NOT FOR PUBLICATION WITHOUT THE
APPROVAL OF THE APPELLATE DIVISION

SUPERIOR COURT OF NEW JERSEY
APPELLATE DIVISION
DOCKET NO. A-5300-11T2
A-1837-13T2

IN THE MATTER OF THE SUSPENSION
OR REVOCATION OF THE LICENSE OF

J.R., R.N.
License No. 26NO11975400

TO PRACTICE NURSING
IN THE STATE OF NEW JERSEY.

Argued October 14, 2015 – Decided February 24, 2016

Before Judges Hoffman and Leone.

On appeal from the State Board of Nursing, Department of Law & Public Safety, Division of Consumer Affairs.

J.R., appellant, argued the cause pro se.

Barbara J.K. Lopez, Deputy Attorney General, argued the cause for respondent, New Jersey State Board of Nursing (John J. Hoffman, Acting Attorney General, attorney; Andrea M. Silkowitz, Assistant Attorney General, of counsel; Susan Carboni, Deputy Attorney General, on the brief).

PER CURIAM

In these appeals, appellant J.R. challenges two orders by the New Jersey State Board of Nursing (Board). We listed these appeals back-to-back, and now consolidate them for purposes of this opinion. We dismiss as moot appellant's first appeal under

Docket No. A-5300-11, and affirm the discipline imposed by the Board in appellant's second appeal under Docket No. A-1837-13.

I.

Beginning in May 2010, appellant was hired as a Registered Nurse in the Intensive Care Unit (ICU) at the Hospital. In August 2010, appellant received an "Employee Disciplinary Action Notice," which stated she was in violation of hospital policy for substandard work, failure to comply with hospital policy, and unprofessional conduct. The "Corrective Action Recommended" portion of the Notice stated that she was receiving a "written warning," that her probationary period would be extended, and that she was placed on a performance improvement plan.

On November 29, 2010, appellant received an "Employee Counseling/Disciplinary Action Notice" for substandard work, patient abuse, and unprofessional conduct. As a result of this incident, the corrective action recommended was "suspension with intent to terminate."

On December 1, 2010, appellant received another "Employee Counseling/Disciplinary Action Notice" for unprofessional conduct and disruptive behavior. The corrective action recommended was "suspension with intent to terminate."

The Hospital placed appellant on administrative leave on December 1, 2010, and suspended her pending a final

investigation on December 7, 2010. The Hospital instructed appellant to "write her response to the issues and call Human Resources (HR) or the Director" of the Hospital by December 13, 2010. Appellant failed to submit any written response, call HR or the Director, or return phone calls. As a result, the Hospital terminated appellant's employment on December 13, 2010.

As a result of appellant's discharge, the Hospital reported her conduct to the Board on December 22, 2010, pursuant to N.J.S.A. 26:2H-12.2b(a)(1).[1] The Hospital's letter to the Board summarized all of appellant's alleged instances of substandard care, patient abuse, and unprofessional conduct.

On August 8, 2011, the Board sent appellant a "complaint" letter. In its letter, the Board summarized the Hospital's allegations and requested appellant's written response within ten days, as required by N.J.S.A. 45:1-21(e) and N.J.A.C. 13:45C-1.3.

On September 9, 2011, appellant submitted a rambling twelve-page response. Initially, appellant did not address the Board's questions. Instead, she discussed difficulties in her

[1] N.J.S.A. 26:2H-12.2b(a)(1) requires a health care entity to notify the Board if a healthcare professional "for reasons relating to the health care professional's impairment, incompetency, or professional misconduct, which incompetency or professional misconduct relates adversely to patient care or safety: . . . (c) has been discharged from the staff[.]"

personal life. She also repeatedly alleged she was being targeted by the Hospital in an attempt to keep her from voting in an election to unionize, and in retaliation for her complaints about short staffing conditions.

After approximately five single-spaced pages of such accusations, appellant began discussing the alleged instances of substandard care and violations of hospital policy. Appellant wrote that she would "**highlight in BOLD certain important facts**" and that when she would "begin to address each of the allegations in the Complaint, [she] will UNDERLINE." (emphasis in original). Appellant did not take responsibility for any of the instances of substandard care. She "admitted being upset" and that she "had many problems with support staff." Appellant claimed her disciplinary meetings were "terror sessions," that she was taping her encounters "to protect [herself] against lies and unfounded accusations," and that the Hospital had tried to "lure" her to commit violations.

