

BEFORE THE BOARD OF NURSE EXAMINERS
FOR THE STATE OF TEXAS

In the Matter of Registered Nurse License Number 527133 § AGREED
issued to CATHY VERRET HOXWORTH § ORDER

An investigation by the Board of Nurse Examiners for the State of Texas, hereinaft referred to as the Board, produced evidence indicating that CATHY VERRET HOXWORT hereinafter referred to as Respondent, Registered Nurse License Number 527133, may have violated Section 301.452(b)(10)&(12), Texas Occupations Code.

An informal conference was held on February 6, 2007, at the office of the Board of Nurse Examiners, in accordance with Section 301.464 of the Texas Occupations Code.

Respondent appeared in person. Respondent was represented by Juliete Stipeche, Attorney at Law. In attendance were Carol Marshall, MSN, RN, Nurse Consultant, Executive Director's Designee; Victoria Cox, Assistant General Counsel; Anthony L. Diggs, MSCJ, Director, Enforcement Division; Jason Bressie, Investigator; William Shanafelt, Investigator; and Candace V. Heisserman, Investigator.

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 notice and hearing, and consented to the entry of this Order.
3. Respondent is currently licensed to practice professional nursing in the State of Texas.
4. Respondent received a Baccalaureate Degree in Nursing from the University of Texas, Austin, Texas, on May 1, 1985. Respondent was licensed to practice professional nursing in the State of Texas on August 28, 1985.



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.
Patricia A. Marshall
Executive Director of the Board

5. Respondent's professional nursing employment history includes:

9/85-4/89	Staff Nurse McAllen Medical Center McAllen, Texas
5/89-1/90	Unknown
1/90-8/92	Staff Nurse HCA Rio Grande Regional Hospital McAllen, Texas
9/92-12/93	Unknown
1/94-10/94	Staff Nurse Dallas Med/Surg Ambulatory Care Clinic Dallas, Texas
10/94-02/00	Staff Nurse McAllen Medical Center McAllen, Texas
3/00-6/05	Staff Nurse Doctors Hospital at Renaissance Edinburg, Texas
7/05-1/06	Not employed in nursing
2/06-Present	Clinical Research Urology Associates of South Texas & Radiology Oncology Center McAllen, Texas

6. At the time of the initial incident, Respondent was employed as a Staff Nurse with Doctors Hospital at Renaissance, Edinburg, Texas, and had been in this position for approximately five (5) years and two (2) months.

7. On or about May 10, 2005, through June 10, 2005, while employed with Doctors Hospital at Renaissance, Edinburg, Texas, Respondent was accused of exhibiting impaired behavior. Respondent's conduct was alleged to have affected her 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.

8. In response to Finding of Fact Number Seven (7), Respondent states that in May 2005, she experienced a family crisis due to her daughter suffering a severely traumatic event. Respondent states that she advised her supervisors of her circumstances, but she did not make the information widely know due to concern for her daughter's confidentiality and worries that she worked in a hostile work environment. In May 2005, Respondent was sick due to a viral or bacterial illness. On June 6, 2005, Respondent states that she attempted to call in sick because she remained ill, but her supervisor told her that she had to report to work if she wanted to keep her job. Respondent states that at approximately 12:00p.m., when she had no patients, she put her head down on the desk for approximately fifteen (15) minutes to rest. Later, Respondent states that her supervisor informed her that she would need to submit to a drug screen. Respondent states that she had not taken any of her prescribed medications that day or the previous night before reporting to work.
9. On or about June 6, 2005, while employed with Doctors Hospital at Renaissance, Edinburg, Texas, Respondent provided a specimen for drug screening which resulted positive for the presence of Benzodiazepines and Opiates as evidenced by a positive drug screen. The use of Benzodiazepines and Opiates by a Registered Nurse, while subject to call or duty, could impair the nurse's ability to recognize subtle signs, symptoms or changes in the patient's condition, and could impair the nurse's ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.
10. In response to Finding of Fact Number Nine (9), Respondent states that she suffers from migraine headaches and takes Ibuprofen, Excedrin Migraine, and Imitrex to control her headaches while working. When the migraines aren't brought under control with this, Respondent states that she has a prescription for Vicodin to relieve the pain and a prescription for Xanax to allow her to get some sleep to help break the cycle of the headache. Respondent states that she has never once taken these medications while at work.
11. On or about July 26, 2006, Respondent underwent a forensic psychological evaluation performed by a Board approved forensic psychologist who states that the descriptions of Respondent's behavior in June 2005 raise questions about over-use of prescription drugs during a highly stressful period of her life. He states that it is not likely that Respondent perceives her drug usage as problematic and that Respondent does not intentionally/consciously abuse prescription drugs for illicit purposes. Problematic use would most likely be expressed during particularly stressful times in her life when other internal coping resources are overly taxed. Psychological and/or emotional stress probably also aggravates her subjective perception of physical pain. Thus, improved stress management strategies via psychotherapy, including non-pharmacological pain management, is highly recommended and, in his opinion, speaks directly to Respondent's capacity to conduct herself in accordance to the Board's rules and generally accepted nursing standards.

