

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 THE DISCIPLINARY :
PROCEEDINGS AGAINST :

MARILYN C. CANNON, RN :
RESPONDENT :

FINAL DECISION AND ORDER
96 NUR 039

ORDER 0001766

The parties to this action for the purposes of section 227.53 of the Wisconsin statute are:

Marilyn C. Cannon
S79 W33273 Forseth Dr.
Mukwonago, WI 53149

Department of Regulation and Licensing
Division of Enforcement
PO Box 8935
Madison, WI 53708-8935

The parties in this matter agree to the terms and conditions of the attached Stipulation as the final decision 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. Marilyn C. Cannon (DOB 03-29-52) is duly licensed as a registered nurse in the state of Wisconsin (license number 70805). This license was first granted on September 29, 1978.
2. Ms. Cannon's most recent address on file with the Wisconsin Board of Nursing is S79 W33273 Forseth Dr., Mukwonago, WI 53149.
3. On March 1, 1994, Ms. Cannon's nursing registration expired. Ms. Cannon did not renew her registration until March 7, 1996. Ms. Cannon worked as a registered nurse in the emergency room at St. Joseph's Hospital, 5000 W. Chambers St. in Milwaukee, Wisconsin during the time her license was expired.
4. In resolution of this matter, Ms. Cannon consents to the entry of the following Conclusions of Law and Order.

CONCLUSIONS OF LAW

Marilyn C. Cannon, by the conduct described above, has violated secs. 441.06(3) and (4), Stats. and Wisconsin Administrative Code § N 7.04(15).

ORDER

NOW, THEREFORE, **IT IS HEREBY ORDERED** that Marilyn C. Cannon is **REPRIMANDED**.

IT IS FURTHER ORDERED that within thirty (30) days from the date of this order, Ms. Cannon shall pay the costs of this proceeding in the amount of SEVENTY-FIVE dollars (\$75.00). Payment shall be made by certified check or money order, payable to the Wisconsin Department of Regulation and Licensing and sent to:

Michelle Neverman
Division of Enforcement
PO Box 8935
Madison, WI 53708-8935

This Order shall become effective upon the date of its signing.

WISCONSIN BOARD OF NURSING

By: _____

A member of the Board

Date

19 Nov 96

STATE OF WISCONSIN
BEFORE THE BOARD OF NURSING

IN THE MATTER OF THE DISCIPLINARY :
PROCEEDINGS AGAINST :

MARILYN C. CANNON, RN :
RESPONDENT :

STIPULATION
96 NUR 039

It is hereby stipulated between Marilyn C. Cannon, R.N., and Steven M. Gloe, attorney for the Department of Regulation and Licensing, Division of Enforcement, as follows that:

1. This Stipulation is entered into as a result of a pending investigation by the Division of Enforcement (96 NUR 039). Ms. Cannon consents to the resolution of this investigation by stipulation and without the issuance of a formal complaint.

2. The respondent understands that by the signing of this Stipulation she voluntarily and knowingly waives her rights, including: the right to a hearing on the allegations against her, at which time the state has the burden of proving those allegations by a preponderance of the evidence; the right to confront and cross-examine the witnesses against her; the right to call witnesses on her behalf and to compel their attendance by subpoena; the right to testify herself; the right to file objections to any proposed decision and to present briefs or oral arguments to the officials who are to render the final decision; the right to petition for rehearing; and all other applicable rights afforded to her under the United States Constitution, the Wisconsin Constitution, the Wisconsin statutes and the Wisconsin Administrative Code.

3. Respondent is aware of her right to seek legal representation and has been provided an opportunity to obtain legal advice prior to signing this stipulation.

4. Respondent agrees to the adoption of the attached Final Decision and Order by the Board of Nursing. The parties to the Stipulation consent to the entry of the attached Final Decision and Order without further notice, pleading, appearance or consent of the parties. Respondent waives all rights to any appeal of the attached order, if adopted in the form as attached.

5. If the terms of this Stipulation are not acceptable to the Board, the parties shall not be bound by the contents of this Stipulation, and the matter shall be returned to the Division of Enforcement for further proceedings. In the event that this Stipulation is not accepted by the Board, the parties agree not to contend that the Board has been prejudiced or biased in any manner by the consideration of this attempted resolution.

6. The parties to this stipulation agree that the attorney for the Division of Enforcement and the member of the Board of Nursing assigned as an advisor in this investigation may appear

before the Board for the purposes of speaking in support of this agreement and answering questions that the Board may have in connection with their deliberations on the stipulation.

7. The Division of Enforcement joins Marilyn Cannon in recommending that the Board adopt this Stipulation and issue the attached Final Decision and Order.

Marilyn C. Cannon
Marilyn C. Cannon

10/18/96
Date

Steven M. Gloe
Steven M. Gloe, Attorney
Division of Enforcement

10.22.96
Date

Department of Regulation & Licensing

State of Wisconsin

P.O. Box 8935, Madison, WI 53708-8935

(608)

TTY# (608) 267-2416, hearing or speech
TRS# 1-800-947-3529, impaired only

GUIDELINES FOR PAYMENT OF COSTS AND/OR FORFEITURES

On November 19, 1996, the Board of Nursing
took disciplinary action against your license. Part of the discipline was an assessment of costs and/or a
forfeiture.

