

BEFORE THE TEXAS BOARD OF NURSING

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In the Matter of Registered Nurse § AGREED  
License Number 573609, issued to §  
CYNTHIA LOU SHORTLE § ORDER



I do hereby certify this to be a complete, accurate, and true copy of the document which is on file or is of record in the offices of the Texas Board of Nursing.  
*Patricia P. Thomas*  
Executive Director of the Board

On this day, the Texas Board of Nursing, hereinafter referred to as the Board, accepted the voluntary surrender of Registered Nurse License Number 573609, issued to CYNTHIA LOU SHORTLE, hereinafter referred to as Respondent. This action was taken in accordance with Section 301.453(c), Texas Occupations Code.

Respondent waived informal proceedings, notice and hearing, and agreed to the entry of this Order.

The Board makes the following Findings of Fact and Conclusions of Law.

FINDINGS OF FACT

1. Prior to the institution of Agency proceedings, notice of the matters specified below in these Findings of Fact was provided to Respondent and Respondent was given an opportunity to show compliance with all requirements of the law for retention of the license(s).
2. Respondent waived informal proceedings, notice and hearing, and agreed to the entry of this Order.
3. Respondent is currently licensed to practice professional nursing in the State of Texas.
4. Respondent received a Baccalaureate Degree in Nursing from Houston Baptist University on May 1, 1991; and a Master in Nursing from The University of Texas Health Science Center, Houston, Texas on May 7, 2004. Respondent was licensed to practice professional nursing in the State of Texas on August 26, 1991; and became Board recognized as a Nurse Practitioner specializing as a Psychiatric/Mental Health Nurse on August 3, 2004.
5. On July 19, 2007, Respondent's license to practice professional nursing in the State of Texas was Suspended with the suspension stayed and probated for two years by the Texas Board of Nursing. A copy of the Findings of Fact, Conclusions of Law, and Agreed Order dated July 19, 2007, is attached and incorporated by reference as part of this Order.

6. Respondent's nursing employment history includes:

06/91 - 08/92	Clinical Staff Nurse	University of Texas Medical Branch Galveston, Texas
12/92 - 02/94	Clinical Staff Nurse	University of Texas Medical Branch Galveston, Texas
04/94 - 09/94	Charge Nurse Adult Psychiatric Unit	Memorial Hospital Corpus Christi, Texas
09/94 - 09/95	Charge Nurse Ger-psychiatric Unit	Bay Area Hospital Corpus Christi, Texas
10/95 - 1998	Clinical Nurse Nurse Corps Officer	Malcolm Grow Medical Center Andrews AFB, Maryland
05/98 - 10/99	Clinical Nurse Manager Nurse Corps Officer	Outpatient Mental Health Clinic Andrews AFB, Maryland
04/00 - 08/00	Charge Nurse Adult Psychiatric Unit	St. Joseph's Hospital Houston, Texas
08/00 - 12/00	Charge Nurse	Mainland Medical Center Texas City, Texas
05/01 - 02/03	Weekend Charge Nurse Adult Psychiatric Unit	Cypress Creek Hospital Houston, Texas
05/03 - 06/04	Clinical Staff Nurse Psychiatric Unit	Menninger Hospital Houston, Texas
09/04 - 05/05	PMHNP	The Center for Health Care Services San Antonio, Texas
05/05 - 01/06	PMHNP	Methodist Healthcare Services San Antonio, Texas
01/06 - 09/06	PMHNP	Legacy Health System Portland, Oregon
11/06 - 12/09	PMHNP	The Center for Health Care Services San Antonio, Texas
01/10 - Present	Unknown	

