Payette Clinic’s co-owner denies overprescribing painkillers

Payette Clinic nurse barred from prescribing narcotics

Investigation: Payette Clinic nurse prescribing narcotics

A LEGACY of ADDICTION

Clark County

Woman sentenced for pharmacy robbery

The Payette Clinic, which opened in 2005, remains open. When asked whether Bell is on leave and regain a license to prescribe opioids, she said yes.

The news story mentions Bell is an investigation and one of the nurses at Payette Clinic is being investigated for overprescribing.

The attorney for a Vancouver nurse practitioner who worked at Payette Clinic says Bell’s case is unusual because there was no conflict of interest.

The story also mentions other nurses at Payette Clinic have been disciplined for overprescribing pain medications.

The story ends with the headline, "Woman sentenced for pharmacy robbery."
Payette Clinic: Family Practice

- Opened in 2005 – complaints began in 2005
- Four Advanced Registered Nurse Practitioners (ARNP) with full prescribing authority
- No physician oversight
- No special certifications required for pain management
- Consistent complaints of over-prescribing high doses of painkillers
Payette Clinic exposed

- Served approximately 800 patients for pain management
- Pharmacists reported grave concern about types, strength, and volumes of prescriptions
- Patients sent to high-security pharmacy in Oregon
- Five patients died while under the care of the Payette Clinic ARNPs
- Deaths caused by patient misuse of narcotic prescriptions
DEA steps in to investigate

- Criminal takes precedence over administrative; caused delays
- DEA found no criminal enterprise; did not prosecute
- Voluntary surrender of three of the four DEA registrations
- Payette Clinic abruptly closed their doors
- Pressure on Nursing Commission to take action
Significant impact in SW Washington

- Hundreds of patients left without narcotic prescriptions
- Hospital emergency rooms overwhelmed
- Local health professionals refused to treat Payette Clinic patients
- Local pharmacies stopped filling Payette Clinic prescriptions
- Desperate patients turned to crime
Difficulty charging ARNPs

- 66 investigations against four ARNPs funneled down to five
- One ARNP prosecuted; resolution was Agreed Order
- Second ARNP case closed with insufficient evidence
- Remaining two ARNPs not prosecuted
Challenges to the cases

- Clear and Convincing burden of proof
- Facts of the cases v. violation of law
- Maximum number of pills or dosages not defined
- Wide authority based on clinical judgment
- Difficulty finding experts
- Case only as good as the expert testimony
Labor and cost intensive

- Incomplete estimates on time spent investigating
- Over 400 hours spent on the prosecution alone
- Expert consultation fee was $8600
- Patient safety paramount
It all boiled down to:

- Substandard practice of prescribing narcotics
- Failure to adequately monitor patients for medication and response to it
Sanctions against one ARNP only

- Agreed Order for Unprofessional Conduct
- Violation of the Uniform Disciplinary Act
- Treatment fell below standard with risk of moderate to severe harm
- Limitations to prescribing privileges
Pushed into action

- Local lawmaker alerted to the chronic pain community crisis
- Proposed legislation to require multiple boards and commissions to develop pain management rules
- Describes the elements necessary in pain management assessment
- Pain Management Rules are national model
Consider these issues

- Is your goal to make patients safer?
- Protect the public as soon as possible?
- Or put together the perfect case?
- Relationship between risk of harm and time lag
- What is the remedy you seek?
- How can you get there?
- Recognize that allegations create expectations
What might we have done differently?

- Not waited for all the pieces to fall into place
- Insisted on supervised practice as a remedy
- Limited email communications: you *will* be quoted!
- Used consistent language throughout charging documents
- Used verbal consultation from experts earlier in the process
PUBLIC HEALTH
ALWAYS WORKING FOR A SAFER AND HEALTHIER WASHINGTON
NON-THERAPEUTIC PRESCRIBING OF CONTROLLED SUBSTANCES

a.k.a.

PILL MILL PRACTICE

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Attorney Specialist
Arkansas
Drug Enforcement Agency (DEA) sent a complaint

The Complaint:

- Undercover police officer obtained controlled substances in June and July 2011
• In three visits over a thirty-eight (38) day period, the SSA was prescribed a total of five hundred and thirty (530) controlled substances.

The experience of the undercover Arkansas State Police Senior Special Agent (SSA) attached to the Federal Bureau of Investigation
• Initial investigation looked at January 2010 to October 2011

• Approximately 9,000 prescriptions filled

• Over 90% of prescriptions were filled by two (2) local pharmacies
• Drug Addiction Treatment Act 21 U.S.C. 823(g)

• Limits prescribing to physicians only

Buprenorphine / Suboxone

Information from http://www.drugs.com/pro/suboxone.html

Official FDA information side effects and uses
• Hydrocodone
  236,595 Tablets

• Xanax
  184,915 Tablets

• Soma
  58,027 Tablets
• Prescribed 23,904 Tablets

Phentermine
Various strengths

Information from http://www.drugs.com/pro/phentermine.html#LINK_60097ff6-3d6e-4818-bb61-da310767a498, the Official FDA information, side effects and uses.

• Poor patient management found upon review of medical records
• Patient BZ, 8/06, wt = 165 lbs for 5 years wt was not documented again

• Patient VH, 9/06, wt = 198 lbs 5 years wt = 196 lbs

• Patient PK, 10/08, wt = 189 lbs 3 years wt = 195.5 lbs
Pharmacy profiles indicate from June 1 to June 5, 2012

Arkansas Department of Health

Pharmacy Services Investigation

Approximately 13,846 controlled substances were dispensed
The Trinity
Prescribed in a 3-day work period

- **Hydrocodone**
  6,197 Tablets

- **Xanax**
  3,558 Tablets

- **Soma**
  1,010 Tablets
<table>
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<th>Quantity</th>
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<th>Medication</th>
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<td>Tablets</td>
<td>APAP/ Codeine</td>
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<tr>
<td>60</td>
<td>Tablets</td>
<td>Halcion</td>
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</tbody>
</table>

Prescribed in a 3-day work period
Arkansas State Board of Nursing Rules, Chapter Four, Section VIII, Prescriptive Authority, Part D, 5

- Failed to consistently document in record required information:
  - Medication and strength
  - Dose
  - Amount prescribed
  - Directions for use
  - Number of refills
  - Initials or signature of APN
Arkansas State Board of Nursing Rules, Chapter Four, Section VI, Standards of Nursing Practice

• Failed to establish practice standards essential for safe practice
• Failed to consistently follow the mandated written prescription format

Violated the Arkansas State Board of Nursing Rules, Chapter Four, Section VIII, Prescriptive Authority, Part E(1) and (2)

No PAC listed
No DEA listed
Lessons Learned

• Nurse Practice Act
• Patient Documentation
• Clinical Indications
• DEA Relationship
• Pharmacists
• Local Courts
• Experts
• Don’t Chase Windmills