

WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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FILE COPY

STATE OF WISCONSIN
BEFORE THE BOARD OF NURSING

IN THE MATTER OF DISCIPLINARY :
PROCEEDINGS AGAINST :

CAROL GAUMOND, R.N., :
RESPONDENT. :

FINAL DECISION
AND ORDER

ORDER 0001739

The parties to this action for the purposes of Wis. Stats. sec. 227.16 are:

Carol Gaumond, R.N.
3135A North 50th Street
Milwaukee, Wisconsin 53216

Board of Nursing
P.O. Box 8936
Madison, Wisconsin 53708-8936

Department of Regulation & Licensing
Division of Enforcement
P.O. Box 8936
Madison, Wisconsin 53708-8936

A party aggrieved by this decision may petition the Board for rehearing within twenty (20) days after service of this decision pursuant to Wis. Stats. sec. 227.12. The petition in this instance would be captioned with Carol Gaumond as the respondent.

A party aggrieved by this decision who is a resident of this state may also petition for judicial review by filing the petition in the office of the clerk of the circuit court for the county where the party aggrieved resides within thirty (30) days after service of this decision. A party aggrieved by this decision who is not a resident of this state must file the petition for judicial review in the office of the clerk of circuit court for Dane County. A party aggrieved must also serve the board and other parties with a copy of the petition for judicial review within thirty (30) days after service of this decision pursuant to Wis. Stats. sec. 227.16. The party to be named as respondent in the petition is the Board of Nursing.

The parties in this matter agree to the terms and conditions of the attached Stipulation as the final disposition of this matter, subject to the approval of the Board. The Board has reviewed this Stipulation and considers it acceptable.

Accordingly, the Board in this matter adopts the attached Stipulation and makes the following:

FINDINGS OF FACT

1. That the Respondent, Carol Gaumond, held a license as a registered nurse in the state of Wisconsin at all times relevant to this complaint.
2. That the Respondent's license is number 61953, issued on April 4, 1975.
3. That the Respondent's address is 3135A North 50th Street, Milwaukee, Wisconsin 53216.
4. That on April 30, 1980, the Respondent worked at Lutheran Hospital, Milwaukee, Wisconsin in the intensive care unit.
5. That the Respondent was assigned to care for patient A.F.
6. That patient A.F. suffered a cardiac arrest and the Respondent failed to promptly respond to the patient's needs.
7. That on at least one occasion in May, 1980, while working as a registered nurse at Milwaukee County Medical Complex, Milwaukee, Wisconsin, the Respondent converted to her own use Schedule II controlled substances.
8. That the Respondent received treatment at the Methodone Maintenance Clinic at Milwaukee County Hospital from October, 1980 until June, 1981.
9. That on June 4, 1981, the Respondent began inpatient treatment at DePaul Rehabilitation Hospital in Milwaukee, Wisconsin. The Respondent completed inpatient treatment on July 12, 1981.
10. That following inpatient treatment, the Respondent participated in the DePaul Outpatient Drug Free Program until November 9, 1982. A copy of the Respondent's discharge summary is attached as Exhibit A.
11. That the Respondent has not worked as a registered nurse since May, 1980.
12. That the Respondent has remained active in AA and NA since completion of the Outpatient program in November, 1982.
13. That the Respondent is employed doing medical-legal consulting and has no intention to return to the practice of nursing in the near future.

CONCLUSIONS OF LAW

1. That by engaging in the activities set forth in Findings of Fact 4 through 6, the Respondent has been negligent in the practice of nursing contrary to Wis. Adm. Code sec. N 11.03(1).

2. That by engaging in the activities set forth in Findings of Fact 7 through 10, the Respondent has violated Wis. Adm. Code sec. N 11.03(3)(b).

3. That the Board has jurisdiction to take disciplinary action against the Respondent for violation of Board rules and unprofessional conduct pursuant to sec. 441.07(1), Stats.

ORDER

NOW, THEREFORE, IT IS ORDERED that the registered nurse license of the Respondent, Carol Gaumond, shall be and hereby is limited from the date of this Order until one year after the Respondent returns to the practice of nursing. The limitations set forth in paragraphs 1 through 3 and in paragraph 12 commence on the date of this Order. The limitations set forth in paragraphs 4 through 11 commence upon the Respondent's return to the practice of nursing. The limitations are as follows:

1. The Respondent shall not consume any unprescribed prescription drugs, controlled substances, or alcohol. All prescribed medications must be for a valid medical purpose.

