

WISCONSIN DEPARTMENT OF REGULATION & LICENSING



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STATE OF WISCONSIN
BEFORE THE BOARD OF NURSING

IN THE MATTER OF :
DISCIPLINARY PROCEEDINGS AGAINST :
 : FINAL DECISION AND ORDER
 :
 CLAUDETTE T. PUGEL, R.N., : LS0212055NUR
RESPONDENT. :

01 NUR 050

The parties to this action for the purposes of § 227.53, Wis. Stats., are:

Claudette T. Pugel
2122 S. 75th Street
West Allis, WI 53219

Wisconsin Board of Nursing
P.O. Box 8935
Madison, WI 53708-8935

Department of Regulation and Licensing
Division of Enforcement
P.O. 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. Claudette T. Pugel (dob: 10/20/53) is and was at all times relevant to the facts set forth herein a registered nurse licensed in the State of Wisconsin pursuant to license # 70030 . This license was first granted March 30, 1978.

2. On March 22, 2000, and while employed as a registered nurse at Sinai Samaritan Medical Center Respondent was observed sleeping while on duty. Her work record indicates Respondent had previously been cautioned about inattentiveness to her assigned tasks, as well as for removing housekeeping supplies from the workplace for her personal use.

3. On March 7, 2001, and while employed as an agency pool nurse by IntelliStaf, Respondent was placed at St. Francis Hospital. Respondent failed to complete medication administration for patients 670844 and 313009 during her duty shift.

4. Following an evaluation at the Medical College of Wisconsin on March 26, 2002, Respondent was diagnosed with major depression with severe stressors. Treatment recommendations include individual psychotherapy and medication management counseling on a monthly basis.

5. Respondent is currently engaged in nursing practice.

CONCLUSIONS OF LAW

6. The Wisconsin Board of Nursing has jurisdiction to act in this matter pursuant to §441.07(1)(b)(c) and(d) Wis. Stats. and is authorized to enter into the attached Stipulation pursuant to §227.44(5), Wis. Stats.

7. The conduct described in paragraphs 2 and 3, above, violated § N 7.03(3) and N 7.04(15) Wis. Adm. Code. Such conduct constitutes unprofessional conduct within the meaning of the Code and statutes.

ORDER

NOW, THEREFORE, IT IS HEREBY ORDERED, that the attached Stipulation is accepted.

IT IS FURTHER ORDERED that Claudette T. Pugel is REPRIMANDED.

IT IS FURTHER ORDERED, that the license to practice of respondent shall be LIMITED as follows:

REHABILITATION, MONITORING AND TREATMENT

Treatment Required

1. Respondent shall enroll and continue successful participation in individual psychotherapy and medication management for her condition at a treatment facility acceptable to the Board as respondent's Supervising Health Care Provider shall determine to be appropriate for respondent's rehabilitation. Respondent shall commence involvement in treatment within 5 days of the date of the Final Decision and Order of the Board.

Therapy. The rehabilitation program shall include and respondent shall participate in individual therapy

sessions upon a schedule as recommended by the supervising physician or therapist, but not less than once monthly. Such therapy shall be conducted by the supervising physician or therapist, or another qualified physician or therapist as designated by the supervising physician or therapist and acceptable to the Board. Dr. Michele Andrade, M.D. is an acceptable physician. After the first year of stayed suspension, this requirement for therapy sessions may be modified only upon written petition, and a written recommendation by the supervising physician or therapist expressly supporting the modifications sought. A denial of such petition for modification shall not be deemed a denial of the license under §§ 227.01(3) or 227.42, Wis. Stats., or ch. RL 1, Wis. Adm. Code, and shall not be subject to any right to further hearing or appeal.

