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ATTORNEY GENERAL OF NEW JERSEY
Division of Law - 5th Floor
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CERTIFIED TRUE COPY

FILED

MAY 19 2000

BOARD OF PHARMACY

By: Marianne W. Greenwald
Deputy Attorney General
(973) 648-4738

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

IN THE MATTER OF THE SUSPENSION	:	Administrative Action
OR REVOCATION OF THE LICENSE OF:	:	
	:	
CORRINE MORAN, R.P.	:	
	:	
TO PRACTICE PHARMACY IN THE	:	FINAL ORDER
STATE OF NEW JERSEY	:	OF DISCIPLINE
	:	
	:	
	:	

RI 17 948

This matter was opened to the New Jersey State Board of Pharmacy upon receipt of information which the Board has reviewed and on which the following findings of fact and conclusions of law are made;

FINDINGS OF FACT

1. Respondent is a pharmacist in the State of New Jersey and has been a licensee at all times relevant hereto.

2. On January 6, 1999 respondent tested positive at her workplace, the Kennedy Health System, for alcohol and on June 1, 1999, for phenobarbital, a Controlled Dangerous Substance (Test results annexed hereto and made a part hereof).

3. At the request of the Board, respondent voluntarily agreed to obtain an in-depth psychological evaluation. That evaluation determined that respondent presents a danger to the public if she continues to practice as a registered pharmacist (report annexed hereto and made a part hereof).

4. A Provisional Order in this matter was filed and served on respondent on March 24, 2000. Respondent failed to respond.

CONCLUSIONS OF LAW

1. The above disciplinary report and test results provide grounds for the suspension of her license to practice pharmacy in New Jersey pursuant to N.J.S.A. 45:1-22(i) and 22 (1); in that respondent is incapable of discharging the functions of a licensee in a manner consistent with the public health, safety, and welfare, and moreover is presently engaged in drug or alcohol use that is likely to impair her ability to practice pharmacy with reasonable skill and safety.

ACCORDINGLY, IT IS ON 5th DAY OF MAY 5th, 2000

ORDERED THAT:

1. Respondent's license to practice pharmacy in the State of New Jersey be and hereby is suspended until further Order of the Board.

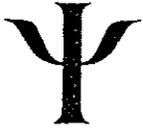
2. Prior to resuming active practice in New Jersey, respondent shall be required to appear before the Board (or a committee thereof) to demonstrate fitness to resume practice. Any practice in this State prior to formal reinstatement of license by the Board shall constitute grounds for a charge of unlicensed practice. In

addition, the Board reserves the right to place restrictions on respondent's practice should her license be reinstated.

NEW JERSEY STATE BOARD OF PHARMACY

By: Richard A Palombo RPh
RICHARD A. PALOMBO, R.P.
Board President

4E



FRANK J. DYER, PH.D.
DIPLOMATE IN SCHOOL PSYCHOLOGY
AMERICAN BOARD OF PROFESSIONAL PSYCHOLOGY
NEW JERSEY LICENSE #1390
70 PARK STREET
MONTCLAIR, NEW JERSEY 07042
TELEPHONE: (973) 783-3051

Psychological Evaluation

Name: Corinne Moran
Date of Birth: 7/14/61
Age: 38 years
Date of Examination: 10/11/99
Date of Report: 11/12/99
Tests Administered: Bender Visual Motor Gestalt Test; Millon Clinical Multiaxial Inventory-III; Gordon Personal Profile-Inventory; House-Tree-Person.

Background

This client was referred by the New Jersey Board of Pharmacy for a psychological examination in connection with her professional license. Prior to the examination of the client, a number of materials provided by Deputy Attorney General Marianne Greenwald were examined. These include: voluminous records from Kennedy Memorial Hospitals documenting instances in which Ms. Moran was observed to be under the influence of alcohol while at work and documenting the corporation's response to these incidents; transcript of Ms. Moran's testimony at the Board of Pharmacy's investigative inquiry held on 7/28/99.

The specific referral questions addressed in this report include assessment of Ms. Moran's current personality functioning, whether she suffers from an alcohol or drug abuse problem, and whether she suffers from any psychological disorder that would cause her to present danger to the public if she were allowed to continue to practice as a registered pharmacist.

