BEFORE THE INDIANA BOARD OF PHARMACY
CAUSE NUMBER: 2011 IBP 0013

IN THE MATTER OF THE INDIANA PHARMACIST LICENSE OF:

SANDRA HAYES, R.PH.
LICENSE NUMBER: 26018300A.

ORDER TO SHOW CAUSE

Comes now the Indiana Board of Pharmacy on its own motion and pursuant to Ind. Code § IC 4-21.5, and hereby orders **Sandra Hayes ("Respondent")** to appear before the Board on **May 13, 2013 at 2:00 p.m.**, Local Time, in Conference Room W064 of the Indiana Professional Licensing Agency, Indiana Government Center South, 402 West Washington Street, Indianapolis, Indiana 46204.

1.) Respondent is ordered to show cause as to whether or not further disciplinary action should be imposed on her pharmacist license due to noncompliance with the probationary terms as set forth in the Board's May 19, 2011, Findings of Fact, Ultimate Findings of Fact, Conclusions of Law, and Order, which is attached herein as Exhibit A, in that Respondent has violated the following terms of her probation:

k. Respondent must comply with the terms of her PRN contract.

2.) This notice is being provided to Respondent Sandra Hayes at, 416 West Walnut Street, Flora, IN 46929.

3.) This notice is being provided to counsel for the State of Indiana, Darren Covington, Deputy Attorney General, Office of the Attorney General, Indiana Government Center South, 302 West Washington Street, 5th Floor, Indianapolis, Indiana 46204, telephone number (317) 233-6506.

4.) The official cause number of this action is **2011 IBP 0013.**

5.) The Board is empowered to hold this disciplinary hearing pursuant to the authority of Ind. Code § IC 25-1-9 and IC 4-21.5.

6.) The Board will be presiding as administrative law judge in this matter. Greg Pachmayr, Director of the Board, may be contacted to obtain information concerning hearing schedules and procedures by mail in care of the Indiana Professional Licensing Agency, 402 West Washington Street, Room W072, Indianapolis, Indiana 46204, by e-mail at pla4@pla.in.gov, by facsimile at (317) 233-4536, or by telephone at (317) 234-2067.

7.) Any party may be advised or represented by counsel at the party's own expense.

8.) A party who fails to attend or participate in a prehearing conference, hearing, or other later stage of this proceeding may be held in default or have the proceeding dismissed under section 24 of Ind. Code § IC 4-21.5-3.

9.) Pursuant to Ind. Code § 4-21.5-3-34, this Board may afford parties the opportunity to informally settle matters; however, this section does not require any person to settle a matter under this agency's informal procedures.

ORDERED, this 23 day of April, 2013.

INDIANA BOARD OF PHARMACY

By: _____
Virgil R. Madden
Executive Director
Indiana Professional Licensing Agency

CERTIFICATE OF SERVICE

I certify that a copy of the "Hearing Notice" has been duly served upon:

Sandra Hayes
416 West Walnut Street
Flora, IN 46929
Service by U.S. Mail

Darren R. Covington, Deputy Attorney General
Office of the Indiana Attorney General
Indiana Government Center South
302 West Washington Street, Fifth Floor
Indianapolis, IN 46204
Service by E-Mail

4/23/13
Date

Jackie Day
Jackie Day

Indiana Board of Pharmacy
Indiana Government Center South
402 West Washington St., Room W072
Indianapolis, IN 46204
Phone: 317-234-2067
Fax: 317-233-4236
Email: pla4@pla.in.gov

Explanation of Service Methods
Personal Service: by delivering a true copy of the aforesaid document(s) personally.
Service by U.S. Mail: by serving a true copy of the aforesaid document(s) by First Class U.S. Mail, postage prepaid.
Service by Email: by sending a true copy of the aforesaid document(s) to the individual's electronic mail address.

BEFORE THE INDIANA BOARD OF PHARMACY
CAUSE NUMBER: 2011 IBP 0013

IN THE MATTER OF THE INDIANA PHARMACIST LICENSE OF:

SANDRA MARIE HAYES, R.PH., LICENSE NUMBER: 26018300A.

