

LOUISIANA STATE BOARD OF MEDICAL EXAMINERS

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BEFORE THE  
LOUISIANA STATE BOARD  
OF MEDICAL EXAMINERS

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No. 2022-I-198

IN THE MATTER OF:

CONSENT ORDER

LESLEY DUTREIX PESSON, LRT

*(Credential No. LRT.000743),  
Respondent*

The above-entitled proceeding was docketed for investigation by the Louisiana State Board of Medical Examiners (the "Board") following receipt of information indicating that Lesley Dutreix Pesson, LRT ("Ms. Pesson"), a respiratory therapist licensed by the Board to engage in respiratory therapy in the State of Louisiana, as evidenced by Certificate No. LRT.000743, was arrested by members of the St. Tammany Parish Sheriff's Office on or about February 27, 2022, and charged with one count of misdemeanor domestic abuse battery and one count of interfering with emergency communication. At all times relevant to the facts and matters alleged, herein, Ms. Pesson was engaged in the practice of respiratory therapy in and around Slidell, Louisiana.

Investigation of the captioned matter was assigned to Lawrence H. Cresswell, III, D.O., J.D., Director of Investigations for the Board (the "DOI" or "Investigating Officer"). The investigation revealed that Ms. Pesson entered into a pre-trial intervention diversion program regarding the pending charges for a period of 12 months (April 22, 2022, through April 21, 2023), with several conditions, including, *e.g.*, no illegal drug use, no alcohol consumption, random drug screens throughout the duration of the program, and 12 hours of anger management classes. In connection with the investigation, Ms. Pesson agreed to undergo an evaluation at a Board-approved facility to assess her fitness to practice as a respiratory therapist. Ms. Pesson underwent an addictionology assessment at a Board-approved facility on or about June 9, 2022. The results of this evaluation indicated that Ms. Pesson is safe to practice with reasonable skill and safety to patients, provided that she completely abstains from consuming alcohol, undergoes individual therapy for a minimum of 12 weeks to address alcohol use disorder, anger management, and burnout, and enters into a monitoring agreement. Ms. Pesson had previously entered into a monitoring agreement with the Allied Professionals Health Program ("APHP") in 2015 to address alcohol-related issues. The 2015 agreement was successfully completed in August 2018.

As evidenced by her subscription hereto, Ms. Pesson acknowledges the substantial accuracy of the foregoing information and that proof of such information upon administrative

evidentiary hearing would establish sufficient cause to take action with respect to her license pursuant to the Louisiana Respiratory Therapy Practice Act, La. R.S. 37:3351 *et seq.* ("the Act"), pursuant to La. R.S. 37:3358(A)(7).<sup>1</sup>

Recognizing her right to notice and administrative adjudication of any charges that may be filed in this matter, at which time she would be entitled to be represented by legal counsel, to call witnesses and to present evidence on her own behalf in defense or in mitigation of the charges made, and to a decision thereon by the Board based upon written findings of fact and conclusions of law, pursuant to La. R.S. 49:951 *et seq.*, Ms. Pesson nonetheless hereby waives her right to notice and formal adjudication and, pursuant to La. R.S. 49:955(D), consents to the entry of the Order set forth hereinafter. By her subscription hereto, Ms. Pesson also acknowledges that she waives any right to which she may be entitled pursuant to the Louisiana Administrative Procedure Act, La. R.S. 49:951 *et seq.*, or which otherwise may be afforded to her by law, to contest her agreement to or the force and effect of this document in any court or other forum relating to the matters referred to herein. By her subscription hereto, Ms. Pesson also hereby authorizes the Investigating Officer designated by the Board with respect hereto to present this Consent Order to the Board for its consideration and to fully disclose and discuss with the Board the nature and results of the investigation and she waives any objection to such disclosures under La. R.S. 49:960. Further, Ms. Pesson expressly acknowledges that the disclosure of information to the Board by the Investigating Officer shall be without prejudice to the Investigating Officer's authority to pursue formal administrative charges against her or to the Board's capacity to adjudicate such charges should the Board decline to approve this Consent Order.

Based upon the information provided, and upon the recommendation of the Investigating Officer, the Board hereby concludes that, consistent with its mandate under La. R.S. 37:1261, the interests of public health, safety, and welfare will be effectively served by entry of the Order set forth hereinafter by consent. Accordingly, in consideration of the foregoing and pursuant to the authority vested in the Board by La. R.S. 37:3358 and 49:955(D);

**IT IS ORDERED** that the license of Lesley Dutreix Pesson, as evidenced by Credential No. LRT.000743, shall be placed **ON PROBATION** for a period of five (5) years from the effective date of this Order, or for the duration of Ms. Pesson's APHP contract (executed on August 18, 2022), whichever occurs first (the "probationary period"), provided however, that Ms. Pesson's continuing exercise of any rights and privileges granted thereby, shall be conditioned upon and subject to her acceptance of and strict compliance with the following terms, conditions, and restrictions:

- 1. Allied Professionals Health Program Agreement, Reports to Board.** Ms. Pesson shall enroll in and continue to maintain a monitoring agreement with the Allied Professionals Health Program ("APHP"), for a period of no less than five (5) years.

