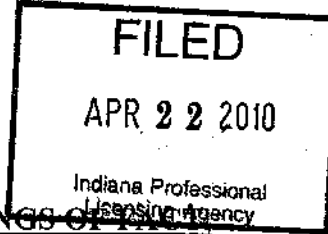


BEFORE THE INDIANA STATE  
BOARD OF NURSING  
CAUSE NUMBER: 2009 NB 162

IN THE MATTER OF THE LICENSE OF )  
 )  
CHRISTINA L. PAINTER, R.N., )  
 )  
LICENSE NO: 28125249A )



**FINDINGS OF FACT, ULTIMATE FINDINGS OF FACT,  
CONCLUSION OF LAW AND ORDER**

The Petitioner, the State of Indiana, by Deputy Attorney General Laura E. Wilford, Division of Consumer Protection (“Petitioner”), and the Respondent, Christina L. Painter, R.N. (“Respondent”), signed a Settlement Agreement (“Agreement”) which purports to resolve all issues involved in the action by the Petitioner before the Indiana State Board of Nursing (“Board”) regarding Respondent’s license, and this Agreement has been submitted to the Board for approval.

The Board, after reviewing the Agreement at the March 18, 2010, meeting now finds it has been entered into fairly and without fraud, duress or undue influence, and is fair and equitable between the parties. The Board hereby incorporates the Agreement as if fully set forth herein and approves and adopts in full the Agreement as a resolution of this matter. The Board approved this Agreement by a vote of 5 in favor and 0 against and 0 abstaining. The Board hereby issues the following Findings of Fact, Ultimate Findings of Fact, Conclusion of Law and Order:

**STIPULATED FINDING OF FACTS**

1. Respondent’s address on file with the Indiana Professional Licensing Agency is 311 E. 1<sup>st</sup> Avenue, Huntingburg, IN 47542. Respondent is a Registered Nurse in the State of Indiana having been issued license number 28125249A in 1994.

2. On or around February 12, 2004, Respondent began intake with the Indiana State Nurses Assistance Program ("ISNAP"). Respondent was referred by her former employer, St. Joseph's Hospital, located in Huntingburg, Indiana, due to alcohol-related problems. Respondent reported that she participated in outpatient treatment in late 2003 and inpatient substance abuse treatment in January 2004, with subsequent intensive outpatient therapy, but she reported not attending regularly and relapsed. Respondent stated she was hospitalized three times within a two week period for alcohol overdoses. Respondent described herself as a binge drinker.

3. On or around February 24, 2004, Mary B. Noon, MSW, Southern Hills Counseling Center, diagnosed Respondent with Alcohol Dependence.

4. On or around March 8, 2004, Respondent was hospitalized for alcohol overdose and was referred for residential treatment at Turning Point for thirty days.

5. On or around May 24, 2004, Respondent began her employment with Northwood Good Samaritan Health Center in Jasper, Indiana.

6. On or around June 16, 2004, Respondent signed a five-year Recovery Monitoring Agreement ("RMA") with ISNAP.

7. On or around July 1, 2004, Noon stated in her monthly report, "[Respondent] is doing very well."

8. On or around September 3, 2004, Respondent's urine drug screen tested positive for alcohol. Respondent stated that she had taken cough syrup with alcohol.

9. On or around February 8, 2005, Respondent's urine drug screen tested positive for alcohol. Respondent stated that she had taken cough syrup with alcohol.

10. On or around February 22, 2005, Respondent's urine drug screen tested positive for alcohol. No explanation was given.

11. On or around March 23, 2005, Alice Berger, Respondent's new therapist, reported to ISNAP that Respondent had missed group therapy six times, was "unkempt" and admitted to using "cold" medicine and drinking non-alcoholic beer.

12. On or around October 12, 2005, ISNAP's quarterly compliance report indicated that Respondent was in partial compliance. ISNAP did not have Respondent's therapist and self-reports and Respondent had failed to submit to two urine drug screens.

13. On or around December 12, 2005, Berger stated in her quarterly report that Respondent was "maintaining sobriety and is ready for a less structured program of therapy."

