Kim Glazier, Executive Director
Oklahoma Board of Nursing
2915 N. Classen Blvd., Ste. 524
Oklahoma City, Oklahoma 73106

Dear Executive Director Glazier:

This office has received your request for a written Attorney General Opinion regarding agency action to be taken by the Oklahoma Board of Nursing under an agreed order in Board case 6.021.17. The licensee's registered nurse license is currently suspended. In 2013, the licensee voluntarily entered the Board's peer-assisted drug monitoring program after admitting to substance abuse and addiction to Xanax, Lortab, Ambien, and Klonopin. Shortly before entering the program, a supervisor terminated the licensee from the hospital surgical unit after displaying impaired behavior while on duty, including slurred speech, staggering gait, drowsiness, pinpoint pupils and bloodshot eyes. The licensee has participated in the peer-based substance abuse monitoring program until this recent default. The proposed action is to continue the suspension of the license and again refer the licensee to the Board’s substance abuse monitoring program. Application for reinstatement of the license can be submitted within sixty days of acceptance into the program. If the licensee defaults from the program again, the agreed order directs the Board to revoke the license for five years and impose a $1,500 fine.

The Oklahoma Nursing Practice Act, 59 O.S.2011 & Supp.2016, §§ 567.1–567.20, authorizes agreed disciplinary orders to impose substance abuse monitoring, see 59 O.S.Suppp.2016, § 567.4(F)(3)(b). The Act authorizes discipline when nurses are “intemperate in the use of alcohol or drugs” in a way that “could endanger patients,” when they engage in “unprofessional conduct as defined in the rules of the Board,” when they violate orders of the Board, or when they default from peer-based substance abuse monitoring. Id. § 567.8(B)(4), (7), (8), (11). The Board's rules classify "conduct detrimental to the public interest" as unprofessional conduct. OAC 485:10-11-1(b)(3)(H). Conduct which jeopardizes a patient's life, health or safety includes the "failure to utilize appropriate judgment in administering safe nursing practice." OAC 485:10-11-1(b)(4)(D). This action seeks to ensure that a licensee seeks treatment for substance abuse problems while achieving the public health goal of protecting patients from compromised nursing care. Because of the licensee's admitted drug abuse and default from the monitoring program, it is reasonable for the Board to require additional substance abuse monitoring upon reinstatement, with significant consequences upon further default.
It is, therefore, the official opinion of the Attorney General that the Oklahoma Board of Nursing has adequate support for the conclusion this action advances the State of Oklahoma's policy that nurses adhere to minimum standards of care and professionalism.

E. SCOTT PRUITT
ATTORNEY GENERAL OF OKLAHOMA