

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
JULIENNE MARIE ZITTLow, R.N.,	:	
RESPONDENT.	:	ORDER 0000533

[Division of Enforcement Case # 09 NUR 305]

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

Julienne Marie Zittlow, R.N.
3321 County Rd FF
Omro, WI 54963

Division of Enforcement
Department of Regulation and Licensing
1400 East Washington Avenue
P.O. Box 8935
Madison, WI 53708-8935

Board of Nursing
Department of Regulation & Licensing
1400 East Washington Avenue
P.O. Box 8935
Madison, WI 53708-8935

PROCEDURAL HISTORY

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 of Nursing. The Board has reviewed the attached Stipulation and considers it acceptable.

Accordingly, the Board adopts the attached Stipulation and makes the following:

FINDINGS OF FACT

1. Julienne Marie Zittlow, R.N., Respondent, date of birth December 5, 1963, is licensed by the Wisconsin Board of Nursing as a registered nurse in the state of Wisconsin pursuant to license number 96229, which was first granted March 20, 1987.
2. Respondent's last address reported to the Department of Regulation and Licensing is 3321 County Rd FF, Omro, WI 54963.
3. During the events of this matter, Respondent was employed as a registered nurse at Berlin Memorial Hospital in Berlin, Wisconsin.

4. Prior to the events of this matter, Respondent was diagnosed with fibromyalgia, and has taken opioid medications for chronic pain for several years.

5. On June 11, 2009, a pharmacist at Berlin Memorial Hospital discovered that one tablet of Hydrocodone/APAP 5/325, a schedule III controlled substance, was removed from the ICU Pyxis by Respondent at 0024 for a patient (Patient A) in the Emergency Department. Respondent was not involved in the care Patient A and Patient A had no orders for this medication.

6. Respondent claimed that she selected Patient A in error, and that the medication was intended for an ICU patient (Patient B) for whom she was providing care. Records showed that Patient B received a dose of the Hydrocodone/APAP 5/325.

7. When she obtained the medication from the Pyxis unit under Patient A's name, Respondent over-rode a security feature in the Pyxis system that prevents nurses from obtaining medications for patients without orders for that medication. It is Respondent's position that, because she frequently uses the override feature when working at night for patients whose orders come in after 7:00 p.m. and have not yet been reviewed by the pharmacy, she automatically over-rode the security feature. Respondent indicated in her override explanation for Patient B that the pharmacy had not entered the order.

8. Patient B's Hydrocodone/APAP 5/325 order had in fact been reviewed by a pharmacist, and would not have required an override. The Medication Administration Record (MAR) clearly indicated that the pharmacy had reviewed and entered the order, and Respondent initialed that entry on the MAR.

9. Although Respondent states that the medication was intended for Patient B, the only dose of Hydrocodone/APAP 5/325 documented as having been administered to Patient B during his hospital stay was documented as having been administered by Respondent on June 10, 2009, at 0030, a little more than six hours before Patient B was admitted to the hospital and a full 24 hours before the medication was actually obtained from the Pyxis.

10. On July 18, 2009, while counting narcotics with another nurse, Respondent found a Hydromorphone Ampule 2mg/ml empty in the Pyxis unit. Although the ampule was broken, both the ampule and the bin in which it was stored were dry, suggesting that the contents had been intentionally removed from the ampule.

11. On July 24, 2009, Respondent reported that she had made an error at 0010 that morning while obtaining Hydrocodone/APAP 5/325 from the Pyxis. Respondent stated that she had taken the medication out for Patient C when, in fact, it was for Patient D. Patient D did have an order in the MAR for Hydrocodone/APAP 5/325.

12. As with the situation involving Patients A and B, Respondent had to override the Pyxis security feature to obtain medications for Patient C, who was not currently in the hospital. Patient D's orders had been reviewed and would not have required an override.

13. Respondent documented a dose of Hydrocodone/APAP 5/325 being administered to Patient D at 0010. However Patient D, who was lucid and alert, denied receiving this pill.