CONCLUSIONS OF LAW

1. Pursuant to Texas Occupations Code, Sections 301.451-301.455, the Board has jurisdiction over this matter.
2. Notice was served in accordance with law.
3. The evidence received is sufficient to prove a violations of Section 301.452(b)(10)&(12), Texas Occupations Code, 22 TEX. ADMIN. CODE §217.12(5).
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 527133, heretofore issued to CATHY VERRET HOXWORTH, including revocation of Respondent's license to practice professional 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 Professional 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 professional 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 CATHY VERRET HOXWORTH, to the office of the Board of Nurse Examiners within ten (10) days of the date of this Order for appropriate notation.

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

1. The clinical indications and medication regimen, if any, consisting of non-addictive, non-mood-altering substance(s), or rationale for the chronic use of controlled substances;
2. A statement as to the RESPONDENT's fitness to safely practice professional nursing while taking the prescribed medication(s); and
3. Recommendations for pain management therapy and/or other follow-up(s).

If the evaluation states that Respondent lacks fitness to practice professional nursing, RESPONDENT SHALL cease to provide direct patient care until such time that the same evaluator deems Respondent safe to return to direct patient care. Direct patient care involves a personal relationship between the Registered Nurse and the client, and includes, but is not limited to: teaching; counseling; assessing the client's needs and strengths; and providing

skilled nursing care. If the results of the evaluation reveal further violations of the Nursing Practice Act, further disciplinary action may be taken, including revocation of Respondent's license to practice professional nursing in the State of Texas.

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

(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) 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.bne.state.tx.us/about/stipscourses.html>.*

IT IS FURTHER AGREED, SHOULD RESPONDENT PRACTICE AS A REGISTERED NURSE IN THE STATE OF TEXAS, RESPONDENT WILL PROVIDE DIRECT PATIENT CARE AND PRACTICE IN A HOSPITAL, NURSING HOME, OR OTHER CLINICAL SETTING FOR A MINIMUM OF SIXTY-FOUR (64) HOURS PER MONTH ON AVERAGE FOR EACH QUARTER 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 A REGISTERED NURSE LICENSE WILL NOT APPLY TO THIS STIPULATION PERIOD.

(4) RESPONDENT SHALL notify each present employer in 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 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.

(5) 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.

(6) For the duration of the stipulation 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.

(7) 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 one (1) year of employment as a nurse.

(8) 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.**

(9) 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.

(10) RESPONDENT SHALL participate in therapy with a "professional counselor" possessing credentials approved by the Board. RESPONDENT SHALL CAUSE the therapist to submit written reports, on forms provided by the Board, as to the RESPONDENT's progress in therapy, rehabilitation and capability to safely practice professional nursing. The report must indicate whether or not the RESPONDENT's stability is sufficient to provide direct patient care safely. Such reports are to be furnished each and every month for three (3) months. If therapy is recommended for beyond three (3) months, the reports shall then be required at the end of each three (3) month period for the duration of the stipulation period, or until RESPONDENT is dismissed from therapy.

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 professional nursing in the State of Texas.

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RESPONDENT'S CERTIFICATION

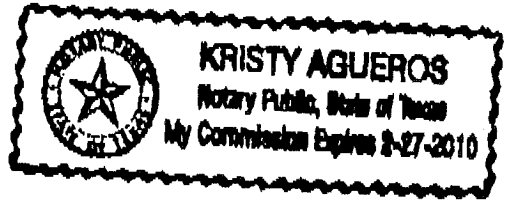
I understand that I have the right to legal counsel prior to signing this Agreed Order. I have reviewed this Order. I neither admit nor deny the violations alleged herein. By my signature on this Order, I agree to the Findings of Fact, Conclusions of Law, Order, and any conditions of said Order, to avoid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

Signed this 12th day of July, 2007
Cathy Verret Foxworth
CATHY VERRET FOXWORTH, Respondent

Sworn to and subscribed before me this 12th day of July, 2007.

SEAL

[Signature]
Notary Public in and for the State of TEXAS



Approved as to form and substance only.
[Signature]
JULIET STPECHER, Attorney for Respondent

Signed this 12th day of July, 2007

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 12th day of July, 2007, by CATHY VERRET HOXWORTH, Registered Nurse License Number 527133, and said Order is final.

Effective this 14th day of August, 2007.



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