14. On or around December 28, 2005, Respondent was charged with two counts of Operating a Vehicle While Intoxicated, a Class A Misdemeanor, Operating a Vehicle While Intoxicated, a Class C Misdemeanor, Driving While Suspended, a Class A Infraction, Operating a Motor Vehicle without Financial Responsibility, a Class A Infraction and Driving Left of Center, a Class C Infraction in Dubois County Superior Court, Dubois County, Indiana, in Cause Number 19D01-0512-CM-1172. Respondent notified ISNAP of her arrest.

15. On or around December 29, 2005, Respondent pled guilty to one count of Operating a Motor Vehicle While Intoxicated, a Class A Misdemeanor and Driving While Suspended, a Class A Infraction in Dubois County Superior Court, in Cause Number 19D01-0512-CM-1172. Respondent's other charges were dismissed.

Respondent was sentenced to probation for one year and was given a one year suspended sentence.

16. On or around January 10, 2006, Dr. James C. Macke, Respondent's addictionist, stated in his quarterly report that "[Respondent] seems to be stable again."

17. On or around February 6, 2006, Respondent's worksite monitor, Judy Pund, reported to ISNAP that a co-worker found Respondent drunk outside of her home and Respondent was taken to the hospital. She considered this a relapse.

18. On or around February 7, 2006, ISNAP's quarterly compliance report indicated that Respondent was in significant non-compliance. Respondent had submitted no urine drug screens for the quarter. Respondent's account with Witham was delinquent.

19. On or around February 9, 2006, Respondent returned to work after being released from the hospital even though she was not authorized to return to work by ISNAP.

20. On or around February 21, 2006, Respondent's urine drug screen was dilute with a creatinine of 0.15. ISNAP considers a creatinine of 0.12 to 0.20 to possibly be caused by drinking too many fluids and a creatinine level of 0.10 or lower, and especially 0.05 or lower, to possibly be caused by drinking too many fluids to intentionally dilute the urine sample; however, certain medications can also cause a dilute urine sample.

21. On or around February 27, 2006, ISNAP received the results of Respondent's urine drug screens from September 2005 and February 13, 2006. Between September 2005 and February 13, 2006 Respondent had six dilute urine drug screens:

October 3, 2005 creatinine of 0.17, October 19, 2005 creatinine of 0.20, December 29, 2005 with a creatinine of 0.16, January 11, 2006 with a creatinine of 0.14, February 2, 2006 with a creatinine of 0.19 and February 13, 2006 with a creatinine of 0.15. Then, on March 10, 2006, Respondent had another dilute urine drug screen with a creatinine of 0.12.

22. On or around March 29, 2006, Respondent informed ISNAP that she was prescribed Lasix, a water pill that is also used to treat high blood pressure. ISNAP counseled Respondent on how to take her medication to avoid having future dilute urine drug screens. ISNAP also changed the frequency that Respondent tested and required her urine drug screens to be tested for Ethyl Glucuronide (EtG), a test used to detect alcohol, because of her December 2005 Operating a Motor Vehicle While Intoxicated conviction.

23. On or around April 28, 2006, ISNAP's quarterly compliance report indicated that Respondent was in partial compliance. Respondent had missed two urine drug screens and Pund reported a relapse on February 6, 2006.

24. On or around July 27, 2006, ISNAP's quarterly compliance report indicated that Respondent was in significant non-compliance. ISNAP did not have Respondent's addictionist, therapist, sponsor, April and May, and self-reports and meeting logs. Respondent also failed to submit to four urine drug screens.

25. On or around September 15, 2006, Respondent's urine drug screen tested positive for alcohol. Respondent denied using alcohol. Respondent stated that she was in a custody battle with her ex-husband and that while visiting him and their daughter he may have slipped something in her drink.

26. On or around September 26, 2006, Respondent's urine drug screen tested positive for alcohol. Respondent stated that she used mouthwash for an infected tooth.

27. On or around October 5, 2006, Respondent's urine drug screen was dilute with a creatinine of 0.12.

28. On or around November 2, 2006, ISNAP's quarterly compliance report indicated that Respondent was in significant non-compliance. Respondent had two positive urine drug screens and missed four urine drug screens.

29. On or around November 14, 2006, Respondent's RMA was extended one year.

30. On or around November 29, 2006, ISNAP mailed Respondent a "first dilute drug screen letter" as a result of her October 5, 2006 dilute urine drug screen. A "first dilute drug screen letter" explains how to avoid having future dilute urine drug screens.