Appellant concluded her letter by demanding that her accusers be identified because their claims were "bordering on criminal." Appellant alleged the Hospital had violated her rights, discriminated against her, harassed her in the workplace and at home, made false claims against her, committed libel and slander, and retaliated against her.

After receiving her letter, the Board subpoenaed appellant to give testimony on January 11, 2012. See N.J.S.A. 45:11-24(d)(16). At that investigative inquiry, appellant was reminded she had the opportunity to be represented by an attorney. Appellant chose to proceed without counsel. In her testimony, appellant reiterated her claims that she was terminated for speaking out and because the Hospital inaccurately believed she was "union salt," hired to tip the organizing vote in favor of the union. She then engaged in a confusing narrative about her alleged violations. She admitted she had taken serious issue with the actions of staff members and got into an argument with other nurses. She also admitted raising her voice to a physician. Appellant then began offering unsolicited information about several personal family issues.

After the hearing, and after learning from counsel for the Board that it was considering ordering appellant to undergo a psychological evaluation, appellant sent the Board a supplemental letter on March 1, 2012, to defend herself "from any derogatory and unwarranted actions." Appellant acknowledged that the first five pages of her September 9, 2011 written submission "may seem disordered and fragmented," and that "the Board must think [she] suffer[s] from schizophrenia." Appellant argued the first five pages were just background information,

citing the lack of "underlining." Appellant then went into a detailed analysis of the structure of her September 9, 2011 letter to the Board. Appellant also acknowledged that her testimony before the Board may have reflected anger and that she had been "flustered."

On March 16, 2012, appellant sent another letter to the Board, reiterating the same arguments. Unprompted, appellant speculated that a complaint about her mental health had been made to the Board by an alcoholic relative, another relative who had assaulted her, a third relative who had moved away, or a drug-using friend she knew from grammar school. Appellant then rebutted a non-existent assertion that she abused a relative. Culminating her uninvited revelation of highly personal information about herself and others, appellant opined that her family was "very dysfunctional." Appellant concluded her letter to the Board by criticizing how the Hospital and the Board handled the matter.

On April 4, 2012, the Board issued a provisional order in which it found:

> the circumstances leading to [appellant's] termination, [her attached] answers to the Demand for Written Statement Under Oath, [her attached] testimony at the January 12 investigative inquiry, and [her attached] supplemental written statements made in March 2012 demonstrate that she may be incapable, for medical or other good cause,

> of discharging the functions of a licensee in a manner consistent with the public's health safety and welfare within the intendment of N.J.S.A. 45:1-21(i). Pursuant to N.J.S.A. 45:1-22(f), the Board may order any person, as a condition of continued licensure, to submit to a psychological evaluation which may be required to evaluate whether continued practice may jeopardize the safety and welfare of the public.

The Board provisionally ordered appellant to "undergo a comprehensive mental health evaluation under the auspices of the Recovery and Monitoring Program of New Jersey ("RAMP"), or other Board approved evaluator, within forty-five (45) days of the date of filing of any Final Order of Discipline in this matter." The Board notified appellant that the provisional order could be finalized in thirty days unless she "request[ed] a modification or dismissal" by setting forth in writing why the "findings and conclusions should be modified or dismissed." In response, appellant, now through an attorney, sent a letter to the Board opposing a psychological evaluation.

On June 18, 2012, the Board issued an incorrectly-titled "Final Order of Discipline" in which it reiterated its findings in the Provisional Order. The Board found:

> the apparently disordered thought processes manifested in [appellant's] testimony and rambling written submissions, much of it focused at length on irrelevancies (such as whether or not she had underlined material in her written submissions) were so striking that an objective psychological evaluation

> by an independent expert was clearly appropriate. . . . The Board thus considered [appellant's] submissions, and her attorney's response, and determined that no reasonable person could read those submissions and that testimony without having questions about the judgment and reasoning of this highly intelligent licensee. The ability to exercise judgment is crucial to the practice of nursing, and the wellbeing of vulnerable patients may be placed in jeopardy where that judgment is impaired or defective.

"[T]o protect the safety of the public," the Board made final the provisional order requiring appellant to undergo the comprehensive mental health evaluation.