7. At the time of the incidents, Respondent was employed as a PMHNP with The Center for Health Care Services, San Antonio, Texas, and had been in this position for three (3) years and one (1) month.
8. During October 12, 2009 through December 13, 2009, while employed as a Psychiatric/Mental Health Nurse Practitioner, with The Center for Health Care Services, San Antonio, Texas, Respondent lacked fitness to practice professional nursing in that while on duty Respondent exhibited behaviors which included, acting irritable and aggressive towards staff, exhibiting manic and erratic behavior, being talkative, bringing her dog to the clinic, and telling staff that she was suffering from Post Traumatic Stress Disorder (PTSD). Respondent was removed from her clinical duties until she submitted a written release to return to work from her psychiatrist. Respondent resigned her employment on December 13, 2009. Respondent's conduct could have affected her ability to recognize subtle signs, symptoms or changes in the patient's condition, and could have affected her ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.
9. During December 13, 2009 through present, Respondent lacked fitness to practice professional nursing in that when Respondent resigned her employment as a Psychiatric/Mental Health Nurse Practitioner with The Center for Health Care Services, San Antonio, Texas, Respondent was suffering a manic break and PTSD. Respondent's conduct could affect her ability to recognize subtle signs, symptoms or changes in the patient's condition, and could affect her ability to make rational, accurate, and appropriate assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.
10. In response to Findings of Fact Numbers Eight (8) and Nine (9), Respondent states that on September 28, 2009, while at work she was informed via telephone that her only child had been shot and killed. She returned to work on October 12, 2009, two and a half (2 ½) weeks following her son's death. She had exhausted most of her paid time off and was aware that there was a critical need due to medical staff vacancies at the organization so her plan was to attempt to work part time hours initially. She continued to work limited part-time hours, but she had some difficulty with a frequently adjusted schedule. She believes she needed a structured time and little additional stress. "I acknowledge that I had severe problems with adequate sleep at that time and that I was emotionally and physically exhausted following the loss of my son. However, I was never aggressive or irritable towards anyone, nor did I consider that I was manic in behavior, I was devastated by grief; symptoms of sleeplessness are characteristic of acute bereavement. . . It is true that I brought my small Italian greyhound to work one afternoon, after he had immunizations, he was supposed to be monitored and I had no one to do that for me. . . I may have mentioned to someone on staff that PTSD symptoms had been re-exacerbated by the loss of my son, although this was not an unknown fact. . . On November 18, 2009, . . I was informed . . .that I had been allowed to return to work too soon following my son's death and that I would take administrative leave and needed to utilize short term disability or FMLA, although I had done nothing wrong

clinically. . . I felt humiliated at this meeting . . . At the end of the meeting, Dr. Milam called Dr. Merritt, and told her she wanted me to attend an appointment that day. I attended the appointment that afternoon although I had just seen Dr. Merritt on November 13, 2009, and at that time she had been supportive of my work efforts, and believed work structure would be helpful to me to normalize a period of terrible, confusing grief. . . my last work day was November 17, 2009. I continued to attend my appointments with Dr. Kalter, for psychotherapy and with Dr. Merritt in December, January, and February. . . I did not make a statement to anyone that I had stopped seeing Dr. Merritt. . . I resigned on Sunday evening, December 13, 2009, the resignation notice was slipped through the front door of the administration building. I had continued working with Dr. Kalter through January 2010 for psychotherapy, but I have no funds to continue with that and I have no health care insurance.”

11. The Board received a letter dated March 8, 2010, submitted by Shirley G. Merritt, MD, PA, Boerne Personal Growth & Psychiatry Center, Boerne, Texas. Dr. Merritt states that “Cynthia Shortle has been under her medical care since 2008 and was seen 11/4/09, 11/13/09, 11/18/09, 11/25/09, 1/20/10, 2/25/10, and 3/4/10. During the fall and early winter after the traumatic death of her son she had no insight into her state of being. Therefore it became necessary for her to cease to work till the irrational thinking and judgment cycled past. However she did continue to schedule appointments with me as above. Consistent with the symptoms above, she was late for 12/4/09 appointment and was not seen. It appears that she is regaining some insight and judgement and I would expect that she could become a valuable nurse practitioner again. A condition of her return to work in the future might be that she writes a living will or advanced directive designating a trusted and responsible person with whom she works to sign permission for her to have a brief hospital stay and medications should the need arise in the future to safeguard her health and her work.”
12. Respondent, by her signature to this Order, expresses her desire to voluntarily surrender her license(s) to practice nursing in the State of Texas.

#### CONCLUSIONS OF LAW

1. Pursuant to Texas Occupations Code, Sections 301.451-301.555, the Board has jurisdiction over this matter.
2. Notice was served in accordance with law.
3. The evidence received is sufficient to prove a violations of Section 301.452(b)(10)&(12), Texas Occupations Code, and 22 TEX. ADMIN. CODE §217.12(1)(E)&(5).
4. The evidence received is sufficient cause pursuant to Section 301.452(b), Texas Occupations Code, to take disciplinary action against Registered Nurse License Number 573609, heretofore issued to CYNTHIA LOU SHORTLE, including revocation of Respondent's license(s) to practice nursing in the State of Texas.

5. Under Section 301.453(c), Texas Occupations Code, the Board has the authority to accept the voluntary surrender of a license.
6. Under Section 301.453(d), Texas Occupations Code, as amended, the Board may impose conditions for reinstatement of licensure.
7. Any subsequent reinstatement of this license will be controlled by Section 301.453(d), Texas Occupations Code, and 22 TEX. ADMIN. CODE §213.26-.29, and any amendments thereof in effect at the time of the reinstatement.

ORDER

NOW, THEREFORE, IT IS AGREED and ORDERED that the VOLUNTARY SURRENDER of Registered License Number 573609, heretofore issued to CYNTHIA LOU SHORTLE, to practice nursing in the State of Texas, is accepted by the Texas Board of Nursing.

