

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF HEALTH
HEALTH REGULATION AND LICENSING ADMINISTRATION
BOARD OF NURSING**

IN RE: :
 :
STEPHANIE MURPHY :
 :
License No. RN1036526 :
 :
Respondent :

DECISION AND ORDER

Jurisdiction

This matter comes before the District of Columbia Board of Nursing (Board) pursuant to D.C. Official Code § 3-1201.01 *et seq.* (2016 Repl.), otherwise known as the Health Occupations Revision Act (HORA). Section 204(b)(1) of the HORA authorizes the Board to regulate the practice of registered nursing. D.C. Official Code § 3-1202.04(b)(1). Pursuant to section 408(8), the Board is authorized to conduct hearings necessary to carry out its function. D.C. Official Code § 3-1204.08(8).

Background

On or about January 8, 2019, Providence Hospital submitted a complaint to the Board reporting a suspected controlled substance diversion. The hospital conducted an internal investigation following noted discrepancies in the controlled substance tracking system, Pyxis, during a routine pharmaceutical audit. The investigation identified discrepancies existed in 17 patient accounts, with a total of 32 drug removals. The investigation concluded that Respondent was the registered nurse who withdrew medication in these cases. It noted that Respondent

withdrew medication either for patients she was not assigned to or associated with, without physician's order, after patients were discharged and left the hospital, or for fictitious patients.

The Board requested that the Department of Health (DC Health) conduct an investigation to corroborate the complaint. Based on DC Health's investigation, DC Health issued a summary suspension on Respondent's license on January 2, 2020. The Board issued its own Notice of Intent to Take Disciplinary Action (NOI) against her license on January 17, 2020. The notice was served on the Respondent in person on the same date. The notice charged the Respondent as follows:

- I You are addicted to, or habitually use, a narcotic or controlled substance as defined by Unit A of Chapter 9 or Title 48 (the Uniform Controlled Substance Act), in violation of D.C. Code § 3-1205.14(a)(6), for which the Board may take disciplinary action under D.C. Code § 3-1205.14(c).**
- II You provided, or attempted to provide, professional services while using a narcotic or controlled substance as defined the Uniform Controlled Substance Act, or in excess of therapeutic amounts or without a valid medication indication, in violation of D.C. Code § 3-1205.14(a)(7), for which the Board may take disciplinary action under D.C. Code § 3-1205.14(c).**
- III You dispensed or administered drugs when not authorized to do so, in violation of D.C. Code § 3-1205.14(a)(19), for which the Board may take disciplinary action under D.C. Code § 3-1205.14(c).**

The Board held a hearing on this matter on November 3, 2021. Due to the COVID-19 public health emergency, the hearing was conducted virtually. The Respondent was not present at the hearing, which began more than fifteen (15) minutes after the scheduled time to allow any delay on the part of Respondent. She did not appear throughout the time period during which the government presented its case. The government was represented by Janika Jordan and Shani Brown, Assistant General Attorneys. Five (5) of the current six (6) members of the Board attended the meeting and constituted a quorum.

Evidence

The government submitted a number of exhibits and presented testimony from three (3) witnesses. The Board entered the following documents into evidence:

- 1) Government Exhibit 1A: Attachment to March 28, 2019 email: Lawrence Holland; Exhibits from Providence Hospital;
- 2) Government Exhibit 5A: Attachment to April 18, 2019 email: February 2019 CII-CV Pyxis Activity for Stephanie Murphy;
- 3) Government Exhibit 6: MP3 file of Mark Donatelli Interview with Stephanie Murphy;
- 4) Government Exhibit 7: Demonstrative Charts prepared by Mark Donatelli;
- 5) Government Exhibit 8: Investigative Report and Supporting Documents by Mark Donatelli;
- 6) Government Exhibit 14: Email from Concheeta Wright to Stephanie Murphy “RE: Committee on Impaired Nurses”;
- 7) Government Exhibit 15: Email from Stephanie Murphy to Concheeta Wright, “Re: COIN Meeting”;
- 8) Government Exhibit 16: Email from Stephanie Murphy to Concheeta Wright, “Re: Attached image”.

The following witnesses provided testimony to support the government’s case:

- 1) Lawrence Holland, former investigator for DC Health.
- 2) Mark Donatelli, DC Health investigator.
- 3) Kate Malliarakis, PhD, ANP-BC, MAC, FAAN, Chairperson, District of Columbia Committee on Impaired Nurses (COIN).