Behavior and Observations

Ms. Moran presented as an engaging and friendly individual who appeared for the session well groomed and appropriately dressed. She was cooperative as a test and interview subject and was quite communicative during the interview. No behavioral indications of mood disorder, thought disorder, or grossly disturbed reality contact were observed during the session. The subject's affect was lively and she cried at one point during the session when she admitted to having driven her two year old daughter around while legally intoxicated. She was mildly anxious during the session, but not incapacitated by this. She displayed considerable denial and minimization in regard to her alcohol problem. Her mental ability was estimated as bright normal on the basis of interview impressions.

In response to questions concerning her personal background, the subject related that she possesses a degree in pharmacy from Rutgers and that she did rotations in hospital, industrial, and retail settings as part of this program. The subject stated that she held positions in retail establishments before going to work at Kennedy Hospital, where she was employed for eight years.

The subject related that she was raised in a two-parent home. She has a sister who is younger by a year and a brother who is younger by six years. Ms. Moran reported that her father, who is a retired painter, was an alcoholic. She stated that her mother stayed at home with the children while she was growing up. Ms. Moran denied any physical or sexual abuse during her childhood and stated that there were no physical punishments used at home. She described her childhood as reasonably happy.

Ms. Moran related that she had psychotherapy before she was married. She stated that she was under a great deal of stress because of the responsibilities and conflicts involved in planning a large wedding. She stated that she stopped eating for days on end and that her weight declined to 85 pounds. She also reported that she was "hyper" during that period. She stated that she consulted a psychiatrist who wanted to place her on imipramine. She described his manner as "very cold" and stated that she felt that he did not have an interest in listening to her. She stated that she and her husband ultimately eloped. She stated that her next experience with therapy occurred when the hospital's employee assistance plan sent her to an "alcohol rehab doctor", Edward Silver, Ph.D. She stated that she had four or five weekly sessions of therapy with him and that her primary care physician told her to stop drinking and to attend AA meetings. She related that Dr. Silver told her that she did not need any more treatment, but that he did warn her about adverse consequences from alcohol including DWI arrests and losing her marriage and children. Ms. Moran denied that Dr. Silver recommended that she participate in AA. She commented "Basically I would go there and say 'Look at all these people. They're horrible.'" She stated that Dr. Silver told her that they all started out just the way she is now. She stated that Dr. Silver told her that she should not drink on a daily basis, but that "He felt that I could drink occasionally as long as I didn't use drinking as something to fall onto."

In response to questions about drinking, Ms. Moran denied experiencing tremors, feeling the need to sneak drinks, or drinking in the morning. She related that her primary care physician told her that she was an alcoholic, but that "I just didn't listen to him." She related that she began to drink alcohol when she was in the eighth grade and that this activity consisted of drinking beer with an older group at a swim club. She described herself as a "goodie two-shoes" in high school. She reported that she attended keg parties when she was in college, but did not drink during the school week. She denied ever having drunk to the point of passing out. She denied ever having had to go to an emergency room because of alcohol. Ms. Moran denied having had any sort of problem with alcohol while in college. She related that she and her husband developed an interest in fine wines and that they joined a wine-of-the-month club. She stated that they would order cases of wine through the club and that there was always a good deal of wine in the house. She stated that she and her husband eventually canceled their membership in that club. She reported that she did not drink daily, but had wine on weekends. She did admit to developing a problem with alcohol at age 27 or 28 years. When asked about her level of alcohol consumption during her period of heaviest drinking, Ms. Moran replied that it was somewhat greater than one bottle of wine per day. She stated that when she had the drinking problem she would consume that quantity nearly every day. She stated that she made it a point to make sure that she had a bottle of wine available for consumption during the evening when she knew that she was going to have a stressful day at work. She stated that the liquor stores closed at 10:00 p.m. and that she did not get off work until 11:00 p.m. and therefore had to purchase her bottles of wine on her way to work. Ms. Moran denied any use of hard liquor, stating that she dislikes the smell of gin and scotch. She stated

that she and her husband no longer keep wine in the house, but that if they want to have wine with dinner they will buy a single bottle. She did not give any indication that she had been considering giving up drinking alcohol completely or that she perceived any risk in continuing to drink alcohol occasionally.

Ms. Moran related that she had been sent to Dr. Silver after an incident in which she registered a positive alcohol test after coworkers complained that she had alcohol on her breath. She stated that she had drunk wine before going to bed the night before and had not had anything else to drink before driving to work that morning. She stated that on the way to work she dropped her daughter off at her day care center. She commented "I'm thinking to myself so I drove to work at eight o'clock drunk. I drove my daughter to day care that morning. It really upset me because I wasn't doing it on purpose. Ms. Moran reported that she would cry the night before she had to go in to work, anticipating that she would be exposed to stress on the job and afraid that she would not be able to do the work. She stated that usually her husband was already in bed and that he did not know how much she was drinking.