On June 28, 2012, appellant filed a notice of appeal in Docket No. A-5300-11, challenging the June 18, 2012 "Final Order of Discipline." On July 24, 2012, the Board re-issued the June 18, 2012 order with the title "Corrected Final Order," because it had been incorrect to title it as a "Final Order of Discipline" when it did not impose any discipline.[2]

Meanwhile, appellant underwent a psychological evaluation administered by Dr. Joseph Selm, a Board-approved evaluator. Dr. Selm interviewed appellant twice, and administered the "Millon Clinical Multiaxial Inventory-3" test (MCMI). Dr. Selm issued a report to the Board on July 29, 2012. As the Board

[2] We will refer to the June 18, 2012 order and July 24, 2012 order collectively as the "Corrected Final Order."

later noted, Dr. Selm expressed concern over J.R.'s judgment and insight, her difficulty with peer and supervisory relationships, her rationalization of her actions at the Hospital, and her "lack of personal accountability and persistent self-justification which impeded her in interactions in the workplace."[3] Because Dr. Selm believed appellant's prior ability to practice safely and competently had been degraded, he recommended appellant receive psychotherapy treatment by a mental health professional, continued monitoring for treatment progress and compliance, and limited practice in high stress environments such as the ICU.

On September 28, 2012, the Board issued a Provisional Order of Discipline, in which it provisionally found, based on appellant's written submissions, her testimony at the investigative inquiry, and the evaluation by Dr. Selm, that "in light of [appellant's] lack of insight and judgment in the practice of nursing, [she] is presently unable to perform the functions of a licensee within the intendment of N.J.S.A. 45:1-

[3] In addition, Dr. Selm's report contained extensive additional information about appellant's mental health, including his analysis of her written submissions and testimony before the Board, his opinion of her mental status during the interviews, his interpretation of her answers in the MCMI test, and his diagnostic impressions. We do not replicate that information in our opinion, but note it provides further support for the Final Order of Discipline.

21(i)." As a result, the Board indicated appellant's nursing license was provisionally suspended for a minimum period of one year. The Board also provisionally ordered appellant to undergo therapy on a regular basis and have the therapist furnish quarterly progress reports to the Board. As before, the Board gave appellant thirty days to seek modification or dismissal of the Provisional Order of Discipline.

Having terminated her attorney's representation, appellant submitted a pro se written response to the Board regarding the Provisional Order of Discipline. Appellant again gave her rendition of the alleged violations and attempted to explain her past written submissions and testimony. She claimed Dr. Selm's report was biased. Appellant argued that the Board had refused to consider her evidence, that it had committed numerous procedural violations, and that the Board's actions have caused her undue hardship.

On February 15, 2013, the Board issued a Final Order of Discipline. The Board found that appellant's written responses to the Provisional Order of Discipline "continue to exhibit an apparent lack of comprehension of the Board's clearly stated concerns, as well as persistent attempts to blame others – colleagues, relatives, attorneys – for any conflict or criticism that arises." The Board found that all of appellant's written

and oral communications with the Board had not "alleviated the Board's concerns regarding her poor judgment and insight." Thus, the Board reiterated the findings of the Provisional Order of Discipline. The Board concluded:

> The ability to exercise judgment is crucial to the practice of nursing, and the wellbeing of vulnerable patients may be placed in jeopardy where that ability is impaired or defective. [Appellant's] consistently disordered thought process manifested in her testimony and rambling submissions, much of it focused at length on irrelevancies, is compelling, and unquestionably forms a predicate upon which to support a finding that [she], absent therapy and supervision, is incapable of discharging the functions of a licensee in a manner consistent with the public's health, safety and welfare within the intendment of [N.J.S.A. 45:1-21(i)].
>
> The Board finds that a period of suspension, mandated supervised employment and ongoing psycho-therapy is a well-balanced resolution which provides sufficient protection to the public while at the same time providing [appellant] a pathway back into practice.

The Final Order of Discipline suspended appellant's nursing license for at least one year, absent an appropriate request for reinstatement, and required her to undergo therapy on a regular basis and have her therapist issue quarterly reports to the Board. The Board advised appellant that at the end of one year, she could petition the Board for a termination of suspension,

demonstrating compliance with the terms of the Final Order of Discipline.

Appellant has failed to undergo therapy on a regular basis or provide reports to the Board, as required by the Final Order of Discipline. As a result, her license remains suspended.

On February 14, 2014, appellant was granted leave to file as within time the notice of appeal in Docket No. A-1837-13, challenging the February 15, 2013 Final Order of Discipline.

II.