2. The Respondent must inform the Board of Nursing of her current employment and of any change in her employment status within five days of such change.

3. The Respondent must inform her employer and all prospective employers of her history of drug abuse.

4. The Respondent must be given a two week period of orientation at the facility which employs her upon her return to the practice of nursing.

5. The Respondent must have a two month period of preceptorship with a registered nurse at the facility which employs her upon her return to the practice of nursing before being allowed to work alone.

6. In each of the first two years following the Respondent's return to the practice of nursing she must obtain twenty hours of continuing education.

7. The Respondent shall cause her work supervisor to send written quarterly reports to the Board of Nursing evaluating the Respondent's work performance.

8. The Respondent must participate in a program of random and witnessed monitoring of her blood or urine for the presence of controlled substances and alcohol. Said monitoring shall take place on at least a twice a month basis. Additional screens are required upon the employer's request.

9. The Respondent is responsible for obtaining a monitoring facility and reporting system acceptable to her and to the Board of Nursing as an accurate and reliable provider of the required evaluations. The Respondent shall be responsible for all costs incurred in conjunction with the monitoring and reporting program.

10. To be an acceptable program, the monitoring facility must agree to provide random and witnessed gatherings of specimens for evaluation. The facility must further agree to file an immediate report with the Board of Nursing in the event of the following acts of nonparticipation:

- a. If the Respondent fails to appear upon request.
- b. If the monitoring screen proves positive.
- c. If the Respondent refuses to provide a specimen for analysis upon the request of the facility.

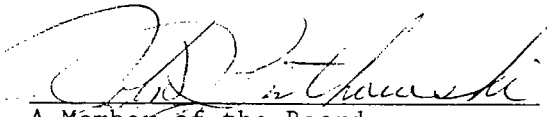
In the event of a positive screen, the monitoring facility must agree to retain the specimen for provision to the Division of Enforcement.

11. The monitoring program shall be overseen by a supervising therapist. The Respondent shall cause the supervising therapist to file quarterly reports with the Board of Nursing addressing the Respondent's status in the program. All positive drug screens and all failures to meet conditions of the program shall be reported immediately and said report shall contain a recommendation as to whether further disciplinary action is required by the Board. If the supervising therapist deems that blood or urine screens in addition to those required under paragraph 5 are necessary, the Respondent shall be required to submit such screens.

12. The Respondent shall provide the Board with medical releases upon request for the release of information related to this Order.

13. Violation of any of the terms of this Order may result in a summary suspension of the Respondent's license, the imposition of the stayed portion of the discipline and/or the imposition of other discipline as the Board may deem appropriate.

BOARD OF NURSING

By: 
A. Member of the Board

11-19-85
Date

MJB:lm1
945-842

BEFORE THE STATE OF WISCONSIN
BOARD OF NURSING

IN THE MATTER OF DISCIPLINARY :
PROCEEDINGS AGAINST :

CAROL GAUMOND, R.N., :
RESPONDENT :

STIPULATION

The parties in this matter agree and stipulate as follows:

1. That the Respondent voluntarily and knowingly waives her rights in this matter, including the right to a hearing on the allegations against her.

2. That the Respondent pleads no contest and urges the Board of Nursing to adopt the attached Final Decision and Order.

3. That the Complainant also urges the Board of Nursing to adopt the attached Final Decision and Order.

4. That if the terms of this Stipulation and the attached Final Decision and Order are not acceptable to the Board of Nursing, then neither of the parties shall be bound by any of the terms.

Michael J. Berndt
Michael J. Berndt, Attorney
Division of Enforcement

11/6/85
Date

Carol E. Gaumond R.N.
Carol Gaumond, R.N., Respondent

11/12/85
Date

Gerald P. Boyle
Gerald P. Boyle
Attorney for Respondent

11/12/85
Date

MJB:lm1
891-884

DE PAUL REHABILITATION HOSPITAL
Milwaukee, Wisconsin

OPD

OUTPATIENT DISCHARGE SUMMARY

THERAPIST: A. Youmans

FAMILY NAME	FIRST NAME	DATE OF BIRTH	ROOM NO.	HOSPITAL NO.
Gaumont, Carol		8/11/52		22797
ATTENDING PHYSICIAN		DATE OF ADMISSION	DATE OF DISCHARGE	
B. Lyne, M.D.		7/20/81	11/9/82	

