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BOARD OF PHARMACY

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STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF PHARMACY

IN THE MATTER OF THE SUSPENSION :
OR REVOCATION OF THE LICENSE OF : Administrative Action
:
JILL DEZENHALL, R.P. :
:
TO PRACTICE PHARMACY IN THE : CONSENT ORDER
STATE OF NEW JERSEY :
RI15868 :

CONFIDENTIAL - NOT TO BE DISCLOSED AS A TRADE SECRET OR FINANCIAL INFORMATION

This matter was opened to the New Jersey State Board of Pharmacy upon the receipt of information that respondent had diverted 1,000 Hycodan tablets, a Schedule III Controlled Dangerous Substance, from CVS Pharmacy where she had been employed. On May 23, 1995 respondent voluntarily surrendered her license to practice pharmacy.

Respondent appeared before the Board of Pharmacy on November 13, 1996 and testified as to her past chemical dependence and her present course of rehabilitation. In response to questioning by the Board and the Deputy Attorney General, respondent, in her sworn testimony, admitted to having been chemically dependent on Hycodan from January of 1992 through May of 1995. Respondent is

successfully participating in a rehabilitation program in Pennsylvania and has continued to work as a pharmacist in Pennsylvania with that state's knowledge of her impairment.

It appearing that respondent admits to improperly diverting and consuming controlled dangerous substances obtained from her employer's drug stock, and respondent having satisfied the Board that she intends to continue treatment, and it further appearing that the parties wish to resolve this matter without the necessity of further formal proceedings, and for good cause shown,

IT IS THEREFORE, ON THIS *W* DAY OF *January*, 199*8*

ORDERED THAT:

1. The license of Jill Dezenhall, R.P. to practice pharmacy in the State of New Jersey is hereby reinstated. Respondent shall immediately be placed on probation until May 12, 1998 or after 18 consecutive months of employment as a pharmacist in the State of New Jersey, which ever date is later, subject to compliance with paragraphs 2 through 12 herein.

2. Respondent shall provide written notice to the Board prior to commencing work as a pharmacist in the State of New Jersey. Thereafter, respondent shall comply with paragraphs 3 through 12 herein for the following eighteen months of continuous practice of pharmacy in this State. If respondent violates any of the provisions of paragraphs 3 through 12 herein, the Board may initiate proceedings to revoke her probationary status and to actively suspend or revoke her license to practice pharmacy.

3. Respondent shall give written notice to the Board prior to beginning any job and prior to any change in employment.

4. In connection with any job in which respondent has access to Controlled Dangerous Substances, she shall disclose her prior drug problem to her employer and serve a copy of the within Order on her employer. Respondent shall cause the Board to receive a letter acknowledging the employer's receipt of the notice required by this paragraph.

5. Respondent shall have her urine monitored at her own expense on a random, unannounced basis for the entire 18 month period. Testing shall be performed one time per week. The urine specimens shall be performed with direct witnessing by a Board approved monitor. The initial drug screen will utilize the EMIT technique and all conforming tests and/or secondary tests will be performed by gas chromatography/mass spectrometry (GC/MS). The testing procedure shall include a forensic chain of custody protocol to ensure sample integrity and to provide documentation thereof.

6. The result of all tests shall be reported directly from the laboratory to H. Lee Gladstein, Executive Director of the Board or his successor, or his designee in the event he is unavailable. The Board may at anytime alter or modify the manner of the testing directed herein. In the event of any such alteration or modification the Board shall give timely notice of any new testing requirement to the respondent.

7. In the event respondent, is unable to appear for a scheduled urine test due to illness or other impossibility, consent to waive that day's test must be secured from the Board office. The lab or monitor will not be authorized to provide consent. In addition, respondent must provide the Board with any written substantiation which may be obtained for her inability to appear, eg. physician's report.

8. Any failure to appear for a urine test for which consent is not secured from the Board and for which no written substantiation is furnished satisfactory to the Board within two (2) days of such failure to appear, shall be grounds for proceeding to revoke her probationary status and suspend her license upon short notice.

9. Respondent shall continue to comply with the terms of her contract with the Pennsylvania Committee for Impaired Pharmacists for the duration of the probationary period.

10. Respondent hereby consents to the entry of an Order of Automatic Suspension of her license without notice upon the Board's receipt of any reliable information such as, but not limited to, a report of a confirmed positive urine from the party responsible for monitoring respondent's urine, or information from any out-patient program or counselor which reveals evidence of substance abuse during the probationary period.

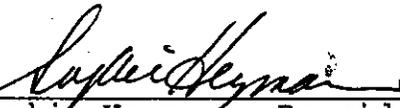
11. Respondent shall have the right to apply for removal of the automatic suspension on two (2) days notice, but in such event shall be limited to a showing that urine tested was not his or was

a false positive, in the case of urine testing, or that other information submitted was false.

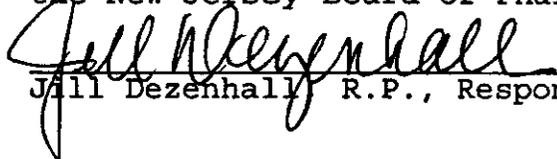
11. Respondent shall not be a pharmacist-in-charge or a permit holder of any pharmacy in this State during the entire period of probation.

12. Respondent shall not use or possess any controlled dangerous substances, except for bona fide medical purposes as deemed necessary by a physician or other authorized prescriber during the entire period of probation. In such event, respondent is to serve notice to the Board in writing. Respondent shall advise any and all treating physicians of her history of drug abuse.

STATE BOARD OF PHARMACY

By: 
Sophie Heymann, President

I have read the within Order and understand it. I agree to be bound by its terms and hereby consent to it being entered by the New Jersey Board of Pharmacy.


Jill Dezenhall R.P., Respondent