In connection with this acceptance, the Board imposes the following conditions:

1. RESPONDENT SHALL NOT practice professional nursing, use the title "registered nurse" or the abbreviation "RN" or wear any insignia identifying herself as a registered nurse or use any designation which, directly or indirectly, would lead any person to believe that RESPONDENT is a registered nurse during the period in which the license is surrendered.
2. RESPONDENT SHALL NOT petition for reinstatement of licensure until: one (1) year has elapsed from the date of this Order.
3. Upon petitioning for reinstatement, RESPONDENT SHALL satisfy all then existing requirements for relicensure.

IT IS FURTHER AGREED and ORDERED that this Order SHALL be applicable to Respondent's nurse licensure compact privileges, if any, to practice nursing in the State of Texas.

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RESPONDENT'S CERTIFICATION

I understand that I have the right to legal counsel prior to signing this Agreed Order. I have reviewed this Order. I neither admit nor deny the violations alleged herein. By my signature on this Order, I agree to the Findings of Fact, Conclusions of Law, Order, and any conditions of said Order, to avoid further disciplinary action in this matter. I waive judicial review of this Order. I understand that this Order becomes final when accepted by the Executive Director at which time the terms of this Order become effective and a copy will be mailed to me.

Signed this 21<sup>st</sup> day of April, 2011.

Cynthia Lou Shortle  
CYNTHIA LOU SHORTLE, Respondent

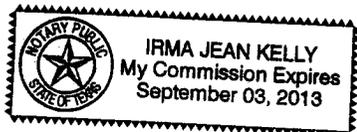
Sworn to and subscribed before me this 21<sup>st</sup> day of April, 2011.

SEAL

Alma Stearns

Notary Public in and for the State of Texas

Alma Stearns



Approved as to form and substance.

Dorothy Dafey Oruaga  
Dorothy Dafey Oruaga, Attorney for Respondent

Signed this 21<sup>st</sup> day of April, 2011.

WHEREFORE, PREMISES CONSIDERED, the Executive Director on behalf of the Texas Board of Nursing does hereby accept the voluntary surrender of Registered Nurse License Number 573609, previously issued to CYNTHIA LOU SHORTLE.



Effective this 27<sup>th</sup> day of April, 2011.

A handwritten signature in cursive script, reading 'Katherine A. Thomas'.

Katherine A. Thomas, MN, RN  
Executive Director on behalf of said Board

BEFORE THE BOARD OF NURSE EXAMINERS  
FOR THE STATE OF TEXAS

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In the Matter of Registered Nurse License Number 573609     §     AGREED  
issued to CYNTHIA LOU SHORTLE                                     §     ORDER

On this day the Board of Nurse Examiners for the State of Texas, hereinafter referred to as the Board, considered the matter of CYNTHIA LOU SHORTLE, Registered Nurse License Number 573609, hereinafter referred to as Respondent.

Information received by the Board produced evidence that Respondent may have violated Section 301.452(b)(8), Texas Occupations Code. Respondent waived informal conference, notice and hearing, and agreed to the entry of this Order offered on May 10, 2007, by Katherine A. Thomas, MN, RN, Executive Director, subject to ratification by the Board.

FINDINGS OF FACT

1. Prior to the institution of Agency proceedings, notice of the matters specified below in these Findings of Fact was served on Respondent and Respondent was given an opportunity to show compliance with all requirements of the law for retention of the license.
2. Respondent waived informal conference, notice and hearing, and agreed to the entry of this Order.
3. Respondent is currently licensed to practice professional nursing in the State of Texas.
4. Respondent received a Baccalaureate Degree in Nursing from Houston Baptist University, Houston, Texas, on May 17, 1991 and a Master's Degree in Nursing from the University of Texas Health Science Center, Houston, Texas, on May 7, 2004. Respondent was licensed to practice professional nursing in the State of Texas on August 26, 1991. Respondent became Board recognized as a Psychiatric/Mental Health Nurse Practitioner on August 3, 2004, and was granted Prescriptive Authority on September 24, 2004.
5. Respondent's professional nursing employment history is unknown.

6. On or about November 8, 2006, an Order of Emergency Suspension of Psychiatric Mental Health Nurse Practitioner Certificate and Registered Nurse License was entered by the Board of Nursing for the State of Oregon suspending Respondent's Psychiatric Mental Health Nurse Practitioner (PMHNP) Certificate, and license to practice professional nursing in the State of Oregon. The Oregon Order is attached hereto and incorporated herein by reference for all purposes.
7. On March 29, 2007, Respondent presented for a forensic psychiatric examination by Michael R. Arambula, M.D., Pharm. D., San Antonio, Texas. Dr. Arambula states:

It is apparent that Respondent has significant personality pathology and a recurrent Mood Disorder, the latter of which is probably a variant of Bipolar illness. Further, her personality dysfunction has fueled the interpersonal turmoil she experienced in her personal life (mostly) and the workplace (at times), while her mood disturbance intermittently aggravated her personality dynamics, which ultimately lead to brief psychotic breaks in an untreated state. At the same time, it is also apparent that Respondent still had the ability to meet and exceed her academic and occupational demands.