Nursing is regulated by the Board of Nursing under N.J.S.A. 45:11-24 of the Uniform Enforcement Act (UEA), N.J.S.A. 45:1-14 to -27. N.J. State Ass'n of Nurse Anesthetists, Inc. v. N.J. State Bd. of Med. Exam'rs, 372 N.J. Super. 554, 565 (App. Div. 2004), aff'd, 183 N.J. 605 (2005). Pursuant to N.J.S.A. 45:11-24(d)(9), the Board "shall in its discretion investigate and prosecute all violations of provisions" of the UEA.[4] Moreover, after affording an opportunity to be heard, the Board may "[o]rder any person, as a condition for continued, reinstated or renewed licensure, to submit to any medical or diagnostic testing and monitoring or psychological evaluation which may be

[4] "The UEA was enacted to create uniform standards for 'license revocation, suspension and other disciplinary proceedings' by professional and occupational licensing boards." In re License Issued to Zahl, 186 N.J. 341, 352 (2006) (quoting N.J.S.A. 45:1-14).

required to evaluate whether continued practice may jeopardize the safety and welfare of the public." N.J.S.A. 45:1-22(f). Finally, the Board "may refuse to issue or may suspend or revoke any certificate, registration or license issued by the board" when there is proof that the applicant or holder "[i]s incapable, for medical or any other good cause, of discharging the functions of a licensee in a manner consistent with the public's health, safety, and welfare." N.J.S.A. 45:1-21(i).

"Courts generally afford substantial deference to the actions of administrative agencies such as the Board." Zahl, supra, 186 N.J. at 353. "Deference is appropriate because of the 'expertise and superior knowledge' of agencies in their specialized fields[.]" Ibid. (citation omitted). Moreover, this court accords "a 'strong presumption of reasonableness' to an administrative agency's exercise of its statutorily delegated responsibilities." Lavezzi v. State, 219 N.J. 163, 171 (2014) (citation omitted). Thus, "[o]ur scope of review of [the Board] is limited and highly deferential. So long as the Board's decision is supported by sufficient credible evidence in the record and was neither 'arbitrary, capricious, [nor] unreasonable,' it will be affirmed." In re Y.L., 437 N.J. Super. 409, 412 (App. Div. 2014) (quoting Brady v. Bd. of

Review, 152 N.J. 197, 210 (1997)). We must hew to this standard of review.

III.

Appellant's first appeal challenges the Board's Corrected Final Order, which required her to undergo a psychological evaluation. However, appellant did not seek a stay of that order, and has already undergone the psychological evaluation. Thus, appellant's challenge to the Board's order requiring her to undergo a psychological evaluation is moot. "Mootness is a threshold justiciability determination rooted in the notion that judicial power is to be exercised only when a party is immediately threatened with harm." Betancourt v. Trinitas Hosp., 415 N.J. Super. 301, 311 (App. Div. 2010). "'It is firmly established that controversies which have become moot or academic prior to judicial resolution ordinarily will be dismissed.'" N.J. Div. of Youth & Family Servs. v. W.F., 434 N.J. Super. 288, 297 (App. Div.) (citation omitted), certif. denied, 218 N.J. 275 (2014). Similarly, "'for reasons of judicial economy and restraint, courts will not decide cases in which . . . a judgment cannot grant effective relief.'" Cinque v. N.J. Dept. of Corr., 261 N.J. Super. 242, 243 (1993)

(citation omitted). Accordingly, we dismiss appellant's appeal under Docket No. A-0530-11.[5]

IV.

Even if we treat appellant's claims in her first appeal as renewed in her second appeal, they are meritless. In her first appeal, appellant claimed:

> 1. DID BOARD OF NURSING PROCEED WITH AN INVESTIGATION IN A TIMELY MANNER AS REQUIRED BY BOARD OF NURSING LAW N.J.S.A. 45:1-18(H)?
>
> 2. DID THE [BOARD] PROCEED PROPERLY WHEN THEY DENIED THE APPELLANT THE RIGHT TO PRESENT EVIDENCE IN THE APPELLANT'S DEFENSE, AT TESTIMONY BEFORE THE BOARD OF NURSING ON JANUARY 11, 2012?
>
> 3. DID BOARD OF NURSING PROCEED PROPERLY IN DENYING THE APPELLANT DISCOVERY FOR MORE THAN A YEAR?
>
> 4. DID BOARD OF NURSING PROCEED PROPERLY IN DENYING THE APPELLANT'S OPRA REQUEST?
>
> 5. DID THE BOARD OF NURSING ERR IN RECORDING (A) A DISCIPLINE AGAINST THE APPELLANT ON JUNE 18, 2012; (B) A RETRACTING OF THAT DISCIPLINE IN A "CORRECTED FINAL ORDER" ON JULY 23, 2012; AND (C) A "SECOND" FINAL ORDER OF DISCIPLINE ON FEBRUARY 15, 2013?
>
> 6. DID BOARD OF NURSING PROCEED PROPERLY IN ISSUING A FINAL ORDER OF DISCIPLINE IN JUNE OF 2012 AND PUBLICLY POSTING THE FULL

[5] Prior to briefing, respondent moved to dismiss this appeal. "Because our order denying respondents' motion to dismiss was interlocutory, it is subject to reconsideration." Hosp. Ctr. at Orange v. Guhl, 331 N.J. Super. 322, 331 (App. Div. 2000).