The amount of the costs assessed is: \$75.00 Case #: 96NUR039

The amount of the forfeiture is: _____ Case # _____

Please submit a check or a money order in the amount of \$ 75.00

The costs and/or forfeitures are due: December 19, 1996

NAME: Marilyn C. Cannon LICENSE NUMBER: 70805

STREET ADDRESS: S79 W33273 Forseth Drive

CITY: Mukwonago STATE: WI ZIP CODE: 53149

Check whether the payment is for costs or for a forfeiture or both:

 X COSTS FORFEITURE

Check whether the payment is for an individual license or an establishment license:

 X INDIVIDUAL ESTABLISHMENT

If a payment plan has been established, the amount due monthly is:

Make checks payable to:

**DEPARTMENT OF REGULATION AND LICENSING
1400 E. WASHINGTON AVE., ROOM 141
P.O. BOX 8935
MADISON, WI 53708-8935**

For Receipting Use Only

#2145 (Rev. 9/96)

Ch. 440.22, Stats.

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Committed to Equal Opportunity in Employment and Licensing+

STATE OF WISCONSIN
DEPARTMENT OF REGULATION AND LICENSING
BEFORE THE BOARD OF NURSING

In the Matter of the Disciplinary Proceedings Against

Marilyn C. Cannon, RN,

AFFIDAVIT OF MAILING

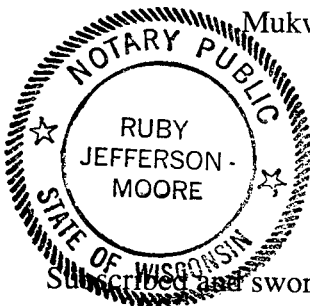
Respondent.

STATE OF WISCONSIN)
)
COUNTY OF DANE)

I, Kate Rotenberg, having been duly sworn on oath, state the following to be true and correct based on my personal knowledge:

1. I am employed by the Wisconsin Department of Regulation and Licensing.
2. On November 25, 1996, I served the Final Decision and Order dated November 19, 1996 and Guidelines for Payment of Costs and/or Forfeitures upon the Respondent Marilyn C. Cannon, RN by enclosing a true and accurate copy of the above-described document in an envelope properly stamped and addressed to the above-named Respondent and placing the envelope in the State of Wisconsin mail system to be mailed by the United States Post Office by certified mail. The certified mail receipt number on the envelope is P 213 340 195.
3. The address used for mailing the Decision is the address that appears in the records of the Department as the Respondent's last-known address and is:

Marilyn C. Cannon, RN
S79 W33273 Forseth Drive
Mukwonago WI 53149



Subscribed and sworn to before me

this 25th day of November, 1996.

Ruby Jefferson-Moore
Notary Public, State of Wisconsin
My commission is permanent.

Kate Rotenberg

Kate Rotenberg
Department of Regulation and Licensing
Office of Legal Counsel

NOTICE OF APPEAL INFORMATION

Notice Of Rights For Rehearing Or Judicial Review, The Times Allowed For Each. And The Identification Of The Party To Be Named As Respondent.

Serve Petition for Rehearing or Judicial Review on:

STATE OF WISCONSIN BOARD OF NURSING

1400 East Washington Avenue

P.O. Box 8935

Madison, WI 53708.

The Date of Mailing this Decision is:

November 25, 1996

1. REHEARING

Any person aggrieved by this order may file a written petition for rehearing within 20 days after service of this order, as provided in sec. 227.49 of the *Wisconsin Statutes*, a copy of which is reprinted on side two of this sheet. The 20 day period commences the day of personal service or mailing of this decision. (The date of mailing this decision is shown above.)

A petition for rehearing should name as respondent and be filed with the party identified in the box above.

A petition for rehearing is not a prerequisite for appeal or review.

2. JUDICIAL REVIEW.

Any person aggrieved by this decision may petition for judicial review as specified in sec. 227.53, *Wisconsin Statutes* a copy of which is reprinted on side two of this sheet. By law, a petition for review must be filed in circuit court and should name as the respondent the party listed in the box above. A copy of the petition for judicial review should be served upon the party listed in the box above.

A petition must be filed within 30 days after service of this decision if there is no petition for rehearing, or within 30 days after service of the order finally disposing of a petition for rehearing, or within 30 days after the final disposition by operation of law of any petition for rehearing.

The 30-day period for serving and filing a petition commences on the day after personal service or mailing of the decision by the agency, or the day after the final disposition by operation of the law of any petition for rehearing. (The date of mailing this decision is shown above.)



PDF: DE9612101NUR-19961119

Order Dates:

NOV 19, 1996

Respondent Names:

CANNON, MARILYN C., RN

Complaint IDs:

96NUR039

Profession:

REGISTERED NURSE

Boards:

NUR

Short Description:

11/19/96

Case Summary:

NURSING REGISTRATION EXPIRED ON 3/1/94. WORKED IN A HOSPITAL
DURING THE TIME HER LICENSE WAS EXPIRED.