Ms. Moran was questioned about another incident in which she had a positive drug test at work. She stated that ten years previously she had been prescribed Fioricet for headaches and that she took this ten year old prescription out of her medicine cabinet and self-administered it for the stress headaches from planning her wedding. She denied any use of Klonopin, but admitted to self-medicating with Prozac. She stated "When I was depressed and stressed I read about this new wave of people who were doing that." When asked where she had obtained the Prozac, Ms. Moran replied "I took it from the hospital and tried out myself." She then commented "Actually all this is making me mad cause this is bringing up things from the past that aren't even part of my life." When asked about the medication Nyquil, Ms. Moran replied "Yeah I had a cold probably and I took Nyquil." She stated that this was when her supervisor told her that she smelled like alcohol and the test came back negative. She was also questioned about her use of the medication Donnatal. She denied taking this medication for anything other than a stomach ache. She denied taking it to experience intoxicating effects. She commented that it is impossible to get high from Donnatal because "you would have to take fifty of them". She stated that her taking the Donnatal from the hospital pharmacy was not unusual because all pharmacists divert drugs. She denied knowing that the Donnatal had phenobarbital in it, adding "I just knew it was for an upset stomach." She rationalized this by stating that until five or six years ago it was possible to obtain the phenobarbital version of this medication without a prescription. She also admitted to taking Imodium and Motrin from the hospital pharmacy. When asked for her thoughts about diverting those medications, she responded "Every pharmacist I ever worked with. I've seen people do way, way worse than that." She further rationalized these drug diversions, stating "In this hospital it was, like, if it's not controlled, it's fine. They literally cost like pennies." She stated that she has seen pharmacists steal vaccines that are worth hundreds of dollars and have their nurse wives administer the injections to their children.

Ms. Moran continued "In my mind I had this divider. If it's controlled you never even dream of taking it but if it's not controlled it's fine." When asked about her behavior while employed in retail, she replied that if a pharmacist took even a single Motrin that was considered stealing. She further stated "But in the hospital they count every pill every week to try to account for the shortages."

Ms. Moran reported that she currently stays at home with her children and does not intend to practice in the near future. She reported that she wants to retain her pharmacy license in case she wants to return to work.

The overall behavioral impression was that of an individual with an alcohol problem who still apparently drinks on occasion and is entrenched in a position of denial.

Test Results

The subject produced a Bender Gestalt Test record indicating a mild visual-motor integration problem and normal short term visual recall. Total copy phase testing time was within normal limits.

The Millon Clinical Multiaxial Inventory-III, a clinical self-report personality measure, indicates that the subject responded to the test questions in a defensive manner. The protocol contains an elevation on the Narcissistic Scale, indicating that Ms. Moran has a tendency to feel a sense of special entitlement and regard herself as being above rules and regulations. This is consistent with her self-reported diversion of non-scheduled medications.

The Gordon Personal Profile-Inventry, a self-report measure of eight aspects of normal personality functioning, indicates that the subject is an unassertive, somewhat socially isolated individual who functions best in situations with maximal structure. The subject's primary interpersonal adaptation strategy appears to be determining what others want and expect of her and trying to comply. She is vulnerable to stress and anxiety in circumstances where she perceives herself as being subjected to excessive demands with which it is not possible for her to comply despite what she considers her best efforts.

The projective drawings and related associations suggest an immature, emotionally needy individual. There is no indication in this record of grossly disturbed reality testing, mood disorder, or thought disorder.

Summary and Conclusions

This 38 year old woman displays a mild visual-motor integration problem and normal short term visual recall. Her current intellectual functioning is estimated as bright normal on the basis of interview impressions.

The results of objective and projective personality testing, in conjunction with behavioral observation and case history data, indicate that Ms. Moran does not suffer from severe psychopathology including thought disorder, mood disorder, or grossly disturbed reality testing. She tends to be anxious, immature, and emotionally needy. Her primary problem is seen as Alcohol Dependence, about which she is in denial. The subject's pattern of drinking, as she related it, coupled with instances in which she was observed to be under the influence of alcohol or smelling of alcohol at work, and pre-occupation with obtaining alcohol, as well as her admission that she drove her daughter to day care at 8:00 a.m. while intoxicated, very clearly indicate Alcohol Dependence. It is of particular concern that Ms. Moran continues to drink alcohol and that she does not display any awareness of the risks involved in her continuing to drink.