Psychological testing reveals that Respondent has severe personality pathology which (by Dr. Arambula's clinical analysis) most likely resembles Cluster B traits (Narcissistic, Histrionic, and Borderline). Her history of repeated interpersonal failures is rather obvious and corroborates the presence of such personality pathology. However, there is a noticeable Obsessive - Compulsive veneer to her personality organization (by clinical observation) which probably afforded her some degree of protection. From a clinical perspective, it can be perceived as the structure which was responsible for her academic/occupational success, her quick response to previous treatment interventions, and her resiliency (meaning she can carry significant symptomatology while looking relatively normal). Dr. Arambula believes this latter aspect of her personality accounts for her efforts to "look good" on psychological testing. At the same time, Dr. Arambula is also aware that the presence of any mental illness commonly aggravates personality dynamics. This clinical phenomenon is present in the instant case; it explains why she appears so personality disordered. By indirect inference, this means that she continues to struggle with a covert mood disturbance.

Records reveal that Respondent purportedly carried a diagnosis of Bipolar Disorder and has now had 3 psychotic breaks. The clinical course of Bipolar illness is cyclic and mostly comprised of inactivity. It is an illness which becomes intermittently symptomatic; and when it is active, its symptoms are typically attenuated/treated with medication interventions. Respondent has had 3 episodes in her life when her illness was most symptomatic and that her illness has not been adequately treated (with medication interventions). As to the former, this number of episodes is not so worrisome. It infers that Respondent's underlying mood disturbance is not so serious although when active, its symptoms can be. As to the latter, her treatment non-compliance has only served as a breeding ground for subsequent breaks. At the same time, this aspect of her case provides an obvious opportunity to effect change in her

subsequent clinical course. Literature shows that treatment compliance with medication interventions minimizes the risk for relapse and Dr. Arambula would not expect any different in her case. Dr. Arambula believes that Respondent's prognosis can be very positive with her full treatment compliance, and he also believes the best interests of her patients as well as her own will benefit from her lifetime treatment. As an added benefit, the same medication regimens which usually remit the symptoms of a mood disturbance can also attenuate the emotional instability associated with her underlying personality pathology. From a clinical perspective, this becomes a win-win situation.

#### CONCLUSIONS OF LAW

1. Pursuant to Texas Occupations Code, Sections 301.451-301.555, the Board has jurisdiction over this matter.
2. Notice was served in accordance with law.
3. The evidence received is sufficient to prove a violation of Section 301.452(b)(8), Texas Occupations Code.
4. The evidence received is sufficient cause pursuant to Section 301.452(b), Texas Occupations Code, to take disciplinary action against Registered Nurse License Number 573609, heretofore issued to CYNTHIA LOU SHORTLE, including revocation of Respondent's license to practice professional nursing in the State of Texas.

#### ORDER

IT IS THEREFORE AGREED and ORDERED, subject to ratification by the Board of Nurse Examiners, that Registered Nurse License Number 573609, previously issued to CYNTHIA LOU SHORTLE, to practice professional nursing in Texas is hereby SUSPENDED for a period of three (3) years with the suspension STAYED and Respondent is hereby placed on PROBATION for three (3) years with the following agreed terms of probation:

IT IS FURTHER AGREED and ORDERED that this Order SHALL be applicable to Respondent's multistate privilege, if any, to practice professional nursing in the State of Texas.

IT IS FURTHER AGREED and ORDERED that while Respondent's license is encumbered by this order the Respondent may not work outside the State of Texas pursuant to a multistate licensure privilege without the written permission of the State of Texas and the Board of Nursing in the party state where Respondent wishes to work.

(1) RESPONDENT SHALL comply in all respects with the Nursing Practice Act, Revised Civil Statutes of Texas as amended, Texas Occupations Code, §§301.001 *et seq.*, the Rules and Regulations Relating to Nurse Education, Licensure and Practice, 22 TEX. ADMIN. CODE §211.01 *et seq.* and this Order.

(2) RESPONDENT SHALL deliver the wallet-sized license issued to CYNTHIA LOU SHORTLE, to the office of the Board of Nurse Examiners within ten (10) days of the date of this Order for appropriate notation.

