

CERTIFIED MAIL - RETURN RECEIPT REQUESTED NO. _____

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH AND ADDICTION SERVICES
BUREAU OF HEALTH SYSTEM REGULATION
DIVISION OF MEDICAL QUALITY ASSURANCE

In re: Todd Krasinsky

Petition No. 940225-10-020

PRELICENSURE CONSENT ORDER

WHEREAS, Todd Krasinsky of Naugatuck, Connecticut (hereinafter "respondent") has applied for licensure to practice as a registered nurse by the Department of Public Health and Addiction Services (hereinafter "the Department") pursuant to Chapter 378 of the General Statutes of Connecticut, as amended; and,

WHEREAS, respondent admits and acknowledges that:

1. The Department has at no time issued respondent a license to practice the occupation of registered nurse under the General Statutes of Connecticut, Chapter 378.
2. In January 1989, due to abuse of cocaine, respondent was arrested in Florida for grand theft, was convicted and was incarcerated. There is no evidence that he has abused any substance since that time.
3. By the actions described in paragraph 2 above, respondent has committed acts which, if respondent had been licensed at the time, fail to conform to the accepted standards of practice for registered nurses; therefore, respondent is subject to denial of his application for licensure pursuant to §19a-14 of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to §19a-14 of the General Statutes of Connecticut, Todd Krasinsky hereby stipulates and agrees to the following:

1. That he waives the right to a hearing on the merits of this matter.
2. That upon satisfaction the requirements for licensure as a registered nurse as set forth in Chapter 378 of the General Statutes of Connecticut respondent's license to practice as a registered nurse will be issued forthwith.
3. That his license to practice as a registered nurse in the State of Connecticut shall immediately be placed on probation for two (2) years subject to the following terms and conditions:
 - A. He shall engage in therapy at his own expense with a licensed therapist or certified independent social worker approved by the Department (hereinafter "therapist").
 - (1) He shall provide a copy of this Prelicensure Consent Order to his therapist.
 - (2) His therapist shall furnish written confirmation to the Department of his or her engagement in that capacity and receipt of a copy of this Prelicensure Consent Order within fifteen (15) days of the effective date of this Prelicensure Consent Order.
 - (3) If respondent's therapist determines that therapy is no longer therapeutically necessary, that a reduction in frequency of therapy sessions is warranted, or that respondent should be transferred to another therapist, he or she shall advise the Department, and the Department shall pre-approve said termination of therapy, reduction in frequency of therapy sessions and/or respondent's transfer to another therapist.

However, if therapy is terminated with approval of the Department, respondent's therapist shall continue to monitor his controlled substance and alcohol free status by monitoring and reviewing the observed random urine screens for controlled substances and alcohol as described in paragraph 3B below, and by providing the reports described in paragraph 3C below.

- (4) The therapist shall immediately notify the Department in writing if respondent discontinues therapy and/or terminates his or her services.

B. Respondent shall not obtain for personal use and/or use alcohol, controlled substances or legend drugs that have not been prescribed for him for a legitimate therapeutic purpose by a licensed health care professional.

- (1) At his own expense, he shall submit to observed random urine screens for controlled substances and alcohol at a testing facility approved by the Department as ordered by his therapist. He shall also be responsible for providing laboratory reports reporting the results of such screens directly to his therapist. All such observed random screens and laboratory reports shall be legally defensible in that the specimen donor and chain of custody can be identified throughout the screening process.
- (2) He shall be responsible for notifying the laboratory, his therapist and the Department of any controlled substances he is taking.
- (3) There must be at least one such observed random screen and accompanying laboratory report once every two weeks for the first year of probation, and at least one such screen and report monthly for the second year of probation.

- (4) All screens shall be negative for controlled substances and alcohol.
- (5) All positive screen results shall be confirmed by gas chromatograph/mass spectrometer testing.
- (6) Respondent is hereby advised that the ingestion of poppy seeds has, from time to time, been raised as a defense to a positive screen result for morphine and/or opiates. For that reason, respondent agrees to refrain from ingesting poppy seeds in any food substances during the term of this Preliminary Consent Order. In the event respondent has a positive screen for morphine and/or opiates, respondent agrees that the ingestion of poppy seeds shall not constitute a defense to such a screen.

C. Respondent shall be responsible for the provision of written reports from his therapist directly to the Department monthly for the first year of his probationary period, every other month for the second year of probation. Such reports shall include documentation of dates of treatment, an evaluation of respondent's progress in treatment and of his controlled substance and alcohol free status as established by the observed random urine screens for controlled substances and alcohol described in paragraph 3B(1), an evaluation of his ability to safely and competently practice nursing, and copies of all laboratory reports.

D. Notwithstanding the foregoing, respondent's therapist shall immediately report to the Department any confirmed positive urine screen and any conduct or condition on respondent's part which does or may violate any federal or state statute or regulation applicable to his profession.

