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 TWO (2) YEARS OF EMPLOYMENT. THE LENGTH OF THE PROBATIONARY PERIOD WILL BE EXTENDED UNTIL SUCH TWENTY-FOUR (24) 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 each present employer 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 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 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 professional 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 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 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 two (2) years of employment as a nurse.

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, RESPONDENT SHALL be issued an unencumbered license and 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.

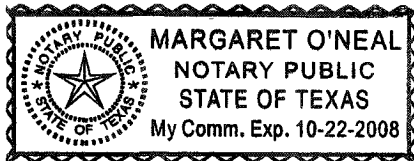
I waive representation by counsel. I have reviewed this Order. I neither admit nor deny the violations alleged herein. By my signature on this Order, I agree to the Findings of Fact, Conclusions of Law, Order, and any conditions of said Order, to avoid further disciplinary action in this matter. I waive 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 professional nursing in the State of Texas, as a consequence of my noncompliance.

Signed this 9th day of November 2007
Deanna M Hughes
DEANNA HUGHES, Respondent

Sworn to and subscribed before me this 9 day of November, 2007.

SEAL

Margaret O'Neal
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 9th day of November, 2007, by DEANNA HUGHES, Registered Nurse License Number 657896, and said Order is final.

Effective this 11th day of December, 2007.

A handwritten signature in cursive script, appearing to read "Katherine A. Thomas".

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