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<sup>1</sup> "The board may deny, refuse to renew, suspend, revoke, or impose probationary conditions on a license if the licensee or applicant for license has been found guilty of unprofessional conduct which has endangered or is likely to endanger the health, welfare, or safety of the public. Such unprofessional conduct shall include: . . . (7) Habitual or recurring abuse of drugs, including alcohol, which affect the central nervous system, and which are capable of inducing physiological or psychological dependence." La. R.S. 37:3358(A)(7).

Ms. Pesson shall continue in, abide by and strictly adhere to all recommendations for ongoing treatment, therapy, and monitoring which are contained in such agreement, as well as those recommended by her treating physicians and those prescribed by any other health care provider involved in her care to the extent that they continue to follow her. Ms. Pesson shall, in addition, authorize and cause APHP to submit to the Board or its designee, not less frequently than quarterly, written and/or verbal reports, should the Board or its designee desire the latter, on her compliance with the terms, conditions, and restrictions of this Order, and her monitoring agreement during the probationary period.

2. **Maintenance of Complete Abstinence.** Ms. Pesson shall maintain complete and total abstinence from the use of alcohol, controlled and/or any mood-altering substance for the duration of the probationary period, except as may be prescribed by a treating physician for a *bona fide* medical condition. Ms. Pesson shall personally inform the Board's Probation and Compliance Officer, both orally and in writing, within forty-eight (48) hours of the prescription or administration of any controlled or mood-altering substance received by her from any physician for treatment of a *bona fide* medical condition.
3. **Drug and Alcohol Screens.** Ms. Pesson shall submit to periodic and unannounced blood, urine, saliva, hair collection and/or other screens, including EtG and PEth levels, to detect the presence of alcohol or other mood-altering substances for duration of the probationary period. Such screenings shall be random and shall occur at a frequency determined by the APHP. Unless and until this condition is modified or rescinded by the Board or its designee, Ms. Pesson shall authorize and cause such physicians or testing facilities to report the results of such drug screens to the Board or its designee not less frequently than quarterly throughout the probationary period and the accompanying time period set forth through her monitoring agreement with APHP.
4. **Participation in Required Alcoholics Anonymous Meetings.** Ms. Pesson shall participate in Alcoholics Anonymous ("AA") meetings at the specified frequency required by her monitoring agreement with APHP. Such AA meetings shall be gender specific/women's only AA groups, with Ms. Pesson establishing an AA gender specific/female home group and obtaining an AA female sponsor with at least three (3) years recovery within thirty (30) days of the effective date of this Order. Ms. Pesson shall submit verification that she has obtained such a sponsor to the Board's Probation and Compliance Officer no later than forty-five (45) days from the effective date of this Order.
5. **Participation in Individual Therapy.** Ms. Pesson shall schedule an appointment for individual therapy with a master's level or above therapist familiar with alcohol use disorder, anger management, and burnout who has been pre-approved by the Board or

its designee no later than thirty (30) days from the effective date of this Order, and shall submit verification of the same to the Board's Probation and Compliance Officer no later than forty-five (45) days from the effective date of this Order. Ms. Pesson shall thereafter participate in at least one session on a weekly basis for a minimum of twelve (12) weeks, or longer if recommended by the therapist. Ms. Pesson's therapist shall furnish quarterly fitness for duty statements to the Board or its designee so long as Ms. Pesson's participation in individual therapy sessions continues to be recommended by her approved therapist.

6. **Board Access to Treatment Records and Reports.** Ms. Pesson shall and does by her subscription hereto authorize any physician, healthcare professional or any institution at which she undergoes treatment, as well as any physician under whose care she may come at such an institution, who has or may hereafter evaluate, diagnose, treat or monitor her, to provide to the Board or its designee with copies of all medical reports relating to Ms. Pesson's history, examination, evaluation, diagnosis, treatment and prognosis and to provide the Board or its designee with written and/or oral reports relative thereto. Ms. Pesson expressly waives any privilege that may otherwise be afforded the disclosure of such records pursuant to state or federal law and acknowledges that she shall immediately provide the Board, or its designee written authorization to obtain such records upon request.
7. **Notification to Employers and Reports from Supervisors.** Ms. Pesson shall provide a copy of this Consent Order to each supervising physician, hospital, clinic, facility or other employer or prospective employer at which or for whom she provides services as a respiratory therapist in this state. Upon request of the Board's Probation and Compliance Officer, Ms. Pesson shall immediately execute and provide, as may be necessary, authorization to obtain all employment records pertaining to her from any hospital, institution or other health care entity where she is employed.
8. **Cooperation with Board's Probation and Compliance Officer and APHP.** Ms. Pesson shall immediately notify the Board's Probation and Compliance Officer of any change(s) in her current home and/or professional address, telephone number, email address, and/or facsimile transmission number, and she shall direct all matters required pursuant to this Order to the attention of the Board's Probation and Compliance Officer. Ms. Pesson shall cooperate with the Board's Probation and Compliance Officer and the APHP on all matters and inquiries pertaining to her compliance with the terms and conditions of this Consent Order, specifically including, without limitation, providing cooperation and assistance to the Board, its designee, or the APHP in obtaining any records required under this Consent Order.
9. **Absence from the State/Practice/Effect on Probation.** Should Ms. Pesson at any time be absent from the State of Louisiana, relocate to and/or take up residency in another state or country, or discontinue practicing as a licensed respiratory therapist for