Department Monitor

2. The Department Monitor is the individual designated by the Board as its agent to coordinate compliance with the terms of this Order, including receiving and coordinating all reports and petitions, and requesting additional monitoring and surveillance. The Department Monitor may be reached as follows:

Department Monitor
Department of Regulation Division of Enforcement
P.O. Box 8935
Madison, WI 53708-8935
FAX (608) 266-2264
TEL. (608) 267-3817

Releases

3. Respondent shall provide and keep on file with the Supervising Health Care Provider, all treatment facilities and personnel, current releases which comply with state and federal laws authorizing release of all medical and treatment records and reports to, and permitting the Supervising Health Care Provider and all treating physicians and therapists to disclose and discuss the progress of respondent's treatment and rehabilitation with the Board or any member thereof, or with any employee of the Department of Regulation and Licensing acting under the authority of the Board. Copies of these releases shall be filed simultaneously with the Department Monitor.
4. The Supervising Health Care Provider shall submit formal written reports to the Department Monitor in the Department of Regulation and Licensing, Division of Enforcement, P.O. Box 8935, Madison, Wisconsin 53708-8935 on a quarterly basis, as directed by the Department Monitor. These reports shall assess Respondent's progress in treatment. The Supervising Health Care Provider shall report immediately to the Department Monitor [Division of Enforcement, P.O. Box 8935, Madison, Wisconsin 53708-8935, FAX (608)266-2264, telephone no. (608)267-3817] any violation or suspected violation of the Board's Final Decision and Order.

Required reporting by Respondent

5. Respondent is responsible for compliance with all of the terms and conditions of this Final Decision and Order. It is the responsibility of Respondent to promptly notify the Department Monitor, of any suspected violations of any of the terms and conditions of this Order.

6. Respondent may petition the Board for modification of the terms of this limited license . Any such petition shall be accompanied by a written recommendation from respondent's Supervising Health Care Provider expressly supporting the specific modifications sought. Denial of the petition in whole or in part shall not be considered a denial of a license within the meaning of Sec. 227.01(3)(a), Stats. and Respondent shall not have a right to any further hearings or proceedings on any denial in whole or in part of the petition for modification of the limited license.

After five years of continuous active professional practice under this Order and without violation of the terms thereof, and upon recommendation of the Supervising Health Care Provider , Respondent may petition the Board for a termination of all limitations on the license, and restoration of an unlimited license. Such restoration shall be in the sole discretion of the Board, and denial of the petition in whole or in part shall not be considered a denial of a license within the meaning of Sec. 227.01(3)(a), Stats.

EXPENSES OF TREATMENT AND MONITORING

7. Respondent shall be responsible for all costs and expenses incurred in conjunction with compliance with the terms of this Order.

PRACTICE LIMITATIONS

8. Respondent shall practice only under the general supervision of a licensed professional nurse or other licensed health care professional approved by the Board or in a work setting pre-approved by the Board or its designated agent. Respondent shall not work as an agency or pool nurse or in a home health setting.

Reporting Required

9. Respondent shall arrange for her employer to provide formal written reports to the Department Monitor in the Department of Regulation and Licensing, Division of Enforcement, P.O. Box 8935, Madison, Wisconsin 53708-8935 on a quarterly basis, as directed by the Department Monitor. These reports shall assess Respondent's work performance.

Change in Address or Work Status

10. Respondent shall report to the Board any change of employment status, residence, address or telephone number within five (5) days of the date of a change.
11. Respondent shall furnish a copy of this Order to all present employers immediately upon issuance of this Order, and to any prospective employer when respondent applies for employment as a health care provider.

Costs

12. Respondent shall pay costs in the sum of \$ 200 to the Department of Regulation and Licensing within thirty days of the date of this Order.

Violation of any of the terms of this Order shall be construed as conduct imperiling public health, safety and welfare and may result in a summary suspension of Respondent's license; the Board in its discretion may in the alternative deny a stay of suspension of the license or impose additional conditions and limitations or other discipline.

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

WISCONSIN BOARD OF NURSING

By: Linda Sanner
Board Chair

12-05-02
Date