(3) RESPONDENT SHALL, within one (1) year of entry of this Order, successfully complete a course in Texas nursing jurisprudence and ethics. RESPONDENT SHALL obtain Board approval of the course prior to enrollment only if the course is not being offered by a pre-approved provider. Home study courses and video programs will not be approved. In order for the course to be approved, the target audience shall include nurses. It shall be a minimum of six (6) contact hours in length. The course's content shall include the Nursing Practice Act, standards of practice, documentation of care, principles of nursing ethics, confidentiality, professional boundaries, and the Board's Disciplinary Sanction Policies regarding Sexual Misconduct, Fraud, Theft and Deception, Nurses with Chemical Dependency, and Lying and Falsification. Courses focusing on malpractice issues will not be accepted. RESPONDENT SHALL CAUSE the sponsoring institution to submit a Verification of Course Completion form, provided by the Board, to the Office of the Board to

verify RESPONDENT's successful completion of the course. This course shall be taken in addition to any other courses stipulated in this Order, if any, and in addition to any continuing education requirements the Board has for relicensure. *Board-approved courses may be found at the following Board website address: <http://www.bne.state.tx.us/about/stipscourses.html>.*

**IT IS FURTHER AGREED, SHOULD RESPONDENT PRACTICE AS A REGISTERED NURSE IN THE STATE OF TEXAS, RESPONDENT WILL PROVIDE DIRECT PATIENT CARE AND PRACTICE IN A HOSPITAL, NURSING HOME, OR OTHER CLINICAL SETTING AND RESPONDENT MUST WORK IN SUCH SETTING A MINIMUM OF SIXTY-FOUR (64) HOURS PER MONTH UNDER THE FOLLOWING PROBATION CONDITIONS FOR THREE (3) YEARS OF EMPLOYMENT. THE LENGTH OF THE PROBATIONARY PERIOD WILL BE EXTENDED UNTIL SUCH THIRTY-SIX (36) MONTHS HAVE ELAPSED. PERIODS OF UNEMPLOYMENT OR OF EMPLOYMENT THAT DO NOT REQUIRE THE USE OF A REGISTERED NURSE (RN) LICENSE WILL NOT APPLY TO THIS PROBATIONARY PERIOD:**

(4) RESPONDENT SHALL notify each present employer in nursing of this Order of the Board and the probation conditions on RESPONDENT's license. RESPONDENT SHALL present a complete copy of this Order and all Proposals for Decision issued by the Administrative Law Judge, if any, to each present employer within five (5) days of receipt of this Order. RESPONDENT SHALL notify all future employers in nursing of this Order of the Board and the probation conditions on RESPONDENT's license. RESPONDENT SHALL present a complete copy of this Order and all Proposals for Decision issued by the Administrative Law Judge, if any, to each future employer prior to accepting an offer of employment.

(5) RESPONDENT SHALL CAUSE each present employer in nursing to submit the Notification of Employment form, which is provided to the Respondent by the Board, to the Board's office within ten (10) days of receipt of this Order. RESPONDENT SHALL CAUSE each future employer to submit the Notification of Employment form, which is provided to the Respondent by the Board, to the Board's office within five (5) days of employment as a nurse.

(6) For the first year of employment as a Registered Nurse, or Registered Nurse utilizing her Nurse Practitioner authorization under this Order, RESPONDENT SHALL be directly supervised by a Nurse Practitioner, or Licensed Physician, or Registered Nurse if practicing as a Registered Nurse only. Direct supervision requires another Nurse Practitioner, or Licensed Physician, or Registered Nurse to be working on the same unit as RESPONDENT and immediately available to provide assistance and intervention. RESPONDENT SHALL work only on regularly assigned, identified and predetermined unit(s). The RESPONDENT SHALL NOT be employed by a nurse registry, temporary nurse employment agency, hospice, or home health agency. RESPONDENT SHALL NOT be self-employed or contract for services. Multiple employers are prohibited.

(7) For the remainder of the probation period while employed as a Registered Nurse, or Registered Nurse utilizing her Nurse Practitioner authorization, RESPONDENT SHALL be supervised by a Nurse Practitioner, or Licensed Physician, or Registered Nurse who is on the premises. The supervising Nurse Practitioner, or Licensed Physician, or Registered Nurse is not required to be on the same unit or ward as RESPONDENT, but should be on the facility grounds and readily available to provide assistance and intervention if necessary. The supervising Nurse Practitioner or Medical Doctor shall have a minimum of two (2) years experience in the same or

similar practice setting to which the Respondent is currently working. RESPONDENT SHALL work only regularly assigned, identified and predetermined unit(s). RESPONDENT SHALL NOT be employed by a nurse registry, temporary nurse employment agency, hospice, or home health agency. RESPONDENT SHALL NOT be self-employed or contract for services. Multiple employers are

(8) RESPONDENT SHALL CAUSE each employer to submit, on forms provided to the Respondent by the Board, periodic reports as to RESPONDENT's capability to practice nursing. These reports shall be completed by the Registered Nurse, Nurse Practitioner, or Medical Doctor who supervises the RESPONDENT. These reports shall be submitted by the supervising nurse, Nurse Practitioner, or Medical Doctor to the office of the Board at the end of each three (3) months for three (3) years of employment as a nurse.

