BEFORE THE NORTH CAROLINA STATE BOARD OF DENTAL EXAMINERS

In The Matter Of:  
SUSAN T. ALLEN, R.D.H.  
(License No. 2458)  

) ) FINAL AGENCY DECISION

THIS MATTER was heard on December 12, 2008 before the North Carolina State Board of Dental Examiners (the Board) pursuant to G.S. §§ 90-229 and 150B-38 and 21 N.C.A.C. 16N .0504 of the Board's Regulations. The hearing panel of the Board consisted of Board members Dr. C. Wayne Holland, presiding; Dr. Joseph Burnham, Dr. Millard Wester, Dr. Brad C. Morgan, and Ms. Jennifer Sheppard. Board members Dr. Ronald K. Owens, Dr. W. Stan Hardesty and Ms. Zannie Efird did not participate in the hearing, deliberations or decision of this matter. The Respondent, Susan T. Allen, represented herself. Carolin Bakewell represented the Investigative Panel.

Based upon the stipulations of the parties and the evidence produced at the hearing, the Board enters the following:

FINDINGS OF FACT

1. The North Carolina State Board of Dental Examiners is a body duly organized under the laws of North Carolina and is the proper party to bring this proceeding under the authority granted it in Chapter 90 of the North Carolina General Statutes (the Dental Practice Act).

2. Susan T. Allen, (Respondent), was licensed as a Registered Dental Hygienist in North Carolina on July 14, 1980 and holds license number 2458.
3. Respondent has remained licensed to practice dental hygiene in North Carolina and was subject to the Hygiene Practice Act and the Board’s Rules and Regulations at all times relevant hereto.

4. At all relevant times, Respondent was engaged in the practice of dental hygiene in Raleigh, North Carolina.

5. Respondent’s consumption of alcohol has increased over the years and was a contributing factor in her divorce approximately 10 years ago.

6. In the spring of 2007, Respondent and members of her family shared a beach cottage for a week. During this visit, Respondent’s sister, Laurie Cherest, (Ms. Cherest), noted that Respondent had trouble maintaining her balance and was irritable and “shaky” in the morning. Ms. Cherest also discovered a bag containing 40 to 50 miniature bottles of alcohol in Respondent’s bedroom. Most of the bottles were empty.

7. Respondent’s mother and Ms. Cherest met Respondent at her home one day after work in October 2007 and asked Respondent to get counseling for her alcohol problem. Respondent angrily refused, denied that she had a problem, and demanded that her mother and sister leave the premises.

8. After the confrontation in October 2007, Respondent refused to accept telephone calls from her relatives and did not participate in any holiday gatherings with her family, although she was invited to do so.

9. Respondent continued to consume excessive amounts of alcohol on weekends and at night.
10. In the spring of 2008, Respondent lost custody of her teen-age daughter as a direct result of her alcohol abuse.

11. After Respondent lost custody of her daughter, Respondent's mother and Ms. Cherest wrote a letter to Respondent and again asked her to get counseling for her alcoholism. They advised her that if she did not get treatment, they would report her to the Caring Dental Professionals Program (CDP).

12. Respondent became very angry at this request and refused to get counseling. Respondent's relatives contacted CDP in early May 2008.

13. On May 17, 2008, Margie Graves, the Executive Director of CDP, telephoned Respondent and asked her to undergo an evaluation for alcohol dependence on Monday, May 19. Although Respondent at first agreed to go for the evaluation, she telephoned Ms. Graves later in the day on May 17, refused to go to the evaluation and threatened to "report" Ms. Graves for "forcing" her to get an evaluation. During this conversation, Respondent was angry and abusive and slurred her words.

14. Meanwhile, Respondent's mother and Ms. Cherest became alarmed when Respondent indicated that she had taken some pills and vomited in her bed and was unable to attend her daughter's dance later that day.

15. Respondent's mother and Ms. Cherest went to Respondent's home on the evening of May 17 to check on her. When they arrived, Respondent was so intoxicated that she was barely able to stand. Her trousers were unbuttoned and her speech was slurred.
16. Ms. Cherest telephoned EMS, which transported Respondent to Rex Hospital in Raleigh, where she was involuntarily committed.

17. Respondent’s blood alcohol level at the time she was admitted to Rex was .30. Respondent would have had to have approximately eight five-ounce glasses of wine in her system to register a .30 blood alcohol concentration.

18. Respondent told the physicians at Rex that she had only consumed four glasses of wine on May 17 and that her usual intake of wine was from one to two glasses of wine per night.