BRIEF HISTORY

Upon her admission to the Outpatient Program, Carol was a 28-year old, white, single female referred to the Outpatient Program after six weeks of inpatient treatment. She was referred to inpatient and to outpatient by Glen Mueller. Carol, at the time of her admission, was an unemployed registered nurse who was treated in the Inpatient Program for opioid dependence and also for alcoholism. She had been using drugs since the age of 18 following surgery for a back problem. She had taken Valium initially as a prescription drug and began drinking in college, although she drank rarely at that time. She began using opioids in 1974. She was given Percodan for stomach problems involving pain at that time and, for awhile, took Percodan according to prescription. Seven months after that, however, she began to increase the dosage. She began back in school in 1979, a pre-med program, and was working also part-time as a nurse. She was using Percodan at that point in order to study and remain alert, she reported. She also reported that before long, she was taking up to 50 Percodan tablets per day. That was her pattern until May, 1980, at which time she stopped taking the Percodan and was on the Milwaukee County Methadone Program. She had difficulty in that program and ultimately came to De Paul in order to be detoxified and treated. Carol had alternated the use of Methadone with Dalmane or Valium in an attempt to get off the Methadone on her own but was unable to do this. In addition to that, she began drinking heavily at that time and was consuming two or three beers a day. She reported that just prior to entering the hospital, she was drinking several beers within a short time, perhaps two or three hours. Carol stated that her drug and alcohol use had caused numerous problems in the months before she came into treatment. Her behavior, her family life and school work all had suffered. She had not been working in her nursing profession for approximately one year, partly due to a court case in which she was accused of having stolen narcotics from her place of employment. This case did not result in a charge but did punctuate her work experience with difficulties due to her drug use. During her inpatient treatment, she had difficult withdrawal. This necessitated the long stay in the Inpatient Program. She was discharged with a recommendation for the Drug Free Program as well as other treatments including a halfway house.

COURSE OF TREATMENT

During the course of her 16 month involvement in the Outpatient Drug Free Program, there were a number of plans that were established for Carol including primarily her recovery from chemical dependency necessitating her developing and maintaining a drug free lifestyle. In addition to that, she was to spend some time evaluating her desire to be involved in her original profession of nursing and to see if this was possible considering her addiction. In addition to that, she also needed to work on issues relating to her ability or inability to have significant and intense relationships with other people. Carol was

Exhibit A

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DISCHARGE SUMMARY CONTD
RE: Gaumond, Carol

involved in the program, as I initially said, for a period of approximately 16 months. During this time, there was some significant changes that were noted. She was involved also in a halfway house placement during this time so, therefore, had outpatient therapy as well as a residential program in which she was involved. She stayed at Meta House for a significant period of time and felt that this was comfortable and an appropriate place for her to be. She also was involved in the Impaired Nurse Program and attended weekly meetings attendant to that particular program. Carol struggled with other things as far as her involvement in the program. She struggled with her own acceptance of her addiction; she struggled with her denial; she also struggled with her honesty and her ability to deal with the world in a straightforward manner that did not require drug use or some other manipulations to allow her to feel like she was more in control. However, through the course of these issues, she stuck in the program and was, after all, quite enthusiastic about her involvement in the Outpatient Drug Free Program. She had some medical problems during the course of her involvement and there was even suspicion that she was suffering from Bulimarexia, although this was never confirmed. Generally speaking, it seems that this patient attained the goals that she was searching for at her admission. She remained drug free virtually throughout the entire course of her program so that includes a period of approximately 16 months. Also, during this time, she decided that she did not want to return full time to her nursing profession but has instead become involved as a paralegal person, working for a law firm doing medical legal research. She enjoys this work very much, feels fulfilled in it and also it is certainly paying her a living wage. The only area that she has not made as significant strides in is the area of interpersonal relationships and she has been somewhat reticent to be involved with other people in an intense way. She has established no primary relationship with others during the course of her involvement in the program. She seems to have maintained some shyness or timidity in this aspect of her life and will obviously venture forth in terms of relationships when she feels more ready. However, clearly she has had a successful involvement in the Drug Free Program regarding her adjustment to her addiction and her resultant employability and involvement in self-help programs. So, at this point, it seems that the general outcome of treatment was very good. She continues to be involved in self-help groups in the community, being the Impaired Nurse Program or other AA or NA groups to which she has committed herself, and she seems to have accepted and developed a drug free lifestyle for herself.

Edward M. Rubin, A.C.S.W., M.S.
Edward M. Rubin, A.C.S.W./M.S.
Coordinator/Outpatient Drug Program

EMR/tp D 1/4 T 1/5/83

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