

**BEFORE THE OREGON
STATE BOARD OF NURSING**

In the Matter of) **STIPULATED ORDER FOR**
Kaileene Gomez, CMA) **VOLUNTARY SURRENDER OF**
) **MEDICATION AIDE CERTIFICATE**
Certificate No. 201020149CMA) **Reference No. 13-01615**

Kaileene Gomez (CMA) was issued a Certified Medication Aide certificate by the Oregon State Board of Nursing (Board) on December 7, 2010.

On or about March 11, 2013, the Board received information that CMA failed to properly document medication administrations.

By the above actions, CMA is subject to discipline pursuant to ORS 678.442(2)(f) and OAR 851-063-0100(2) and (11).

ORS 678.442 Certification of nursing assistants; rules. (1) The Oregon State Board of Nursing shall establish standards for certifying and shall certify as a nursing assistant any person who applies therefor, shows completion of an approved training program for nursing assistants and passes a board approved examination.

(2) In the manner prescribed in ORS chapter 183, the board may revoke or suspend a certificate issued under this section or may reprimand a nursing assistant for the following reasons:

(f) Conduct unbecoming a nursing assistant in the performance of duties.

OAR 851-063-0100 Conduct Unbecoming a Certified Medication Aide

Certified Medication Aides are subject to discipline as CNAs as described in these rules. In addition, CMAs are subject to discipline for conduct unbecoming a medication aide. Conduct unbecoming a medication aide includes but is not limited to:

(2) Failing to document medications as administered, medications withheld or refused and the reason a medication was withheld or refused.

(11) Failing to conform to the standards and authorized duties in these rules.

On May 15, 2013, CMA informed Board staff of her desire to voluntarily surrender her Certified Medication Aide certificate.

Therefore, the following will be proposed to the Oregon State Board of Nursing and is agreed to by CMA:

That the voluntary surrender of the Certified Medication Aide certificate of Kaileene Gomez be accepted. If, after a minimum of three years, Ms. Gomez wishes to reinstate her Certified Medication Aide certificate, she may submit an application to the Board to request reinstatement.

CMA agrees that she will not practice as a Certified Medication Aide from the date she signs this Order.

CMA understands that this Order will be submitted to the Board of Nursing for its approval and is subject to the Board's confirmation.

CMA understands that by signing this Stipulated Order, she waives the right to an administrative hearing under ORS 183.310 to 183.540. CMA acknowledges that no promises, representations, duress or coercion have been used to induce her to sign this Order.

CMA understands that this Order is a document of public record.

CMA has read this Stipulated Order, understands this Order completely, and freely signs this Stipulated Order for Voluntary Surrender.

Kaileene Gomez, CMA

Date

ORDER

IT IS SO ORDERED:

BOARD OF NURSING FOR THE STATE OF OREGON

Kay Carnegie, RN, MS
Board President

Date