a period of thirty (30) days or more she will so advise the Board or its designee in writing. In such instance, the probationary period and all terms, conditions and restrictions thereof shall be deemed interrupted and extended and shall not commence again until Ms. Pesson notifies the Board or its designee in writing that she has resumed the practice of respiratory therapy in Louisiana.

- 10. Probation Monitoring Fee.** For each year of the probationary period, Ms. Pesson shall pay the Board an annual probation monitoring fee of three hundred and 00/100 dollars (\$300.00). Payment of the initial fee shall be due not later than sixty (60) days from the effective date of this Order. All subsequent annual payments shall be due on or before the anniversary date of the initial fee payment.
- 11. Self-Reporting of Violations.** Ms. Pesson shall immediately self-report in writing to the Board or its designee any violation or failure to adhere to the terms, conditions, or restrictions of this Consent Order. Furthermore, Ms. Pesson shall immediately self-report in writing to the Board any personal action or inaction which constitutes a violation of the Act.
- 12. Effect of Violation/Sanction.** By her subscription hereto, Ms. Pesson acknowledges that her receipt of written notification that the Board has received reliable information indicating her failure to comply with the requirements set forth by this Order in any respect shall, without the need for formal hearings or for providing her with any right to which she may otherwise be entitled pursuant to Louisiana Administrative Procedure Act, La. R.S. 49:951, *et seq.*, or which otherwise may be afforded to her by law, constitute her irrevocable consent to the immediate suspension of her license to practice respiratory therapy in this state pending a hearing before the Board and the conclusion of the administrative proceeding by issuance of a final decision following administrative adjudication of such charges.
- 13. Certification of Compliance with Probationary Terms.** At least sixty (60) days prior to the conclusion of the probationary period imposed herein, Ms. Pesson shall provide the Board with an affidavit certifying that she has complied with each of the terms of probation imposed by this Order. The probationary period and all its terms, conditions and restrictions shall be, and shall be deemed to be, extended, and continued in full force and effect pending Ms. Pesson's compliance with the requirements of this provision.
- 14. Effective Date.** This Consent Order shall be effective the date it is approved and accepted by the Board as shown by the signature of its representative below.


**IT IS FURTHER ORDERED** that any violation of or failure of strict compliance with any of the terms, conditions, or restrictions set forth by this Order by Ms. Pesson shall be deemed adequate and sufficient cause, upon proof of such violation or failure, for such other action against

Ms. Pesson's license to practice respiratory therapy in the State of Louisiana as the Board may deem appropriate, as if such violations were enumerated among the causes provided in La. R.S. 37:3358.

**IT IS FURTHER ORDERED** that this Consent Order shall be and shall be deemed to be a public record.

New Orleans, Louisiana, this 24<sup>th</sup> day of October, 2022.

**LOUISIANA STATE BOARD  
OF MEDICAL EXAMINERS**

By:   
**LESTER W. JOHNSON, M.D.**  
*President*

*(Acknowledgement and Consent on following page)*

**ACKNOWLEDGMENT  
AND CONSENT**

STATE OF Louisiana  
PARISH/COUNTY OF St. Tammany Parish

I, LESLEY DUTREIX PESSON, LRT, hereby acknowledge that I have had the opportunity to seek the advice and guidance of legal counsel with respect to this Consent Order and that all its terms and conditions have been fully explained to me and/or that I fully understand them. I further acknowledge that I approve, accept, and consent to entry of the above and foregoing Order without duress and of my own free will and accord, this 19 day of 9/22, 2022.

Lesley Pesson  
LESLEY DUTREIX PESSON, LRT

WITNESSES:

[Signature]  
Signature

Amy Lewis  
Typed Name

360 Emerald for. Blvd.  
Street Address

Covington LA 70433  
City/State/Zip Code

[Signature]  
Signature

**DANA CAMPO**

Typed Name

360 Emerald forest Blvd  
Street Address

Covington, LA 70433  
City/State/Zip Code

Sworn to and subscribed before me this 19 day of Sept, 2022, in the presence of the two stated witnesses.

[Signature]  
Notary Public (Signature)

Name: Lauren Ducote, Notary Public #133260

Notary/Bar No.: \_\_\_\_\_

Commission expires: My Commission is for Life