Findings of Fact

Based on the evidence in its record, the Board enters the following findings of fact:

1. At all times relevant Respondent was licensed as a Registered Nurse (RN) in the District.
2. Respondent was employed as an Emergency Room (ER) RN by Providence Hospital in Washington, DC from September 10, 2018 until January 28, 2019.
3. Providence Hospital became alert to discrepancies in the controlled substance log as related to the Respondent's access. The hospital conducted a review of its record and determined that during the period of eleven days between December 15, 2018 and December 26, 2018, Respondent removed 16 narcotics ostensibly for patients but there had been no physician's prescription or order to do so. Also during the same period, Respondent recorded removing narcotics on behalf of patients 11 times after the patients had been discharged.
4. Respondent resigned from Providence Hospital on January 28, 2019.
5. Respondent was employed as Emergency Department nurse at United Medical Center (UMC) from July 9, 2018 until March 15, 2019.
6. On February 26, 2019 a routine medication audit performed by UMC Director of Pharmacy revealed unauthorized removal of controlled substances by Respondent either for fictitious patients or patients already discharged, or without physician's order.
7. UMC terminated Respondent from her employment on March 15, 2019.

8. Respondent admitted to DC Health investigator during an investigative interview that she became addicted to Oxycodone and Tramadol due to past health conditions. She also admitted to diverting narcotics from the hospitals for her own use.
9. Based on reports filed by both hospitals, Respondent was recommended to attend the Committee on Impaired Nurses (COIN). In June 2019, COIN contacted Respondent to appear at its meeting on July 19, 2019. Although she was responsive to e-mail communication leading up to July 19, 2019, Respondent failed to appear. Accordingly, COIN issued an order expelling Respondent from the program on September 17, 2019.
10. In January 2020, COIN contacted Respondent to invite her to its meeting on January 17, 2020. At the meeting, Respondent was instructed to complete an application to enroll in COIN and register with a monitoring agency. Respondent failed to do so.

Analysis and Conclusions of Law

The evidence clearly established that Respondent became addicted to controlled substances and used her position and access to illegally obtain the narcotics to assuage her addiction. She was then given multiple opportunities to enter into a rehabilitation and monitoring program to support her recovery and return to a safe practice of nursing. However, Respondent failed to cooperate. Accordingly, it is hereby concluded that Respondent is liable for disciplinary action as pursuant to Charges I, II, and III of the NOI.

The Board's mandate is to protect the public. *Davidson v. District of Columbia Bd. of Medicine*, 562 A.2d 109, 112 (D.C.1989), *quoting* Report of the D.C. Council on Consumer and Regulatory Affairs on Bill 6-317, at 7 (November 26, 1985). It would be a violation of that

mandate if the Board were to allow a nurse who is likely to divert controlled substances to have access to them.

D.C. Official Code § 3-1205.14(c) provides, in pertinent part:

Upon determination by the board that an applicant, licensee, or person permitted by this subchapter to practice in the District has committed any of the acts described in subsection (a) of this section, the board may:

- (1) Deny a license to any applicant;
- (2) Revoke or suspend the license of any licensee;
- (3) Revoke or suspend the privilege to practice in the District of any person permitted by this subchapter to practice in the District;
- (4) Reprimand any licensee or person permitted by this subchapter to practice in the District;
- (5) Impose a civil fine not to exceed \$5,000 for each violation by any applicant, licensee, or person permitted by this subchapter to practice in the District;
- (6) Require a course of remediation, approved by the board, which may include:
 - (A) Therapy or treatment;
 - (B) Retraining; and
 - (C) Reexamination, in the discretion of and in the manner prescribed by the board, after the completion of the course of remediation;
- (7) Require a period of probation; or
- (8) Issue a cease and desist order pursuant to § 3-1205.16.

Accordingly, the Board, by a unanimous vote, issues the order below.

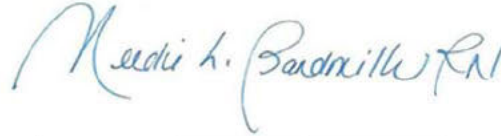
ORDER

Based upon the aforementioned it is hereby

ORDERED that **STEPHANIE MIURPHY** registered nursing license, **RN1036526**, be and is hereby **REVOKED**,¹ effective as of the date of service.

January 14, 2022

Date



Meedie Bardonille, RN
Acting Chairperson
Board of Nursing

**Judicial and Administrative Review
of Actions of Board**

Pursuant to D.C. Official Code § 3-1205.20 (2016 Repl.):

Any person aggrieved by a final decision of a board or the Mayor may appeal the decision to the **District of Columbia Court of Appeals** pursuant to D.C. Official Code § 2-510 (2012 Repl.).

Pursuant to D.C. Court of Appeals Rule 15(a):

Review of orders and decision of an agency shall be obtained by filing with the clerk of this court a petition for review within thirty (30) days after the notice is given.

This Order is the Final Order of the Board in this disciplinary matter and a public record and, as mandated by federal law, 42 USC § 11101 and 45 CFR § 60, “the National Practitioner Data Bank – Health Integrity and Protection Data Bank,” this disciplinary action shall be reported to the U.S. Department of Health and Human Services.

Copies to:

Stephanie Murphy, RN



¹ Pursuant to D.C. Official Code § 3-1201.01(12A), “revocation” means termination of the right to practice a health profession and loss of licensure for five (5) years or more.

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