19. Tests conducted at Rex indicated that Respondent had been drinking heavily for at least three months prior to her admission on May 17, 2008.

20. After she became sober, Respondent voluntarily signed an evaluation contract with CDP and agreed to go to Pavillon for in-patient treatment.

21. Respondent was discharged from Rex on May 18, 2008 with a diagnosis of alcohol dependence. She was transported from Rex to Pardee Hospital to complete detoxification.

22. On May 21, 2008, Respondent went to Pavillon as scheduled, but left within a very short time against medical advice without completing her treatment.

23. On May 23, 2008, the Board summarily suspended the Respondent’s dental hygiene license. Respondent’s hygiene license has not been reinstated.
24. Respondent did not return telephone calls from CDP and is no longer a participant in CDP. CDP does not support Respondent’s return to the practice of hygiene.

25. Respondent has not received any additional treatment for her alcoholism since her departure from Pavilion. She continues to deny that she has any problem with alcohol and insists that her personal and professional problems are the result of a “conspiracy” by her family.

26. Although two of Respondent’s former employers testified that she had never consumed alcohol at work to their knowledge and that she was a good employee, neither socialized with Respondent or knew what she did on weekends or at night. One of the employers who testified on Respondent’s behalf last worked with Respondent more than four years ago and the other last worked with her in May 2008. Both of Respondent’s former employers agreed that Respondent should receive treatment before resuming the practice of dental hygiene.

27. Respondent produced no medical evidence supporting her testimony that she does not abuse alcohol and is not alcohol dependent.

28. Respondent refused to agree to abstain from drinking alcohol or to receive treatment as a condition of the reinstatement of her hygiene license.

29. Alcoholism is a progressive, potentially fatal disease and without appropriate treatment, it is very unlikely that Respondent will recover. Without treatment, Respondent’s condition will likely worsen.
30. On September 17, 2008, Respondent was properly served with the Investigative Panel’s First Request for Admissions in this matter. Among other things, Respondent was asked to admit or deny that she was a habitual user of alcohol such that she was impaired in her ability to practice dental hygiene within the meaning of G.S. 90-229(a)(4).

31. Respondent failed to file any response to the First Request for Admissions served upon her on September 17, 2008.

Based upon the evidence produced at trial and the record herein, the Board makes the following:

CONCLUSIONS OF LAW

1. The Board has jurisdiction over the person of the Respondent and the subject matter of this proceeding.

2. By failing to respond to the Investigative Panel’s First Request for Admissions Respondent admitted as a matter of law that she is a habitual user of intoxicants, to the extent that her ability to practice dental hygiene is impaired, in violation of G.S. 90-229(a)(4) and (6).

3. Even if the issue had not been judicially admitted by virtue of the Respondent’s failure to respond to the Investigative Panel’s First Request for Admissions, the evidence herein establishes that Respondent is a habitual user of intoxicants to the extent that her ability to practice dental hygiene is impaired, in violation of G.S. 90-229(a)(4) and (6).

4. Respondent violated her CDP contract by failing to complete treatment for alcohol dependence and by failing to return calls from the CDP.
5. By violating her CDP contract, Respondent engaged in unprofessional conduct as defined by 21 NCAC 16V .0102 in violation of G.S. 90-229(a)(12) and (6).

Based upon the foregoing Findings of Fact and Conclusions of Law, the Board hereby enters the following

ORDER OF DISCIPLINE

In determining the appropriate discipline, the Board concluded that imposition of lesser discipline would not sufficiently protect the public for the following reasons:

   a) Respondent has refused to abstain from the use of alcohol and insists that she does not have a problem with alcohol.

   b) Respondent has refused to receive treatment, despite her diagnosis of alcohol dependence and despite evidence that her condition will likely worsen if she does not seek treatment.

   c) The Dental Board is unwilling to place the public safety at risk by permitting Respondent to resume the practice of dental hygiene until she has presented evidence that she has taken steps to deal with her addiction and has established a reasonable period of sobriety.

WHEREFORE, based upon the foregoing Findings of Fact and Conclusions of Law and pursuant to the authority set out in N.C. Gen. Stat. § 90-41(a), it is ORDERED that Respondent's license to practice dental hygiene in
North Carolina is hereby revoked. The Board will not consider any reinstatement petition from the Respondent until she can demonstrate that CDP is advocating for her return to the practice of hygiene in North Carolina.

This the 9th day of February, 2009.

[Signature]
Terry W. Friehle
Deputy Operations Officer
The N.C. State Board of Dental Examiners