

**RESTRICTED DELIVERY CERTIFIED MAIL  
RETURN RECEIPT REQUESTED**

**Before the Iowa Department of Public Health**

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| IN THE MATTER OF<br><br>Kevin Wilkens<br>3820 14 <sup>th</sup> Avenue Apartment 6<br>Rock Island, Illinois 61201-3803<br><br>Certification: EMT-09-1005-01 | Case: 12-03-08<br><br><b>NOTICE OF PROPOSED ACTION</b><br><br><b>PROBATION</b> |
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Pursuant to the provisions of Iowa Code Sections 17A.18 and 147A.7, and Iowa Administrative Code (I.A.C.) 641—131.7, the Iowa Department of Public Health is proposing to place the emergency medical care provider certification identified above on **PROBATION** for a period of two years from the effective date of this notice.

The Department may place an EMS provider on probation when it finds that the applicant or certificate holder has committed any of the following acts or offenses:

*Knowingly making misleading, deceptive, untrue or fraudulent representations in the practice of the profession or engaging in unethical conduct or practice harmful or detrimental to the public. Proof of actual injury need not be established.  
Iowa Code Section 147A.7(1)f and IAC 641—131.7(3)f*

*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.  
Iowa Code Section 147A.7(1)j and IAC 641—131.7(3)t*

The following events have led to this notice:

- You were convicted of the following crimes:
- 1) Theft-Property, Obtained by Deception in 2007
  - 2) Retail Theft – Shoplifting in May 2007

Your probation shall be subject to the following terms and conditions:

- a. You shall submit quarterly reports to the Department (filed no later than January 10, April 10, July 10, and October 10) which shall include the following information:
  - i. The time period covered by the report
  - ii. Verification that you have complied with the terms of probation as specified in this Notice.
- b. You shall make a personal appearance before the Department upon request. You shall be given reasonable notice of the date, time, and place of appearance.
- c. You shall obey all federal, state, and local statutes and rules governing the provisions of emergency medical services.