

CERTIFIED MAIL - RETURN RECEIPT REQUESTED NO. \_\_\_\_\_

Rec'd.  
6-19-90STATE OF CONNECTICUT  
DEPARTMENT OF HEALTH SERVICES  
BUREAU OF HEALTH SYSTEM REGULATION  
DIVISION OF MEDICAL QUALITY ASSURANCE

In re: Regina Bujnowski, L.P.N.

Petition No. 890810-11-016

CONSENT ORDER

WHEREAS, Regina Bujnowski of New Britain, Connecticut has been issued license number 021709 to practice as a licensed practical nurse by the Department of Health Services pursuant to Chapter 378 of the General Statutes of Connecticut, as amended; and

WHEREAS, Regina Bujnowski hereby admits and acknowledges that:

1. During February, 1989 while working as a licensed practical nurse at Farmington Convalescent Home in Farmington, Connecticut she diverted to herself the controlled substance Percocet, and substituted the drug Seldane for the controlled substance Percocet.
2. During December, 1989 while working as a licensed practical nurse at Ledgecrest Health Care Center in Kensington, Connecticut, she diverted to herself the controlled substance Vicodin and substituted the drug potassium chloride for the controlled substance Vicodin.
3. She is licensed as a nurse only in Connecticut and does not have licensure pending in any other state.
4. The conduct described in 1., and 2. above fails to conform to the accepted standards of the nursing profession in violation of §20-99(b) of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to §19a-17 and §20-99(a) of the General Statutes of Connecticut, Regina Bujnowski hereby stipulates and agrees to the following:

1. That she waives the right to a hearing on the merits of this matter.
2. That her license number 021709 to practice as a licensed practical nurse in the State of Connecticut shall be suspended for one (1) year.
3. That her license shall be placed on probation for three (3) years.

The first year of probation shall run concurrently with the suspension and the remaining two (2) years shall follow the suspension.

4. That her probation is subject to the following conditions:

- A. 1.) She shall engage in counseling with a licensed or certified therapist at her own expense.
- 2.) She shall provide a copy of this Consent Order to her therapist.
- 3.) She shall be responsible for the provision of bi-monthly reports from her therapist for the entire probationary period; said reports are due on the first business day after every second month.
- 4.) She shall be responsible for providing random urine and/or blood screens for drugs and alcohol at the discretion of her therapist. 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. There must be at least one such drug and alcohol screen bi-monthly during the probationary period. Said reports shall be negative for drugs and alcohol.

- 5.) Said reports cited in 4.A.3. and 4.A.4. above shall include documentation of dates of treatment, an evaluation of her progress and drug and alcohol free status, and copies of all laboratory reports. Said reports shall be issued to the Board at the address cited in paragraph 8. below.
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- B.
    - 1.) She shall provide a copy of this Consent Order to any nursing employer when she becomes eligible for such employment. Pursuant to the terms of this Consent Order she shall become eligible for employment in nursing during the second and third years of her probationary period.
    - 2.) She shall not accept employment as a nurse for a personnel provider 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 after every second month while she is employed as a nurse during her probationary period.
    - 4.) Said reports cited in 4.B.3 above shall include documentation of her ability to safely and competently practice nursing. Said reports shall be issued to the Board at the address cited in paragraph 8. below.

5. That she shall not obtain for personal use and/or use alcohol or any drug that has not been prescribed for her for a legitimate purpose by a licensed health care practitioner.
6. That the Connecticut Board of Examiners for Nursing must be informed prior to any change of employment.
7. That the Connecticut Board of Examiners for Nursing must be informed prior to any change of address.
8. That 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

9. That 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 4., 5., or 6. or 7. 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 be 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). That her license shall 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.

10. That 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.
11. That she understands this Consent Order is a matter of public record.
12. That 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.
13. That 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 rights that she may have under the laws of the State of Connecticut or of the United States.
14. That 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.

15. That she understands she has the right to consult with an attorney prior to signing this document.

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I, Regina Bujnowski, 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.

Regina T. Bujnowski  
Regina Bujnowski

Subscribed and sworn to before me this 18<sup>TH</sup> day of MAY 1990.

Richard P.  
Notary Public or person authorized  
by law to administer an oath or  
affirmation

My Commission Expires Mar. 31, 1995

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Health Services on the 31<sup>ST</sup> day of May 1990, it is hereby accepted.

Stanley R. Peck  
Stanley R. 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 12<sup>TH</sup> day of June 1990, it is hereby ordered and accepted.

BY: Bette Jane M. Murphy, R.N.  
Bette Jane M. Murphy, R.N., Chairperson  
Connecticut Board of Examiners for Nursing