

CERTIFIED MAIL - RETURN RECEIPT REQUESTED NO. _____

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

Rec'd
2-9-93
JB

In re: Carole Russo, R.N.

Petition No. 920116-10-005

CONSENT ORDER

WHEREAS, Carole Russo, R.N. of Rye Brook, New York, hereinafter the respondent, has been issued license number ⁴¹⁷⁴⁰ R41710 to practice as a registered nurse by the Department of Health Services pursuant to Chapter 378 of the General Statutes of Connecticut, as amended; and

WHEREAS, the Respondent hereby admits and acknowledges that:

1. It is alleged that in October 1991 she appropriated a prescription blank from the Greenwich Hospital emergency room.
2. It is further alleged that she forged the prescription blank for Tenuate Dospan, which she attempted to pass at a Stamford pharmacy.
3. On 26 October 1991 she was arrested by the Stamford Police; was charged with violations of §53a-139 of the General Statutes of Connecticut, forgery in the second degree, and §21a-108, illegally obtaining drugs; and was granted accelerated rehabilitation which terminates on 20 December 1993.
4. The conduct described above fails to conform to the accepted standard of the nursing profession in violation of §20-99(b) of the General Statutes of Connecticut.

NA
2/9/94
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NOW THEREFORE, pursuant to §19a-17 and §20-99(a) of the General Statutes of Connecticut, the Respondent hereby stipulates and agrees to the following:

1. She waives the right to a hearing on the merits of this matter.
2. Her license number R41710 to practice as a registered nurse in the State of Connecticut is on probation for eighteen (18) months.
3. Her probation is subject to the following conditions:
 - A.
 - 1.) She shall not obtain for personal use and/or use alcohol or any drug that has not been prescribed for her for a legitimate medical purpose by a licensed health care practitioner.
 - 2.) She shall provide a copy of this Consent Order to her therapist.
 - 3.) She shall engage in counseling with a licensed or certified therapist at her own expense.
 - 4.) She shall be responsible for the provision of bimonthly reports from her therapist during the period of her probation; said reports are due on the first business day of January, March, May, July, September and November. The 1st report is due March 1, 1993.
 - 5.) She shall be responsible for providing random urine and/or blood screens for drugs and alcohol at the discretion of her therapist. There must be at least one such drug and alcohol screen bimonthly during her probation. Said reports shall be negative for drugs and alcohol. Said screens shall be legally defensible in that the specimen donor and chain of custody can be identified throughout the screening. She shall be responsible for notifying the laboratory and her therapist of any drug(s) she is taking.

- B. 1.) She shall provide a copy of this Consent Order to her employer.
- 2.) She shall not accept employment as a nurse for a personnel provider, visiting nurse association or home health agency for the period of her probation.
- 3.) She shall be responsible for the provision of bi-monthly reports from her nursing supervisor (i.e. Director of Nursing) due on the first business day of January, March, May, July, September and November. The 1st report is due March, 1993.
- 4.) Said reports cited in 3.B.4 above shall include documentation of her ability to safely and competently practice nursing.
- C. 1.) She shall attend the meetings of a 12 step program such as Alcohol Anonymous, Narcotics Anonymous or Nurses for Nurses or other group for recovering professionals and such participation shall be documented in her therapist's reports.
- D. 1.) Said reports cited in Paragraphs 3.A.4. and 3.B.3. above shall include documentation of dates of treatment, her participation in a 12 Step program referenced in paragraph 3.C.1. above, an evaluation of her progress, and drug and alcohol free status, and copies of all laboratory reports.
4. The Connecticut Board of Examiners for Nursing must be informed prior to any change of employment.
5. The Connecticut Board of Examiners for Nursing must be informed prior to any change of address.

6. All correspondence and reports are to be addressed to:

Office of the Board of Examiners for Nursing
Department of Health Services
150 Washington Street
Hartford, CT 06106

7. Any deviation from the term(s) of probation without prior written approval by the Connecticut Board of Examiners for Nursing shall constitute a violation of probation. A violation of any term(s) of probation specified in paragraphs 3., 4. or 5. above shall result in the right of the Connecticut Board of Examiners for Nursing to immediately revoke or take other disciplinary action as cited in Connecticut General Statutes §19a-17-against her nursing license. Any extension of time or grace period for reporting granted by the Connecticut Board of Examiners for Nursing shall not constitute a waiver or preclude the Board's right to take action at a later time. The Connecticut Board of Examiners for Nursing shall not be required to grant future extensions of time or grace periods. Notice of revocation or other disciplinary action shall be sent to her address of record (most current address reported to the Licensure and Renewal Section of the Division of Medical Quality Assurance of the Department of Health Services or the Connecticut Board of Examiners for Nursing). Her license may be suspended from the date the notification of the alleged violation of probation is mailed until the decision of the Connecticut Board of Examiners for Nursing on the violation of probation is issued.
8. This Consent Order is effective the first day of the month immediately following the date said Consent Order is ordered and accepted by the Connecticut Board of Examiners for Nursing.

9. She understands this Consent Order is a matter of public record.
10. She understands this Consent Order may be considered as evidence of the above admitted violations in any proceeding before the Connecticut Board of Examiners for Nursing (1) in which her compliance with this same order is at issue, or (2) in which her compliance with §20-99(b) of the General Statutes of Connecticut, as amended, is at issue.
11. This 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, that said 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 her of any other rights that she may have under the laws of the State of Connecticut or of the United States.
12. She permits a representative of the Public Health Hearing Office of the Division of Medical Quality Assurance, Department of Health Services to present this Consent Order and the basis for said Consent Order to the Connecticut Board of Examiners for Nursing. She understands that the Connecticut Board of Examiners for Nursing has complete and final discretion as to whether an executed Consent Order is approved or granted.
13. She understands she has the right to consult with an attorney prior to signing this document.

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

Carole Russo
Carole Russo

Subscribed and sworn to before me this 8th day of January 1992.

Michael R. Corsetti
Notary Public or person authorized by law to administer an oath or affirmation
Michael R. Corsetti
Commissioner Superior Court

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Health Services on the 20th day of January 1992, it is hereby accepted.

Stanley K. Peck
Stanley K. Peck, Director
Division of Medical Quality Assurance

The above Consent Order having been presented to the duly appointed agent of the Connecticut Board of Examiners for Nursing on the 28 day of January 1992, it is hereby ordered and accepted.

BY: Janice Thibodeau
Connecticut Board of Examiners for Nursing