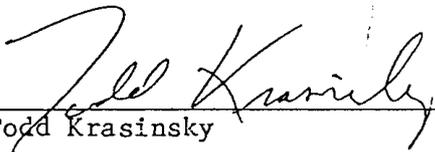
- E. Respondent shall provide a copy of this Prelicensure Consent Order to all current and future employers for the duration of his probation.
- F. Respondent shall not accept employment in any capacity for a personnel provider, visiting nurse agency or home health care agency for the period of his probation.
- G. Respondent shall not administer or count narcotics or other controlled substances, or have responsibility for such activities, in the course of his nursing practice for the first six (6) months of the probationary period.
- H. Respondent shall be responsible for the provision of written reports directly to the Department from his nursing supervisor (i.e., Director of Nursing) monthly for the first year of his probation, every other month for the second year of probation. Employer reports shall include documentation of respondent's ability to safely and competently practice nursing, and shall be issued to the Department at the address cited in paragraph 7 below.
- I. Respondent shall notify the Department in writing of any change of employment within fifteen (15) days of such change.
- J. Respondent shall notify the Department of any change in his home or business address within fifteen (15) days of such change.
- K. Monthly reports required in paragraphs 3C and 3H are due on the tenth business day of the month. The first reports required by the terms of this Prelicensure Consent Order are due on the tenth day of the first full month after the effective date of this Prelicensure Consent Order.

4. That in the event respondent is unemployed for periods of thirty (30) consecutive days or longer, or is employed less than twenty (20) hours per week, respondent shall so notify the Department in writing. Such period(s) shall not be counted in reducing the period covered by his Prelicensure Consent Order.
5. That respondent shall comply with all state and federal statutes and regulations applicable to his license.
6. That any deviation from the term(s) of this Prelicensure Consent Order without prior written approval of the Department shall constitute a violation. A violation of any term(s) of this Prelicensure Consent Order shall result in the right of the Department to immediately deem respondent's registered nurse license rescinded. Any extension of time or grace period for reporting granted by the Department shall not be a waiver or preclude the Department's right to take action at a later time. The Department shall not be required to grant future extensions of time or grace periods. Notice of the rescision of the license shall be sent by the Department to respondent's address of record. Respondent waives any right to a hearing on the issue of violation of the terms of this Prelicensure Consent Order.
7. That all correspondence and reports required by the terms of this Prelicensure Consent Order are to be addressed to:

Lynne Hurley, Investigator
Department of Public Health and Addiction Services
150 Washington Street
Hartford, Connecticut 06106

8. That legal notice shall be sufficient if sent to respondent's last known address of record reported to the Licensure and Registration Section of the Division of Medical Quality Assurance of the Department.
9. That he understands that this Prelicensure Consent Order may be considered as evidence of the above-admitted violations in any proceeding before the Connecticut Board of Examiners for Nursing in which his compliance with §20-99 of the General Statutes of Connecticut as amended, is at issue.
10. That this Prelicensure Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Further, this Prelicensure Consent Order is not subject to appeal or review under the provisions of Chapters 54 and 368a of the General Statutes of Connecticut provided that this stipulation shall not deprive him of any other rights that he may have under the laws of the State of Connecticut or of the United States.
11. That this Prelicensure Consent Order is a revocable offer of settlement which may be modified by mutual agreement or withdrawn by the Department at any time prior to its being executed by the last signatory.
12. That this Prelicensure Consent Order is effective when accepted and approved by a duly appointed agent of the Department.
13. That this Prelicensure Consent Order is a matter of public record.
14. That respondent has the right to consult with an attorney prior to signing this Prelicensure Consent Order.

I, Todd Krasinsky have read the above Prelicensure Consent Order, and I agree and admit to the terms and allegations set forth therein. I further declare the execution of this Prelicensure Consent Order to be my free act and deed.



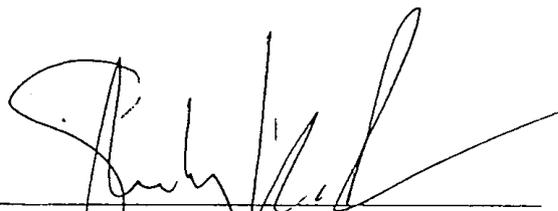
Todd Krasinsky

Subscribed and sworn to before me this 13th day of June 1994.



~~Notary Public or person authorized~~
by law to administer an oath of
affirmation COMMISSIONER OF
THE SUPERIOR COURT

The above Prelicensure Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health and Addiction Services on the 16th day of June 1994, it is hereby ordered and accepted.



Stanley K. Peck, Director
Division of Medical Quality Assurance



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

June 17, 1996

Mr. Todd Krasinsky
440 Maple Hill Road
Naugatuck, Connecticut 06770

Re: Prelicensure Consent Order
Petition No. 940225-10-020
License No. E56765
S.S.N. ~~XXXXXXXXXX~~
D.O.B. ~~XXXXXX~~

Dear Mr. Krasinsky:

Please accept this letter as notice that you have successfully completed the terms of the above-referenced Consent Order, effective June 16, 1996.

Notice will be sent to our License and Registration Section to remove any restrictions from your license related to this Consent Order.

Thank you for your cooperation during this process.

Very truly yours,

Bonnie Pinkerton

Bonnie Pinkerton
Nurse Consultant
Division of Medical Quality Assurance

cc: Debra Tomassone



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