A related problem, possibly of equal severity, is the subject's diversion of drugs including Prozac and Donnatal and her self-medication with these agents. As with her drinking alcohol, the subject rationalizes this behavior. These rationalizations include "everybody does it", "some pharmacists do far worse things" and "they are worth only a few pennies". Ms. Moran did not display any indication that diverting these drugs from the hospital pharmacy might be considered wrong, except to state that in the retail sector it is considered stealing.

The overall impression is that of an individual who attempts to please others by finding out what is expected of her and trying to comply. When Ms. Moran encounters situations in which her best efforts do not prove equal to the responsibilities that she perceives, she regresses under the impact of that stress, becoming anxious and worried. At one point she responded to such a situation with an eating disorder. She attempts to self-medicate under these circumstances, with alcohol as her primary antianxiety agent, although she has self-medicated with Prozac and phenobarbital as well. She has very little insight into this pattern and denies that she has any current problem with alcohol. She is apt to respond to confrontations about her substance abuse problem with passive-aggressive and angry behavior, some of which was observed during the present session.

Based on the above observations, it is felt, to a reasonable degree of psychological certainty, that Ms. Moran is likely to present a danger to the public if she is allowed to resume practice as a registered pharmacist. She is vulnerable to a relapse into heavy drinking or abuse of prescription medications, which would result in impairments that would place patients at risk.

Recommendations

- 1) Ms. Moran's professional license should be suspended.
- 2) Ms. Moran should undergo outpatient alcoholism treatment in a structured program that entails more than a few sessions.
- 3) Ms. Moran should be required to attend AA meetings with proof of attendance.
- 4) Ms. Moran should complete a course in professional ethics that includes coverage of drug diversion issues.
- 5) Individual psychotherapy at a minimum frequency of once per week for at least six months to address anxiety management, personal maturity, and judgment.



Frank J. Dyer, Ph.D.
Diplomate in School Psychology
American Board of Professional Psychology

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Attorney for State Board of Pharmacy

FILED

MAY 19 2000

BOARD OF PHARMACY

By: Marianne W. Greenwald
Deputy Attorney General
(973) 648-4738

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

IN THE MATTER OF THE SUSPENSION : Administrative Action
OR REVOCATION OF THE LICENSE OF: :
 :
JOSEPH DEMARINIS, R.P. :
 :
TO PRACTICE PHARMACY IN THE : FINAL ORDER
STATE OF NEW JERSEY : OF DISCIPLINE
 :
RI 13302 :
 :

This matter was opened to the New Jersey State Board of Pharmacy upon receipt of information which the Board has reviewed and on which the following findings of fact and conclusions of law are made;

FINDINGS OF FACT

1. Respondent is a pharmacist in the State of New Jersey and has been a licensee at all times relevant hereto.

2. On January 19, 2000 respondent was convicted of the crime of Conspiracy to Defraud the United States in Federal District Court of New Jersey. Specifically: respondent pleaded guilty to conspiring to defraud customers by buying and selling stolen drug samples. (A copy of the Judgment of Conviction, the Minutes of the

Proceedings and the Indictment are annexed hereto and made a part hereof).

3. The following sentence was ordered: Probation for a term of 3 years including, 30 days home confinement, 600 hours of community service, and a \$9,000 fine.

4. A Provisional Order in this matter was filed and served on respondent on March 22, 2000. Respondent failed to respond.

CONCLUSIONS OF LAW

1. The above conviction provides grounds for the suspension of his license to practice pharmacy in New Jersey pursuant to N.J.S.A. 45:1-21(f) in that the crime of which respondent was convicted is one of moral turpitude and/or relates adversely to the practice of Pharmacy.

ACCORDINGLY, IT IS ON

May 5th, 2000

ORDERED THAT:

1. Respondent's license to practice pharmacy in the State of New Jersey be and hereby is revoked, with no right to request reinstatement prior to the termination of criminal probation.