FINDINGS OF FACT, ULTIMATE FINDINGS OF FACT, CONCLUSIONS OF LAW, AND ORDER

The State of Indiana ("Petitioner"), by the Office of the Attorney General, by Darren R. Covington, Deputy Attorney General, and Sandra Marie Hayes, R.Ph. ("Respondent"), by counsel John J. Uskert, signed a Proposed Settlement Agreement ("Agreement") which purports to resolve all issues involved in the action by the Petitioner and the Indiana Board of Pharmacy ("Board") regarding the Respondent's license, and which Agreement has been submitted to the Board for approval.

The Board after reviewing the Agreement at the May 9, 2011 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 4-0-0. Incorporated into the Agreement was the consensus of both parties to the following Findings of Fact, Ultimate Findings of Fact, Conclusions of Law, and Order. The Board, hereby issues the following Findings of Fact, Ultimate Findings of Fact, Conclusions of Law, and Order:

EXHIBIT A

FINDINGS OF FACT

1. Respondent's address on file with the Indiana Professional Licensing Agency is 416 West Walnut Street, Flora, Indiana 46929. Respondent is a licensed pharmacist in the State of Indiana having been issued license number 26018300A on July 28, 1994.
2. At all times relevant herein, Respondent was employed as a floater pharmacist with Marsh Pharmacy on East Washington Street in Indianapolis, in Lafayette (Teal and State Road 26), Zionsville, and Marion, Indiana.
3. On June 23, 2010, Respondent provided a written statement to Marsh Pharmacy in which she admitted that she had diverted 100 tablets of hydrocodone 10/325 in April 2010 and 40 tablets of hydrocodone 7.5/325 and 70 tablets of hydrocodone 10/325 in May 2010.
4. Respondent stated that in December 2005 she had surgery and following the surgery was prescribed hydrocodone. She eventually went to a pain management clinic where she was prescribed methadone 10 mg and hydrocodone 10/325, as-needed. Later, Respondent was prescribed Percocet 10/325, as-needed. Respondent has also been prescribed Zoloft, Ambien, trazadone, and Klonopin. Respondent admitted that she became addicted to Percocet.
5. On or around June 23, 2010, Respondent's employment was terminated from Marsh Pharmacy.
6. On or around August 10, 2010, the Petitioner received a letter from Respondent in which she stated that in November 2009 her husband died of a sudden illness. In an effort to cope, she began using eight tablets of Percocet a day, along with methadone. By April 2010, she stated she was using up to twelve Percocet tablets a day. Respondent stated that she ran out of her prescription early and then took 100 tablets of hydrocodone 10/325 from Marsh Pharmacy.

Respondent stated that she again ran out of her Percocet prescription early in May 2010 and took forty tablets of Norco 7.5 mg and seventy tablets of Norco 10 mg.

7. Respondent was clinically depressed prior to termination from her employment. Respondent voluntarily enrolled in therapy at Methodist Hospital's Intensive Outpatient Drug Addiction Program.
8. On or around January 25, 2011, Respondent signed a contract with the Pharmacists Recovery Network ("PRN"). As of March 11, 2011, Respondent has been in full compliance with the terms of her PRN contract. Dr. Richard Hinchman stated that Respondent was safe to return to work as a pharmacist.

ULTIMATE FINDINGS OF FACT

1. Respondent violated Ind. Code § 25-1-9-4(a)(1)(B) in that Respondent engaged in material deception in the course of professional services or activities.
2. Respondent violated Ind. Code § 25-1-9-4(a)(4)(D).
3. Respondent violated Ind. Code § 25-1-9-4(a)(8)(A) in that Respondent diverted a legend drug.

