# WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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## STATE OF WISCONSIN BEFORE THE BOARD OF NURSING

IN THE MATTER OF DISCIPLINARY

PROCEEDINGS AGAINST

FINAL DECISION AND ORDER

AMANDA R. LUEDTKE, RESPONDENT.

ORDER 0002120

Division of Enforcement Case No. 12 NUR 192

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

Amanda R. Luedtke W310 S10369 Hwy I Mukwonago, WI 53149

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

Division of Enforcement
Department of Safety and Professional Services
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 disposition of this matter, subject to the approval of the Wisconsin Board of Nursing (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, Conclusions of Law and Order.

## **FINDINGS OF FACT**

- 1. Respondent Amanda R. Luedtke (dob 08/01/1989) is licensed in the State of Wisconsin as a Licensed Practical Nurse, having license number 31-313759, first issued on 06/01/2011 and current through 04/30/2013.
- 2. Respondent's most recent address on file with the Wisconsin Department of Safety and Professional Services (Department) is W310 S10369 Hwy I, Mukwonago, WI 53149.
- 3. At all times relevant, Respondent was employed as a Licensed Practical Nurse at Brookfield Rehabilitation and Specialty Care (Brookfield Rehab) in Brookfield, WI.

- 4. During Respondent's shift on April 5, 2012, Respondent was given the data collection tools and patient care plan documentation for an incoming patient.
- 5. Respondent filled out sections of the data collection tools and patient care plan documents for the patient prior to actual admission to Brookfield Rehab. Respondent completed several pain and emotional assessments, including:
  - a. On the Resident Pain Review Tool, "No" was checked for the question "For the resident: Have you had persistent or frequent pain in the past two (2) weeks?"
  - b. On the Resident Pain Review Tool, "No" was checked for the question "Have you received medication or treatment for pain the last two (2) weeks?"
  - c. Several "Non-Verbal Pain Indicators" were checked on the Resident Pain Review Tool, including "Grimacing," "Refusing to Eat," and "Clenched Teeth," and "None" was checked for the question "Are there any accompanying symptoms[?]"
- 6. When Respondent completed her shift on April 5, 2012, the patient had yet to be admitted to Brookfield Rehab. Further, the complaint submitted by the Brookfield Rehab Director of Nursing indicated that the patient had yet to be admitted at the time the complaint form was completed on April 6, 2012.
- 7. The dates written on the data collection tools and patient care documents were found to have been changed from "4/5/12" to 4/6/12." Respondent maintains that these changes were not made by her.
- 8. Respondent was terminated from her employment at her next scheduled shift after this incident.

### **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 pursuant to Wis. Stat. § 227.44(5).
- 2. By the conduct described in the Findings of Fact, Amanda R. Luedtke engaged in unprofessional conduct as defined in Wis. Admin. Code § N 7.04(6).
- 3. As a result of the above violation, Amanda R. Luedtke is subject to discipline pursuant to Wis. Stat. § 441.07(d).

### ORDER

- 1. The attached Stipulation is accepted.
- 2. Respondent Amanda R. Luedtke is REPRIMANDED.

- 3. The license of Amanda R. Luedtke (license number 31-313759) to practice nursing in the State of Wisconsin, and her privilege to practice in Wisconsin pursuant to the Nurse Licensure Compact, are LIMITED as follows:
  - a. Respondent, at her own expense, shall complete THREE hours of education on documentation and the legal aspects of nursing and THREE hours of education on the ethical aspects of nursing within ninety days of the date of this Order. Respondent is responsible for finding appropriate courses and submitting the course information to the Board for approval prior to taking the course and in sufficient time to obtain board approval within the 90-day time frame, taking into account the Board's meeting schedule. Respondent shall provide proof of completion of the education to the Department Monitor at the address stated below.
- 4. Upon successful completion of the ordered education, Respondent may petition the board for the modification or termination of the limitation. The Board may grant or deny the petition, in its discretion, or may modify this Order as it sees fit.
- 5. Within 90 days from the date of this Order, Amanda R. Luedtke shall pay COSTS of this matter in the amount of \$231.66.
- 6. Proof of successful course completion and payment of costs (made payable to the Wisconsin Department of Safety and Professional Services) shall be sent by Respondent to the Department Monitor at the address below:

Department Monitor
Division of Enforcement
Department of Safety and Professional Services
P.O. Box 8935, Madison, WI 53708-8935
Telephone (608) 267-3817; Fax (608) 266-2264
DSPSMonitoring@wisconsin.gov

7. Violation of any of the terms of this Order may 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 impose additional conditions and limitations or other additional discipline for a violation of any of the terms of this Order. In the event Respondent fails to timely submit payment of the costs as ordered, or fails to submit proof of successful completion of the ordered education as set forth above, Respondent's license (no. 31-313759) may, in the discretion of the Board or its designee, be SUSPENDED, without further notice or hearing, until Respondent has complied with payment of the costs and completion of the education.

8. This Order is effective on the date of its signing.

WISCONSIN BOARD OF NURSING

by: Qulia nolson RN

A Member of the Board

Date | | 12