RESTRICTED DELIVERY CERTIFIED MAIL RETURN RECEIPT REQUESTED

Before the Iowa Department of Public Health

IN THE MATTER OF:

Case Number: 12-11-20

Beth Burch 1217 First Avenue Grinnell, Iowa 50112-2423 NOTICE OF PROPOSED ACTION

CITATION AND WARNING

Provider: PM-17-114-17

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 issue a **Citation and Warning** to the emergency medical care provider identified above.

The department may issue a citation and warning when an emergency medical care provider has committed any of the following acts or offenses:

Professional Incompetency. Professional incompetency includes, but is not limited to:
(2) A substantial deviation from the standards of learning or skill ordinarily possess and applied by other EMS providers in the state of Iowa acting in the same or similar circumstances.
(3) A failure to exercise the degree of care which is ordinarily exercised by the average EMS provider acting in the same or similar circumstances.
(4) Failure to conform to the minimal standard of acceptable and prevailing practice of certified EMS providers in this state.
IAC 641—131.7(3)e

Knowingly aiding, assisting or advising a person to unlawfully practice EMS. IAC 641—131.7(3)k

The following events have lead to this notice:

On September 4, 2012, you allowed an EMT-Basic to perform the skill of endotracheal intubation. The skill of endotracheal intubation is not within the scope of practice for the EMT-Basic.

You are hereby **CITED** for assisting another provider to function outside of that provider's Scope of Practice. You are **WARNED** that violating the Department's rules in the future may result in further disciplinary action, including suspension or revocation of your emergency medical care provider certification.

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 East 12th Street, 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.

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<u>|2-14-12</u> Date

Gerd W. Clabaugh Deputy Director and Director, Division of Acute Disease Prevention and Emergency Response