> TEXT OF THAT DOCUMENT ON THE INTERNET, CHARACTERIZING THE APPELLANT AS HAVING "DISORDERED THOUGHT PROCESSES" BEFORE REPORTS FROM ANY PSYCHOLOGISTS WERE OBTAINED BY THE BOARD OF NURSING?
>
> 7. DID [THE BOARD] VIOLATE APPELLANT'S RIGHT TO PRIVACY WITH REGARD TO APPELLANT'S "PROTECTED HEALTH INFORMATION" UNDER THE HIPAA PRIVACY RULE?
>
> 8. DID DEPUTY ATTORNEY GENERAL CARBONI, THE BOARD OF NURSING AND PSYCHOLOGIST SELM PROCEED PROPERLY IN DENYING THE APPELLANT THE RIGHT TO ACCESS THE APPELLANT'S MCMI III OWN PSYCHOLOGICAL TEST SCORES?
>
> 9. WAS THE MCMI PSYCHOLOGICAL TEST APPROPRIATELY INDICATED FOR THE APPELLANT AND INTERPRETED APPROPRIATELY?

We find appellant's claims 1 through 5 to be without sufficient merit to warrant discussion. R. 2:11-3(e)(1)(E). We add only that her claim that the Board delayed in answering her OPRA request is not properly before us. "Failure to respond within the allowable time" under OPRA "is the equivalent of a denial of the request." Spectraserv, Inc. v. Middlesex Cty. Util. Auth., 416 N.J. Super. 565, 577 (App. Div. 2010) (citing N.J.S.A. 47:1A-5(i)). "A person denied access may either institute an action in the Law Division or file a complaint with the Government Records Council." Ibid. (citing N.J.S.A. 47:1A-6). Because she cannot bring her OPRA claim initially in this court, we deny it without prejudice.

In her second appeal challenging the Final Order of Discipline, appellant claims:

> 1. FINDINGS OF FACT SHALL BE BASED ON THE EVIDENCE AND MATTERS OFFICIALLY NOTICED AND WITH APPELLANT HAVING AN OPPORTUNITY TO BE HEARD IN ACCORDANCE WITH THE ADMINISTRATIVE PROCEDURES ACT.
>
> 2. THE APPELLANT QUESTIONS THE VALIDITY OF A SECOND DISCIPLINE, WHILE THE FIRST DISCIPLINE WAS UNDER APPEAL.
>
> 3. BOARD'S ORDERS WERE RELIANT ON THE REPORT OF DR. SELM, WHICH CONTAINS A SIGNIFICANT ERROR, IS FURTHER BASED ON MISINFORMATION REGARDING TWO INCIDENTS AND IS ALSO PARTIALLY BASED ON THE MCMI TEST SCORES, WHICH TEST IS UNRELIABLE AND NOT INDICATED FOR THE APPELLANT.
>
> 4. BOARD'S ORDERS HAVE BEEN ARBITRARY, CAPRICIOUS, AND UNREASONABLE.

We find appellant's claim 2 in her second appeal to be without sufficient merit to warrant discussion. R. 2:11-3(e)(1)(E). We add the following regarding her remaining claims.

A.

Appellant notes that under the Administrative Procedures Act, "[f]indings of fact shall be based exclusively on the evidence and on matters officially noticed." N.J.S.A. 52:14B-9(f). Appellant argues that she was never provided notice regarding the Board's concerns about her mental health. Appellant's contention is belied by the record. Appellant

received official notice in the Board's complaint letter that she had been accused not only of practice-related problems but also of "unprofessional conduct in public forums as evidenced by inappropriate emotional displays in front of patients, visitors, staff, and physicians," and "'loud and explosive behavior'" in the hospital. Moreover, following her testimony, appellant was given notice numerous times by the Board and its counsel, both before and in its provisional orders, that the Board's focus had shifted from the practice-related problems to her mental health.