(9) RESPONDENT SHALL participate in therapy with a "professional counselor" possessing credentials approved by the Board. RESPONDENT SHALL CAUSE the therapist to submit written reports, on forms provided by the Board, as to the RESPONDENT's progress in therapy, rehabilitation and capability to safely practice professional nursing. The report must indicate whether or not the RESPONDENT's stability is sufficient to provide direct patient care safely. Such reports are to be furnished each and every week for one (1) month, then each and every month thereafter for five (5) months. If therapy is recommended for beyond six (6) months, the reports shall then be required at the end of each three (3) month period for the duration of the probation period, or until RESPONDENT is dismissed from therapy.

(10) RESPONDENT SHALL submit to psychiatric treatment as recommended by Dr. Arambula in Finding of Fact Number Seven (7), with said psychiatrist possessing

credentials approved by the Board. RESPONDENT SHALL CAUSE the psychiatrist to submit written reports, on forms provided by the Board, as to the RESPONDENT's progress in therapy, rehabilitation and capability to safely practice professional nursing. The report must indicate whether or not the RESPONDENT's stability is sufficient to provide direct patient care safely. Such reports are to be furnished each and every month for six (6) months. If therapy is recommended for beyond six (6) months, the reports shall then be required at the end of each three (3) month period for the duration of the probation period, or until RESPONDENT is dismissed from treatment.

IT IS FURTHER AGREED, that upon full compliance with the terms of this Order, RESPONDENT SHALL be issued an unencumbered license and multistate licensure privileges, if any, to practice professional nursing in the State of Texas.

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**RESPONDENT'S CERTIFICATION**

I understand that I have the right to legal counsel prior to signing this Agreed Order. I have reviewed this Order. I neither admit nor deny the violation alleged herein. By my signature on this Order, I agree to the Findings of Fact, Conclusions of Law, Order, and any conditions of said Order, to avoid further disciplinary action in this matter. I waive judicial review of this Order. I understand that this Order is subject to ratification by the Board. When this Order is ratified, the terms of this Order become effective, and a copy will be mailed to me. I understand that if I fail to comply with all terms and conditions of this Order, I will be subject to investigation and disciplinary sanction, including revocation of my license to practice professional nursing in the State of Texas, as a consequence of my noncompliance.

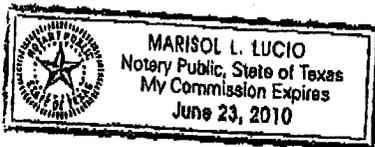
Signed this 12 day of June, 2007.

Cynthia Lou Shortle  
CYNTHIA LOU SHORTLE, Respondent

Sworn to and subscribed before me this 12 day of June, 2007.

SEAL

Marisol L. Lucio  
Notary Public in and for the State of Texas



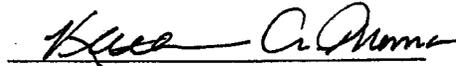
Approved as to form and substance.

[Signature]  
LOUIS LEICHTER, Attorney for Respondent

Signed this 15 day of June, 2007.

WHEREFORE, PREMISES CONSIDERED, the Board of Nurse Examiners for the State of Texas does hereby ratify and adopt the Agreed Order that was signed on the 10<sup>th</sup> day of June, 2007, by CYNTHIA LOU SHORTLE, Registered Nurse License Number 573609, and said Order is final.

Effective this 19<sup>th</sup> day of July, 2007.



Katherine A. Thomas, MN, RN  
Executive Director on behalf  
of said Board

**BEFORE THE BOARD OF NURSING  
FOR THE STATE OF OREGON**

In the Matter of )

Cynthia Lou Shortle, RN, PMHNP )

Certificate No. 200550171NP )  
License No. 200542631RN )

) ORDER OF EMERGENCY SUSPENSION  
) OF PSYCHIATRIC MENTAL HEALTH  
) NURSE PRACTITIONER CERTIFICATE  
) AND  
) REGISTERED NURSE LICENSE  
) Case No: 07-119  
)

This matter having come before the Board on November 8, 2006 for consideration of the entry of an Order of Emergency License Suspension suspending Psychiatric Mental Health Nurse Practitioner Certificate (PMHNP) and Registered Nurse License (RN) of Cynthia Shortle, pending the conclusion of the Board's disciplinary proceeding in the above-captioned matter. The following facts support the Board's order of Emergency Suspension:

1. Cynthia Shortle holds PMHNP certificate issued by this Board on December 7, 2005.
2. Cynthia Shortle holds RN license issued by this Board on November 28, 2005.
3. In or around July 2006 Ms. Shortle's employer began to express concerns about her work performance. There were concerns about her charting; her follow through on consults; and her productivity level. This concern continued through August 2006. Ms. Shortle was noted to write copious notes, decline new consults, and instead of working she was noted talking incessantly with her other co-worker and keeping her co-worker from finishing her own work.
4. On or about August 23, 2006 Ms. Shortle was noted by a co-worker coming out of a patient's room after performing a consultation making odd remarks that did not match the situation. Then on August 24, 2006 Dr. R checked her voice mail messages. There was a message from Ms. Shortle. Dr. R reported that the message was mostly unintelligible and Ms. Shortle used slowed muffled speech, sounded heavily sedated, and her voice sounded like a little girl (different from her normal speech); during this phone call Ms. Shortle called in sick to work. However, on August 23, 2006 Ms. Shortle was told by her administrative supervisor RR, to take August 24, 25, and 28, 2006 off because there were concerns about her mental state. RR reported that during this conversation Ms. Shortle used a slow halting speech and sounded like a child. RR also reported that during this conversation Ms. Shortle has also stated that she had shared his same concerns and was worried about herself as well. This conduct constitutes a violation of ORS 678.111 (1) (f), (i), and (2); and OAR 851-045-0015 (5) (b).