14. At approximately 0545, Respondent wrote an entry on the MAR for Patient D for Hydrocodone/APAP 10/500, and obtained one tablet from the Pyxis. There was no order for this

strength of medication on the patient's chart. Respondent documented giving one tablet to Patient D at 0545. Patient D did acknowledge receiving a pill at this time, although he could not confirm the strength of the dose.

15. Respondent obtained two Hydrocodone/APAP 5/500 tablets from the Pyxis unit at 0252 on July 24 to be administered to Patient E. She did not document the medication on the MAR, but noted it in the nurses' notes. Patient E, who was lucid and alert, recalled receiving a dose at approximately 2100 and another at approximately 0830 that morning. She denied receiving any pill in between those times. A review of the MAR indicated that Patient E received two tablets at 2045 on July 23 and at 0820 on July 24, confirming Patient E's recollection.

16. Respondent states that the doses she removed from Pyxis were all administered and denied any kind of theft, personal use or diversion of the involved controlled substances.

17. On November 17 and December 1, 2009, Respondent completed an AODA assessment with Winnebago County Human Services Behavior Health Unit in Oshkosh, Wisconsin. Respondent had a SUDDS (Substance Abuse Disorders Diagnosis Schedule); diagnosis of 303.9 Alcohol Dependence by History/304.8 Polydrug Dependence by History. It was recommended that Respondent be re-evaluated for ongoing use of pain medication by a physician qualified in addictions and outside of her primary prescribing physician. Other recommendations included abstinence from alcohol and other mood altering substances along with establishment of community support system.

18. On October 15, 2010, Respondent was evaluated by a physician qualified in addictions. He found that she was at moderate risk for abuse of or addiction to opioid medications. He recommended that, given Respondent's history of substance abuse, her pain be treated without opioid medications. If, after a trial on other medications, her pain cannot be adequately controlled without opioid medications, he recommended frequent random urine screens and pill counts, as well as input from psychology and physical therapy.

CONCLUSIONS OF LAW

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

2. Respondent's conduct as described above constitutes a violation of Wis. Admin. Code §§ N 7.03(1) and (2), and subjects her to discipline pursuant to Wis. Stat. § 441.07(1)(c).

ORDER

IT IS ORDERED, that the attached Stipulation is accepted.

IT IS FURTHER ORDERED, effective the date of this Order:

SUSPENSION

A.1. The license of Julianne Marie Zittlow, R.N., Respondent, to practice as a registered nurse in the State of Wisconsin is **SUSPENDED** for an indefinite period.

- A.2. The privilege of Respondent to practice as a nurse in the State of Wisconsin under the authority of another state's license pursuant to the Nurse Licensure Compact is also **SUSPENDED** for an indefinite period.
- A.3. During the pendency of this Order and any subsequent related orders, Respondent may not practice in another state pursuant to the Nurse Licensure Compact under the authority of a Wisconsin license, unless Respondent receives prior written authorization to do so from both the Wisconsin Board of Nursing and the regulatory board in the other state.
- A.4. Respondent shall mail or physically deliver all indicia of Wisconsin nursing licensure to the Department Monitor within 14 days of the effective date of this Order. Limited credentials can be printed from the Department of Regulation and Licensing website at <http://drl.wi.gov/index.htm>.
- A.5. Upon a showing by Respondent of continuous, successful compliance for a period of at least five (5) years with the terms of this Order, including at least 600 hours of active nursing for every year the suspension is stayed, the Board may grant a petition by the Respondent under paragraph D.6. for return of full Wisconsin licensure. The Board may, on its own motion or at the request of the Department Monitor, grant full Wisconsin licensure at any time.