31. On or around December 20, 2006, Respondent's urine drug screen was dilute with a creatinine of 0.07.

32. On or around December 29, 2006, ISNAP mailed Respondent a "second dilute drug screen letter." A "second dilute drug screen letter" is mailed after an ISNAP participant has had two dilute urine drug screens in a three-month time period. It provides specific steps on how to avoid future dilute urine drug screens.

33. On or around January 18, 2007, Respondent's urine drug screen was positive for alcohol. No explanation was given.

34. On or around January 24, 2007, ISNAP's quarterly compliance report indicated Respondent was in partial compliance. Respondent's sponsor report and self-report for November was missing.

35. On or around March 19, 2007, Dr. Macke stated in his quarterly report that Respondent "seems more stable in her recovery."

36. On or around March 28, 2007, Respondent's urine drug screen tested positive for alcohol. No explanation was given.

37. On or around April 3, 2007, Respondent's urine drug screen was dilute with a creatinine of 0.15.

38. On or around April 16, 2007, ISNAP mailed Respondent a "first dilute drug screen letter."

39. On or around May 2, 2007, Respondent's urine drug screen tested positive for alcohol. No explanation was given.

40. On or around May 8, 2007, ISNAP's quarterly compliance report indicated Respondent was in partial compliance. Respondent had missed one urine drug screen.

41. On or around July 7, 2007, Respondent's urine drug screen was dilute with a creatinine of 0.11.

42. On or around July 20, 2007, ISNAP mailed Respondent a "first dilute drug screen letter."

43. On or around July 31, 2007, ISNAP's quarterly compliance report indicated Respondent was in significant non-compliance. ISNAP did not have

Respondent's meeting logs, self-reports, sponsor reports and worksite monitor reports.

Respondent also failed to submit to one urine drug screen.

44. On or around August 31, 2007, Respondent's RMA was extended three months.

45. On or around October 4, 2007, Respondent's urine drug screen was dilute with a creatinine of 0.11.

46. On or around October 12, 2007, ISNAP mailed Respondent a "second dilute drug screen letter."

47. On or around October 29, 2007, Respondent completed an Indiana Professional Licensing Agency online renewal application and answered "no" to the question, "Since you last renewed, have you been convicted of or pled guilty to a violation of a federal or state law or are criminal charges pending?"

48. On or around October 31, 2007, ISNAP's quarterly compliance report indicated Respondent was in significant non-compliance. Respondent's addictionist, sponsor and August and September reports were missing, along with her meeting logs. Respondent also missed one urine drug screen.

49. On or around November 29, 2007, Respondent's RMA was extended three months.

50. On or around January 8, 2008, Respondent's urine drug screen was dilute with a creatinine of 0.14.

51. On or around January 17, 2008, ISNAP mailed Respondent a "first dilute drug screen letter."

52. On or around January 29, 2008, ISNAP's quarterly compliance report indicated Respondent was in significant non-compliance. ISNAP did not have Respondent's meeting logs, worksite monitor report and October self-report. Respondent also failed to submit to three urine drug screens.

53. On or around February 1, 2008, Respondent's urine drug screen was dilute with a creatinine of 0.19.

54. On or around February 20, 2008, ISNAP mailed Respondent a "second dilute drug screen letter."

55. On or around February 15, 2008, Respondent's RMA was extended three months.

56. On or around April 15, 2008, Respondent's employment was terminated from Northwood Good Samaritan Health Center for failure to follow the policies and procedures regarding the administration of medication and for making personal phone calls while at work.

57. On or around April 16, 2008, Pund reported that Respondent's employment was terminated. Pund stated that Respondent had not been herself and came into work looking "disheveled and stressed out." Pund reported that there had been six major medical omissions where Respondent charted that she had given the medications, but, they were still in the Pyxis system and had not been given. Pund did not suspect diversion.

58. On or around May 1, 2008, ISNAP's quarterly compliance report indicated Respondent was in significant non-compliance. Respondent failed to submit to two urine drug screens.

59. On or around May 12, 2008, ISNAP received the results of Respondent's April 28, 2008 urine drug screen. Respondent tested positive for alcohol, at 2170 ng/mL. Respondent stated that she found an old bottle of alcohol and without thinking she drank it. This was considered a relapse.