Appellant argues the Board erred by posting its provisional and final orders on the Internet. Under the UEA, "[i]n its discretion [the Board] may publish at such times as it shall determine a list of nurses licensed under this act, . . . and such other information as it shall deem advisable." N.J.S.A. 45:11-24(d)(11). The Board has a compelling interest in notifying the public, and future employers, of negative actions taken against a healthcare professional's nursing license.

Appellant cites a statute instructing the Board to create "an Alternative to Discipline Program for board licensees who are suffering from a chemical dependency or other impairment." N.J.S.A. 45:11-24.10(a). The Board created RAMP, under which "[a]ny information concerning the conduct of a licensee provided to the board" is confidential pending final disposition, and

remains confidential "[i]f the result of the inquiry or investigation is a finding of no basis for disciplinary action by the board." N.J.S.A. 45:11-24.10(f). However, although the Board's provisional order offered appellant the option of having her comprehensive mental evaluation conducted "under the auspices of" RAMP, she rejected this attempt to "force" her into the RAMP program, instead choosing to use a Board-approved evaluation and normal disciplinary procedures. Moreover, under those procedures, the Board found a basis for discipline.

Furthermore, the Board's publishing of its orders did not violate the Health Insurance Portability and Accountability Act (HIPAA), 42 U.S.C.A. §§ 1320d to 1320d-9. The information disclosed by the Board was not "created or received by a health care provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse." 42 U.S.C.A. § 1320d(4)(A), (6)(A). Rather, it was created and received by a State board which licenses and regulates health care providers. "The HIPAA privacy restrictions govern only covered entities and their business associates." Michelson v. Wyatt, 379 N.J. Super. 611, 623 (App. Div. 2005); see 45 C.F.R. § 160.103. Thus, the Board's disclosure of any "identifiable health information" about appellant did not violate 42 U.S.C.A. § 1320d-6.

B.

Appellant argues she was entitled to obtain her responses and scores in the MCMI evaluation administered by Dr. Selm. Appellant attempted to compel these documents by a motion filed in this court. This court denied her request, stating that "[i]t is not apparent why the testing data is relevant to any issues presented by this appeal." We remain of that view. Indeed, the Board indicated that at no time did it have access to appellant's answers or scores to the MCMI test and that it did not rely on her answers.

Appellant also argues the MCMI test was not clinically appropriate. She cites to several journal articles indicating its inappropriateness; however, she has not provided such articles to the court. In any event, the MCMI was only one component of Dr. Selm's evaluation. Moreover, the Board did not mention the MCMI test or scores in its Provisional and Final Orders of Discipline. Accordingly, appellant was not prejudiced by Dr. Selm's use of the MCMI test.

Appellant argues Dr. Selm's report contained a significant error, because it stated she had been previously suspended at another hospital. This disputed fact was mentioned only in the "History and Background" section of the report, was not a prominent factor in Dr. Selm's report, and was never cited by

the Board. Thus, any error in Dr. Selm's report regarding appellant's earlier employment was harmless.

Appellant stresses that Dr. Selm's report stated her thought processes at the time of the interviews were "logical, sequential and goal oriented." However, Dr. Selm's report also indicated that, during her interviews, appellant engaged in "tangential thinking," often transitioning "from topic to topic" in a manner that was "somewhat tangential to the topic of discussion." In any event, Dr. Selm opined that appellant's thought processes as demonstrated in her written submissions and testimony before the Board raised more serious concerns about appellant's mental health and ability to function as a nurse.

Moreover, Dr. Selm's report was just one factor in the Board's ultimate decision to suspend appellant's license. The Board read appellant's rambling submissions and witnessed her testimony first-hand, and it drew its own conclusion that appellant had "disordered thought processes." The Board's conclusion was not arbitrary or capricious.

C.

Based on the evidence before it, the Board determined appellant was "incapable, for medical or any other good reason, of discharging the functions of a licensee in a manner consistent with the public's health, safety, and welfare."

N.J.S.A. 45:1-21(i). As set forth above, there was substantial credible evidence to support the Board's conclusion. Particularly given our deferential standard of review, we cannot say that the Board's suspension of appellant's license was arbitrary, capricious, or unreasonable.

Appellant's remaining claims are without sufficient merit to warrant discussion. R. 2:11-3(e)(1)(E).

Accordingly, we affirm the Board's Final Order of Discipline in the appeal under Docket No. A-1837-13.

Dismissed as to A-5300-11.

Affirmed as to A-1837-13.