STAY OF SUSPENSION

- B.1. The suspension is hereby stayed based upon Respondent having provided proof, which was determined by the Board or its designee to be sufficient, that Respondent is in compliance with the provisions of Sections C and D of this Order.
- B.2. The Board or its designee may, without hearing, remove the stay upon receipt of information that Respondent is in substantial or repeated violation of any of the provisions of Sections C or D of this Order. Repeated violation is defined as the multiple violation of the same provision or violation of more than one provision. The Board may, in conjunction with any removal of any stay, prohibit the Respondent for a specified period of time from seeking a reinstatement of the stay under paragraph B.4.
- B.3. This suspension becomes reinstated immediately upon notice of the removal of the stay being provided to Respondent either by:
 - (a) Mailing to Respondent's last-known address provided to the Department of Regulation and Licensing pursuant to Wis. Stat. § 440.11; or
 - (b) Actual notice to Respondent or Respondent's attorney.
- B.4. The Board or its designee may reinstate the stay, if provided with sufficient information that Respondent is in compliance with the Order and that it is appropriate for the stay to be reinstated. Whether to reinstate the stay shall be wholly in the discretion of the Board or its designee.
- B.5. If Respondent requests a hearing on the removal of the stay, a hearing shall be held using the procedures set forth in Wis. Admin. Code ch. RL 2. The hearing shall be held in a timely manner with the evidentiary portion of the hearing being completed within 60 days of receipt of Respondent's request, unless waived by Respondent. Requesting a hearing does not stay the suspension during the pendency of the hearing process.

CONDITIONS AND LIMITATIONS

Releases

- C.1. Respondent shall provide and keep on file with her treating physicians, her employers and all testing facilities, laboratories and collections sites current releases complying with state and federal laws. The releases shall allow the Board, its designee, and any employee of the Department of Regulation and Licensing, Division of Enforcement to: (a) obtain all specimen screen results and patient health care records and reports, and (b) discuss Respondent's health care. Copies of these releases shall immediately be filed with the Department Monitor.

Sobriety

- C.2. Respondent shall abstain from all personal use of alcohol.
- C.3. Respondent shall abstain from all personal use of controlled substances as defined in Wis. Stat. § 961.01(4), except when prescribed, dispensed or administered by a practitioner for a legitimate medical condition. Respondent shall disclose Respondent's drug and alcohol history and the existence and nature of this Order to the practitioner prior to the practitioner ordering the controlled substance. Respondent shall at the time the controlled substance is ordered immediately sign a release in compliance with state and federal laws authorizing the practitioner to discuss Respondent's health care with, and provide copies of health care records to, the Board or its designee. Copies of these releases shall immediately be filed with the Department Monitor.
- C.3. Respondent shall abstain from all use of over-the-counter medications or other substances which may mask consumption of controlled substances or of alcohol, or create false positive screening results.
- C.4. Respondent shall report to the Department Monitor all medications and drugs, over-the-counter or prescription, taken by Respondent. Reports must be received within 24 hours of ingestion or administration of the medication or drug, and shall identify the person or persons who prescribed, dispensed, administered or ordered said medications or drugs. Each time the prescription is filled or refilled, Respondent shall immediately arrange for the prescriber or pharmacy to fax and mail copies of all prescriptions to the Department Monitor.

Drug and Alcohol Screens

- C.5. Respondent shall enroll and begin participation in a drug and alcohol monitoring program which is approved by the Department ("Approved Program").
- C.6. At the time Respondent enrolls in the Approved Program, Respondent shall review all of the rules and procedures made available by the Approved Program. Failure to comply with all requirements for participation in drug and alcohol monitoring established by the Approved Program is a substantial violation of this Order. The requirements shall include:
- (a.) Contact with the Approved Program as directed on a daily basis, including vacations, weekends and holidays.
 - (b.) Production of a urine, blood, sweat, fingernail, hair, saliva or other specimen at a collection site designated by the Approved Program within five (5) hours of notification of a test.
- C.7. The Approved Program shall require the testing of specimens at a frequency of not less than 48 times per year, for the first year of this Order. After the first year, Respondent may

petition the Board on an annual basis for a modification of the frequency of tests. The Board may adjust the frequency of testing on its own initiative at any time.