CONCLUSIONS OF LAW

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

ORDER

Based upon the above Findings of Fact, Ultimate Findings of Fact, and Conclusions of Law, the Board issues the following Order:

1. Respondent's Indiana pharmacist license shall be placed on **INDEFINITE PROBATION.** Respondent may not petition for withdrawal of probation until after she has successfully completed her PRN contract.
2. Respondent shall be governed by the following **TERMS** and **CONDITIONS** while on probation:
    a. Respondent must keep the Board apprised of the following information and update it as necessary:
        I. Respondent's current home address, mailing address, e-mail address, and residential telephone number.
        II. Respondent's place of employment, employment telephone number, employment e-mail address, and name of supervisor.
        III. Respondent's occupation title and work schedule, including the number of hours worked per week.
    b. Respondent shall present the Board's Order to her employer and have the employer sign a copy and return it to the Board within ten days from when the Order is issued, or from when her employment begins.
    c. Respondent will cause Respondent's employer to submit quarterly written reports to the Board advising the Board of Respondent's professional competence, sense of responsibility, work habits, mental attitude, and ability to work with others. If Respondent is unemployed while on probation, Respondent will submit a written personal report to the Board.
    d. Respondent shall immediately notify the Board in writing of any relapse.

e. Respondent shall submit a copy of any prescription Respondent receives for personal use to the Board.

f. Respondent shall appear before the Board on a monthly basis for the first year of probation, and quarterly thereafter. **Her first probation appearance shall be at the June 13, 2011 Board Meeting.**

g. Respondent shall not work more than tweleve (12) hours in any single day or forty-five (45) hours per week. Respondent may work two 12 hour shifts a week, so long as they are not consecutive.

h. Respondent shall complete six (6) contact hours in ethics and shall submit verification of said hours to the Board within thirty (30) days of this course. Respondent must complete the continuing education within ninety (90) days from the date of the Order.

i. Respondent shall report to the Board if Respondent is arrested at any time while on probation.

j. Respondent may not be a qualifying pharmacist.

k. Respondent must comply with the terms of her PRN Contract.

l. Respondent shall perform two (2) hours of community service for each month that she is on probation. Respondent shall cause the responsible person for the establishment at which she provides community service to verify in writing the number of hours of community service Respondent performed. Respondent shall submit such verification to the Board on a quarterly basis.

3. Respondent's violation of the Final Order, any non-compliance with the statutes or regulations regarding the practice of pharmacy, or any violation of the 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.

ORDERED, this 19 day of May, 2011.

INDIANA BOARD OF PHARMACY

By: _____
Frances L. Kelly
Executive Director
Indiana Professional Licensing Agency

Copies To:

Sandra Marie Hayes
416 West Walnut St.
Flora, IN 46929
SENT CERTIFIED MAIL NUMBER: 91 7190 0005 2720 0008 4047
RETURN RECEIPT REQUESTED.

John J. Uskert
Attorney for Respondent
11978 Fishers Crossing Dr.
Fishers, IN 46038

Darren R. Covington, Deputy Attorney General
OFFICE OF THE INDIANA ATTORNEY GENERAL
Indiana Government Center South
302 West Washington Street, Fifth Floor
Indianapolis, IN 46204

Shipment Request Form PBMS State of Indiana

Z900000102178

Agency IDOA

From:

Name: IPLA W072, IGCS

Department:

Phone:

ECertified: True

EReturn Receipt: True

To:

Ship To 1: Sandra M. Hayes

Ship To 2:

Address: 416 W Walnut St

Flora, IN 46929-1262

Country: US

Special Instructions:

Reference: **Requested Date:** 5/18/2011 10:35:33 AM

To print this form:

1) Click the Print button. (Print two copies, one to attach to your package and one to keep for your records.)

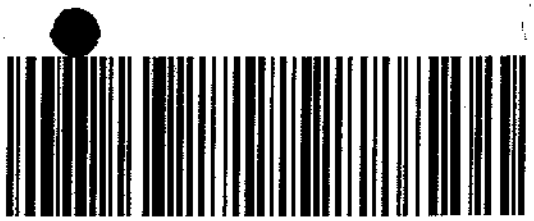
2) Place the form in a waybill pouch or attach it to your shipment so that the barcode portion of the page can be read and scanned.

3) If ECertified cover letter was selected , place letter contents along with eCertified cover letter in special certified enevelope so that Certified Bar code shows through window.

Print Close

Form (1 of 1)

State of Indiana
IPLA W072, IGCS
402 W Washington St
INDIANAPOLIS IN 46204



91 7190 0005 2720 0008 4047

Sandra M. Hayes
416 W Walnut St
Flora IN 469291262

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