

**RESTRICTED DELIVERY CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

Before the Iowa Department of Public Health

IN THE MATTER OF: Jill Carslin 87785 573 Avenue Laurel, Nebraska 68745-1932 Certification #: B-07-331-04	Case Number: 08-09-15 NOTICE OF PROPOSED ACTION DENIAL
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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 **DENY** your application for EMS certification.

The department may deny an application for EMS certification when it finds that the applicant 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.1i and IAC 641—131.7(2)f*

Habitual intoxication or addiction to drugs.

(1) The inability if an EMS provider to practice with reasonable skill and safety by reason of the excessive use of alcohol on a continuing basis.

(2) The excessive use of drugs which may impair an EMS provider's ability to practice with reasonable skill and safety.

(3) Obtaining, possessing, attempting to obtain or possess, or administering controlled substances without lawful authority.

Iowa Code Section 147A.7(1)g and IAC 641—131.7(2)q

Violating a statute of this 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 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(2)t

The following incidents resulted in issuance of this proposed action:

You have been convicted of the following crimes:


1. Felony Possession, 2007
2. Felony Failure to Appear, 2007
3. Two counts of Operating while Intoxicated, 2007
4. Attempt of a Misdemeanor, 2002
5. Felony Possession, 1998
6. Misdemeanor Possession, 1994
7. Misdemeanor Possession, 1991
8. Misdemeanor Possession, 1989

9. Petty Theft, 1986

In addition, the substance abuse evaluation you submitted, dated November 19, 2007, indicates that you meet DSM-IV criteria for alcohol dependence and amphetamine dependence. The evaluation also states that you are in denial of your drug and alcohol problems. The evaluation recommended Level 2 Intensive Outpatient Treatment followed by long term Level 4 Outpatient Treatment. The department requested that you show proof of compliance with these recommendations but you have failed to provide evidence of compliance.

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.



Kirk E. Schmitt, Bureau Chief
Emergency Medical Services

10/2/2008
Date