Order emergency suspension  
Cynthia Lou Shortle

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5. On or about August 28, 2006 Dr. R had left Ms. Shortle a message on her voicemail/answering machine stating that before she was to return to work she would need a medical clearance from her provider. On August 29, 2006 Ms. Shortle was seen in the office as if she was going to work and when questioned she stated that she had not checked her messages on August 28, 2006. During this conversation Dr. R reiterated to Ms. Shortle that before she could return to work she would need a medical clearance. Ms. Shortle's response to this request was completely out of place and reflected that Ms. Shortle was not tracking well. This conduct constitutes a violation of ORS 678.111 (1) (f), (i) and (2); and OAR 851-045-0015 (5) (b).
6. On September 1, 2006 Portland Police responded to a call from Ms. Shortle's neighbor who had concerns about Ms. Shortle as she has heard her yelling for "awhile". When the police arrived they found Ms. Shortle in her back yard naked and making delusional statements. The police transported her to the hospital where she was placed on a mental hold. This conduct constitutes a violation of ORS 678.111 (1) (f), (i) and (2) and OAR 851-045-0015 (5) (b).
7. On or about September 1, 2006 Ms. Shortle's son contacted Dr. R to report that his mother had been placed on an involuntary hold at a local hospital and had been released. He also reported that his mother, Ms. Shortle had two prior psychotic breaks in 1986 and 2000.
8. On or about September 5, 2006 Ms. Shortle's came in to discuss her current employment/ health situation with her employer. During this meeting Ms. Shortle was again witnessed making delusional statements. Ms. Shortle was told that she would need to obtain a psychiatric evaluation before she could return to work. This conduct constitutes a violation of ORS 678.111 (1) (f), (i), and (2) and OAR 851-045-0015 (5) (b).
9. On or about September 7, 2006 Ms. Shortle left a voicemail message for Dr. R that she was leaving as things at the facility did not work out; however she never gave any formal written notice.
10. On September 11, 2006 the Portland Police responded to a call from a Cingular Wireless store who reported that Ms. Shortle came to the store, put her name on the waiting list and that when her name was called she refused to get up from her seat to be helped but stated that she was mad because her cell phone was not working. Ms. Shortle refused to give the customer service representative any of her information so she could look up her account number. Ms. Shortle then got out her stun gun and began "fumbling" with it and proceeded to throw her cell phone across the store. Ms. Shortle then took one of the customer service representative card's and began reading the information while she "zapped" the stun gun; then Ms. Shortle left the store. This conduct constitutes a violation of ORS 678.111 (1) (f), (i) and (2) and OAR 851-045-0015 (5) (b).
11. On or about September 12, 2006 Ms. Shortle contacted Dr. G wanting the number of another doctor. During this conversation Dr. G reported that Ms. Shortle rambled in a disjointed fashion making

delusional statements. This conduct constitutes a violation of ORS 678.111 (1) (f), (i) and (2);and OAR 851-045-0015 (5) (b).

12. On or about September 20, 2006 Ms. Shortle contacted her employer stating that she was applying for short term disability. She also stated that she was not ready to resign but would not be working there any longer. Ms. Shortle again was noted speaking rapidly, not focusing on the conversation, and context of her conversation seemed to jump around. On or about October 6, 2006 Ms. Shortle wrote a formal letter resigning her position. This conduct constitutes a violation of ORS 678.111 (1) (f), (i) and (2);and OAR 851-045-0015 (5) (b).
13. On or about October 14, 2006 Ms. Shortle was pulled over by the Washington State Patrol (WSP). They were alerted by several citizens that a vehicle was driving erratically with its front bumper dragging on the ground; turning its headlights off and on; and one citizen stated that the vehicle actually tried to force his vehicle off the roadway. When the WSP pulled over the vehicle in question Ms. Shortle was the driver and noted to be alone in the car. Ms. Shortle proceeded to fail to follow the directions of the officer and was eventually arrested for Failure to Give Officer Information and Resisting Arrest. Ms. Shortle was noted fumbling in her purse and upon search of her purse she was noted to be carrying a stun gun, a pair of scissors, and can of aerosol irritant. The officers believed that Ms. Shortle had been reaching into her purse in an attempt to locate the stun gun. While in jail Ms. Shortle assaulted a female corrections officer. Additionally, on October 16, 2006 Ms. Shortle called RR and informed him she was in jail in Washington. Ms. Shortle requested that he call her realtor to cancel an appointment she had set up and call her attorney SB and tell him she was in jail. This conduct constitutes a violation of ORS 678.111 (1) (f), (i) and (2);and OAR 851-045-0015 (5) (b).
14. The evidence set forth above causes this Board to conclude that the certificate holder /licensee currently has untreated mental illness that has impaired her ability to practice as a PMHNP and RN. Currently, Cynthia Lou Shortle can function as an independent provider in the State of Oregon and can write prescriptions as she currently has prescriptive authority.
15. The Board finds that the certificate holder and licensee, Cynthia Lou Shortle poses a serious danger to the public health, safety, and welfare including a danger to the health and safety of any patients for whom she might provide nursing care under the authority of her PMHNP certificate and RN license.

