

**RESTRICTED DELIVERY CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

Before the Iowa Department of Public Health

IN THE MATTER OF: Robbie Hilzer 2560 1 st Avenue South, Apt. # 103 Altoona, IA 50009-1756 Certification: EMT-17-217-03	Case Number: 17-11-05 NOTICE OF PROPOSED ACTION REVOCATION
---	---

Pursuant to the provisions of Iowa Code Sections 17A.18, 147A.7, and Iowa Administrative Code (I.A.C.) 641—131.7, the Iowa Department of Public Health is proposing to **REVOKE** your EMS certification identified above.

The Department may revoke an EMS certification when it finds that the certificate holder has committed any of the following acts or offenses:

Failure to comply with a subpoena issued by the Department or failure to cooperate with an investigation of the Department. IAC 641-131.7(3)h.

Habitual intoxication or addiction to drugs.

(3) Obtaining, possessing, attempting to obtain or possess, or administering controlled substances without lawful authority. IAC 641—131.7(3)q.

Violating a statute of this state, another state, or the United States, without regard to its designation as either a felony or misdemeanor, which relates to the provision of emergency medical care, including but not limited to a crime involving dishonesty, fraud, theft, embezzlement, controlled substances, substance abuse, assault, sexual abuse, sexual misconduct, or homicide. A copy of the record of conviction or plea of guilty is conclusive evidence of the violation. IAC 641-131.7(3)t.

Failure to respond within 30 days of receipt, unless otherwise specified, of communications from the department which was sent by registered or certified mail. IAC 641-131.7(3)ab.

The following incident(s) resulted in issuance of this proposed action:

In November 2017 your employer, an EMS transport service, terminated you due to an arrest for operating while intoxicated – 2nd offense and possession of a schedule II controlled substance, to wit: methamphetamine.


You have failed to respond to a certified mail request (delivered January 24, 2018) to complete, or supply, a substance abuse evaluation to the Department in writing.

On March 5, 2018 you were convicted of operating under the influence – 2nd offense and possession of methamphetamine in Polk County, Iowa. You were placed on criminal probation for a period of two years.

You may apply to the department for reinstatement after one year from the effective date of this notice. When submitting an application for reinstatement, you must allege facts which, if established, will be sufficient to enable the Department to determine that the basis for the revocation of your certification no longer exists and that it will be in the public interest for the certification to be reinstated (IAC 641—131.9).

You have the right to request a hearing concerning this notice of disciplinary action. A request for a hearing must be submitted in writing to the Department by certified mail, return receipt requested, within twenty (20) days of receipt of this Notice of Proposed Action. The written request must be submitted to the Iowa Department of Public Health, Bureau of Emergency Medical Services, Lucas State Office Building, 321 E 12th St, Des Moines, Iowa 50319. If the request is made within the twenty (20) day time limit, the proposed action is suspended pending the outcome of the hearing. Prior to or at the hearing, the Department may rescind the notice upon satisfaction that the reason for the action has been or will be removed.

If no request for a hearing is received within the twenty (20) day time period, the disciplinary action proposed herein shall become effective and shall be final agency action.



Rebecca Curtiss, Chief
Iowa Department of Public Health
Bureau of Emergency and Trauma Services

4/10/2018
Date