NEW JERSEY STATE BOARD OF PHARMACY

By:

Richard A. Palombo R.P.
RICHARD A. PALOMBO, R.P.
Board President

JOHN J. FARMER, JR.
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Attorney for State Board of Pharmacy

FILED

MAR - 2 2000

BOARD OF PHARMACY

By: Marianne W. Greenwald
Deputy Attorney General
(973) 648-4738

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

IN THE MATTER OF THE SUSPENSION	:	Administrative Action
OR REVOCATION OF THE LICENSE OF:	:	
	:	
JOSEPH DEMARINIS, R.P.	:	
	:	
TO PRACTICE PHARMACY IN THE	:	PROVISIONAL ORDER
STATE OF NEW JERSEY	:	OF DISCIPLINE
	:	
	:	
	:	

This matter was opened to the New Jersey State Board of Pharmacy upon receipt of information which the Board has reviewed and on which the following preliminary findings of fact and conclusions of law are made:

FINDINGS OF FACT

1. Respondent is a pharmacist in the State of New Jersey and has been a licensee at all times relevant hereto.
2. On January 19, 2000 respondent was convicted of the crime of Conspiracy to Defraud the United States in Federal District Court of New Jersey. Specifically: respondent pleaded guilty to conspiring to defraud customers by buying and selling stolen drug samples. (A copy of the Judgment of Conviction, the Minutes of the

a) Submitting a written request for modification or dismissal to H. Lee Gladstein, Executive Director, Board of Pharmacy, 124 Halsey Street, Sixth Floor, P.O. Box 45029 Newark, New Jersey 07101.

b) Setting forth in writing any and all reasons why said findings and conclusions should be modified or dismissed.

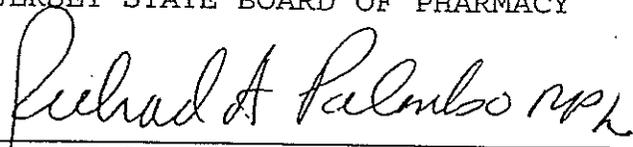
c) Submitting any and all documents or other written evidence supporting respondent's for consideration and reasons therefor or in mitigation of the penalty proposed.

4. Any submissions will be reviewed by the Board, and the Board will thereafter determine whether further proceedings are necessary. If no material discrepancies are raised through the submission by respondent during the thirty-day period, or if the Board is not persuaded that the submitted materials merit further consideration, a Final Order of Discipline will be entered.

5. In the event that respondent's submissions establish a need for further proceedings, including, but not limited to, an evidentiary hearing, respondent shall be notified with regard thereto. In the event that an evidentiary hearing is ordered, the preliminary findings of fact and conclusions of law contained herein shall serve as notice of the factual and legal allegations in such proceeding.

NEW JERSEY STATE BOARD OF PHARMACY

By:


RICHARD A. PALOMBO, R.P.
Board President

FILED

UNITED STATES DISTRICT COURT
District of New Jersey

JAN 19 2000

AT 8:30 _____ M
WILLIAM T. WALSH
CLERK

UNITED STATES OF AMERICA

v.

Case Number 2:99-CR-0128-01

JOSEPH DEMARINIS

Defendant.

JUDGMENT IN A CRIMINAL CASE
(For Offenses Committed On or After November 1, 1987)

ENTERED
ON
THE DOCKET
on 1-20-00
WILLIAM T. WALSH, CLERK
By [Signature]
(Deputy Clerk)

The defendant, JOSEPH DEMARINIS, was represented by Justin P. Walder.

The defendant pled guilty to count(s) 1 of the information on 3-16-99. Accordingly, the defendant is adjudged guilty of such count(s), involving the following offense(s):

<u>Title & Section</u>	<u>Nature of Offense</u>	<u>Date of Offense</u>	<u>Count Number(s)</u>
18:371	Conspiracy to defraud the United States.	8-1-97	1

As pronounced on 1-12-00, the defendant is sentenced as provided in pages 2 through 5 of this Judgment. The sentence is imposed pursuant to the Sentencing Reform Act of 1984.

It is ordered that the defendant shall pay to the United States a special assessment of \$100.00, for count(s) 1, which shall be due immediately. Said special assessment shall be made payable to the Clerk, U.S. District Court.

It is further ordered that the defendant shall notify the United States Attorney for this district within 30 days of any change of name, residence, or mailing address until all fines, restitution, costs, and special assessments imposed by this Judgment are fully paid.

Signed this the 19th day of January 2000

Certified as a true copy on
This Date: 1/21/00
By: [Signature]
() Clerk
(v) Deputy

[Signature]
Joseph A. Greenaway, Jr.
United States Judge

Defendant's SSN: 143-36-6877
Defendant's Date of Birth: 10-15-47
Defendant's address: 955 Northwood Avenue, Elberon, N.J. 07740