### CONCLUSION

Based upon the foregoing findings the Board concludes that Cynthia Lou Shortle has violated the statutes and rules of the Board and poses a serious danger to the public health, safety, and welfare unless her certificate and license is immediately suspended pursuant to ORS 183.430 (2), ORS 678.021, ORS 678.111 (1) (f), (i) and (2);and OAR 851-045-0015 (5) (b) which reads as follows:

Order emergency suspension  
Cynthia Lou Shortle

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**183.430 Hearing on refusal to renew license; exceptions.**

(2) In any case where the agency finds a serious danger to the public health or safety and sets forth specific reasons for such findings, the agency may suspend or refuse to renew a license without hearing, but if the licensee demands a hearing within 90 days after the date of notice to the licensee of such suspension or refusal to renew, then a hearing must be granted to the licensee as soon as practicable after such demand, and the agency shall issue an order pursuant to such hearing as required by ORS 183.310 to 183.550 confirming, altering or revoking its earlier order. Such a hearing need not be held where the order of suspension or refusal to renew is accompanied by or is pursuant to, a citation for violation which is subject to judicial determination in any court of this state, and the order by its terms will terminate in case of final judgment in favor of the licensee. [1957 c.717 §8 (3), (4); 1965 c.212 §1; 1971 c.734 §11]

**678.111 Causes for denial, revocation, suspension of license or probation, reprimand or censure of licensee**

In the manner prescribed in ORS chapter 183 for a contested case:

(1) Issuance of the license to practice nursing, whether by examination or by endorsement, of any person may be refused or the license may be revoked or suspended or the licensee may be placed on probation for a period specified by the Oregon State Board of Nursing and subject to such condition as the board may impose or may be issued a limited license or may be reprimanded or censured by the board, for any of the following causes:

(i) Physical or mental condition that makes the licensee unable to conduct safely the practice for which the licensee is licensed.

(2) A certificate of special competence may be denied or suspended or revoked for the reasons stated in subsection (1) of this section.

**Conduct Derogatory to the Standards of Nursing Defined 851-045-0015**

Nurses, regardless of role, whose behavior fails to conform to the legal standard and accepted standards of the nursing profession, or who may adversely affect the health, safety, and welfare of the public, may be found guilty of conduct derogatory to the standards of nursing. Such conduct shall include, but is not limited to, the following:

(5) Conduct related to impaired function:

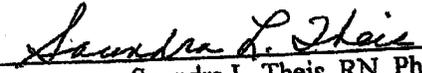
(b) Practicing nursing when unable/unfit to perform procedures and/or make decisions due to psychological or mental impairment as evidenced by documented deterioration of functioning in the practice setting and/or by the assessment of a health care provider qualified to diagnose mental condition/status.

**ORDER**

IT IS HEREBY ORDERED, that the PMHNP certificate and RN license of Cynthia Lou Shortle be suspended effectively immediately and it shall remain suspended pending further order of the Board.

Dated this 8<sup>th</sup> day of November 2006

**FOR THE BOARD OF NURSING  
OF THE STATE OF OREGON**

  
\_\_\_\_\_  
Sandra L. Theis, RN, PhD  
President

**NOTICE OF RIGHTS  
TO REQUEST HEARING ON IMMEDIATE SUSPENSION**

1. You have the right to contest the Board's action in immediately suspending your certificate and license to practice as a PMHNP and RN by having a hearing.
2. To have a hearing, you must request one in writing within 90 days of the date this Order is mailed to you. If you request a hearing, one will be scheduled before a hearings officer to review this matter. Following a hearing the Board will determine whether this Order should be confirmed, altered or revoked.
3. If you do not request a hearing within 90 days of the date this Order is mailed to you, you waive your right to a hearing.
4. If you request a hearing, you are entitled to appear at the hearing, to be represented by counsel, to testify and to call witnesses in your behalf.
5. Following the hearing the Board will issue an Order containing the Board's final decision. You may appeal that Order to the Oregon Court of Appeals