60. On or around May 20, 2008, Respondent completed an "Application for Employment" with St. Charles Health Campus in Jasper, Indiana. Respondent stated that she left Northwood Good Samaritan Health Center for "personal [reasons and] left on good terms."

61. On or around May 27, 2008, Respondent began her employment with St. Charles Health Campus. Respondent is still employed with St. Charles Health Campus.

62. On or around June 3, 2008, ISNAP closed Respondent's file due to her pattern of significant non-compliance.

63. On or around December 17, 2009, Respondent initiated intake with ISNAP.

64. On or around January 28, 2010, Respondent entered into a three-year monitoring agreement with ISNAP.

#### **STIPULATED CONCLUSIONS OF LAW**

The parties further stipulate:

1. Respondent's conduct violated Ind. Code § 25-1-9-4(a)(4)(D).
2. Respondent's conduct violated Ind. Code § 25-1-9-4(a)(1)(A).
3. Respondent's conduct violated Ind. Code § 25-1-9-4(a)(1)(B).
4. Respondent's conduct violated Ind. Code § 25-1-9-4(a)(2)(B).

### ULTIMATE FINDING OF FACT

Respondent's violation is cause for disciplinary sanctions which may be imposed singly or in combination such as censure, a letter of reprimand, probation, suspension, or revocation and a fine up to the amount of \$1,000 per violation as detailed at Ind. Code § 25-1-9-9.

### ORDER

1. The Board has jurisdiction over the Respondent and the subject matter in this disciplinary action.
2. The parties execute this Agreement voluntarily.
3. Both parties voluntarily waive their rights to a public hearing on the Complaint.
4. Petitioner agrees that the terms of this Agreement will resolve any and all pending claims or allegations relating to disciplinary action against Respondent's Indiana nursing license.
5. Respondent agrees that her Indiana nursing license shall be placed on **Indefinite Probation** subject to the following terms and conditions:
  - A. Respondent shall maintain complete compliance with her ISNAP RMA;
  - B. Prior to petitioning for withdrawal of probation, Respondent agrees she shall successfully complete her ISNAP RMA;

- C. After successful completion of her RMA and prior to petitioning for withdrawal of probation, Respondent agrees she shall have six (6) months of active nursing practice. During that time, bi-monthly supervisor reports shall be sent to the Board. Contents of said reports shall be the same as Respondent's ISNAP worksite monitor reports;
- D. Prior to petitioning for withdrawal of probation, Respondent agrees she shall submit to the Board proof of completion of seventy-two (72) contact hours of continuing education for nurses in the following areas:
1. Twenty-four (24) contact hours in the area of medication administration;
  2. Twenty-four (24) contact hours in the area of addiction/substance abuse;
  3. Twenty-four (24) hours in the area of professionalism/ethics in nursing;
- E. Prior to petitioning for withdrawal of probation, Respondent agrees she shall pay a fine payable to the Indiana Professional Licensing Agency in the amount of **SEVEN HUNDRED FIFTY DOLLARS (\$750.00)**.


6. Respondent has carefully read and examined this Agreement and fully understands its terms and that, subject to a final order issued by the Board, this Agreement is a final disposition of all matters and not subject to further review.

7. Respondent further understands that a violation of the Final Order, any non-compliance with the statutes or regulations regarding the practice of nursing, or any violation of the Settlement Agreement may result in the State requesting an emergency suspension of Respondent's license, an Order to Show Cause as may be issued by the Board, or a new cause of action pursuant to Ind. Code § 25-1-9-4, any or all of which could lead to additional sanctions, up to and including a revocation of Respondent's license.

8. The parties agree to the continuing jurisdiction of the Board and that the discipline agreed to, terms of discipline, and licensure status will apply even if the Board renews the Respondent's license at a later date.

So ORDERED, ADJUDGED, and DECREED, this 22<sup>nd</sup> day of April, 2010.

INDIANA STATE BOARD OF NURSING

*for*  
  
\_\_\_\_\_  
Frances L. Kelly  
Executive Director  
Indiana Professional Licensing Agency

**Copies To:**

Christina Painter, R.N.  
311 E. 1<sup>st</sup> Ave.  
Huntingburg, IN 47542

**SENT CERTIFIED MAIL NO.: 7006 2760 0003 4664 0771**  
**RETURN RECEIPT REQUESTED**

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