- C.8. If any urine, blood, sweat, fingernail, hair, saliva or other specimen is positive or suspected positive for any controlled substances or alcohol, Respondent shall promptly submit to additional tests or examinations as the Board or its designee shall determine to be appropriate to clarify or confirm the positive or suspected positive test results.
- C.9. In addition to any requirement of the Approved Program, the Board or its designee may require Respondent to do any or all of the following: (a) submit additional specimens; (b) furnish any specimen in a directly witnessed manner; or (c) submit specimens on a more frequent basis.
- C.10. All confirmed positive test results shall be presumed to be valid. Respondent must prove by a preponderance of the evidence an error in collection, testing, fault in the chain of custody or other valid defense.
- C.11. The Approved Program shall submit information and reports to the Department Monitor as directed.

Practice Limitations

- C.12. Respondent may work as a nurse or other health care provider in a setting in which Respondent has access to controlled substances.
- C.13. Respondent shall practice only under the direct supervision of a licensed nurse or other licensed health care professional approved by the Board or its designee.
- C.14. Respondent shall practice only in a work setting pre-approved by the Board or its designee. Her current work settings at Fountain View Care Center, St. Paul's Home, Lakeview Manor, Select Specialty Hospital are hereby approved.
- C.15. Respondent may not work in a home health care setting.
- C.16. Respondent shall provide a copy of this Final Decision and Order and all other subsequent orders immediately to supervisory personnel at all facilities or settings where Respondent works as a nurse or care giver or provides health care, currently or in the future.
- C.17. It is Respondent's responsibility to arrange for written reports from supervisors at the facilities or settings where she works to be provided to the Department Monitor on a quarterly basis, as directed by the Department Monitor. These reports shall assess Respondent's work performance, and shall include the number of hours of active nursing practice worked at that facility or setting during that quarter.
- C.18. 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 and before commencing new employment.

MISCELLANEOUS

Department Monitor

- D.1. Any requests, petitions, reports and other information required by this Order shall be mailed, e-mailed, faxed or delivered to:

Department Monitor
Wisconsin Department of Regulation and Licensing

Division of Enforcement
1400 East Washington Avenue
P.O. Box 8935
Madison, WI 53708-8935
Fax: (608) 266-2264
Telephone: (608) 267-3817

Required Reporting by Respondent

- D.2. Respondent is responsible for compliance with all of the terms and conditions of this Order, including the timely submission of reports by others. Respondent shall promptly notify the Department Monitor of any failures of the Approved Program or collection sites to conform to the terms and conditions of this Order. Respondent shall promptly notify the Department Monitor of any violations of any of the terms and conditions of this Order by Respondent.

Change of Approved Program by Board

- D.3. If the Board or its designee determines the Approved Program has performed inadequately or has failed to satisfy the terms and conditions of this Order, the Board or its designee may direct that Respondent continue testing with another Approved Program.

Petitions for Modification of Limitations or Termination of Order

- D.4. Respondent may petition the Board on an annual basis for modification of the terms of this Order, however no such petition for modification shall occur earlier than one year from the date of this Order. Denial of a petition in whole or in part shall not be considered a denial of a license within the meaning of Wis. Stat. § 227.01(3)(a), and Respondent shall not have a right to any further hearings or proceedings on the denial.
- D.5. Respondent may petition the Board for termination of this Order anytime after five years from the date of this Order. However, no petition for termination shall be considered without a showing of continuous, successful compliance with the terms of the Order, for at least five years.

Costs of Compliance

- D.6. Respondent shall be responsible for all costs and expenses incurred in conjunction with the monitoring, screening, supervision and any other expenses associated with compliance with the terms of this Order. Being dropped from a testing program for non-payment is a violation of this Order.

Costs of Proceeding

- D.7. Respondent shall pay costs of \$2,000.00 to the Department of Regulation and Licensing, within 24 months from the date of this Order. In the event Respondent fails to timely submit any payment of costs, Respondent's license SHALL BE SUSPENDED, without further notice or hearing, until Respondent has complied with the terms of this Order.

Additional Discipline

- D.8. In addition to any other action authorized by this Order or law, violation of any term of this Order may be the basis for a separate disciplinary action pursuant to Wis. Stat. § 441.07.

Wisconsin Board of Nursing

By: Karen Smith
A Member of the Board

11-4-10
Date