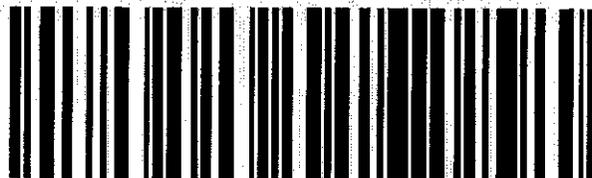


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Donna M.  
Lic#28RI0792200  
document Mastropietro,  
Donna M.  
Lic#28RI0792200  
location Collection-389  
Consent Order of  
summary Voluntary  
Surrender  
12/16/2005  
keywords  
dsclass Document  
description  
author Lyann Hope  
expiration\_date 12/16/2070

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**FILED**

DEC 16 2005

**BOARD OF PHARMACY**

By: Debra W. Levine  
Deputy Attorney General  
Tel. No. (973)648-4876

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

IN THE MATTER OF THE LICENSE OF	:	Administrative Action
	:	
<b>DONNA M. MASTROPIETRO, R.P.</b>	:	<b>CONSENT ORDER OF</b>
<b>License No. R101792200</b>	:	<b>VOLUNTARY SURRENDER</b>
	:	<b>OF LICENSURE</b>
	:	
TO PRACTICE PHARMACY IN THE	:	
STATE OF NEW JERSEY	:	

This matter was opened to the New Jersey State Board of Pharmacy ("Board") upon receipt of information that on or about November 19-20, 2005, Donna M. Mastropietro, R.P. ("Respondent") took five (5) ampules of injectable hydromorphone (C-11) (Dilaudid) from the Hackensack University Medical Center in Hackensack, New Jersey. Respondent admits that she is seeking treatment with the Professional Assistance Program concerning her use of hydromorphone.

It appearing that respondent wishes to resolve this matter without formal proceedings pursuant to N.J.S.A. 45:1-22, and for good cause shown,

DEC 13 2005

ACCORDINGLY, IT IS on this 14<sup>th</sup> day of December, 2005,

**ORDERED AND AGREED**, that respondent shall voluntarily surrender her New Jersey license to practice pharmacy upon entry of this Order and immediately cease and desist from engaging in the practice of pharmacy including the following: respondent shall not handle, order inventory, compound, count, fill, refill or dispense any drug; she shall not handle anything requiring a prescription including devices and medications; she shall not handle prescriptions; she shall not advise or consult with patients, and she is prohibited from being present within a prescription filling area of a pharmacy, and it is further

**ORDERED AND AGREED**, that respondent shall immediately surrender her original wall certificate and wallet certificate and the most recent renewal card of her license to an authorized representative of the Board of Pharmacy, and it is further

**ORDERED AND AGREED**, that nothing herein provided shall preclude the Board from affirmatively initiating any further action which may be authorized by law, at such time as the Board may deem it appropriate to initiate such action, and it is further

**ORDERED AND AGREED**, that in the event that respondent seeks reinstatement of her New Jersey license to practice pharmacy, respondent shall petition the Board for reinstatement and shall be required to appear before the Board to demonstrate that she is fit and competent to resume the practice of pharmacy and that she has

satisfied all requirements of the within Order. Respondent shall provide all treatment records, including directly witnessed urine screens documenting absolute abstinence from all mood altering substances. Respondent must comply with all laws, regulations and procedures for reinstatement of a license in effect at the time the petition is filed. The Board reserves the right to place restrictions on respondent's practice should her license be reinstated. Any practice in this State prior to reinstatement and further order of this Board shall constitute grounds for a charge of unlicensed practice.

NEW JERSEY STATE BOARD OF PHARMACY

By: Pamela Allen, R.P.  
Pamela Allen, R.P.  
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.

Donna M. Mastropietro, R.P.  
Donna M. Mastropietro, R.P.