

**RESTRICTED DELIVERY CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

Before the Iowa Department of Public Health

IN THE MATTER OF: Ryan Woods 5936 NW 50 th Street Johnston, Iowa 50131 Certification: PS-18-112-10	Case Number: 10-03-13 NOTICE OF PROPOSED ACTION REVOCAION OF ENDORSEMENT
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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 **REVOKE** your evaluator endorsement.

The department may revoke an endorsement when it finds that the 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. Acts which may constitute unethical conduct include, but are not limited to:

*(4) Engaging in a professional conflict of interest
Iowa Code Section 147A.7(1)f and IAC 641—131.7(2)f*

*Willful or repeated violations of Iowa Code chapter 147A or these rules.
IAC 641—131.7(2)s*

Specifically:

The practical exam shall be administered using the standards and forms provided by the department.

ICA 641—131.4(1)d

Using an unqualified individual as an instructor or evaluator.

IAC 641—131.8(2)k

The following incidents resulted in issuance of this proposed action:

On September 12, 2009, you functioned as the Examination Coordinator for the National Registry of EMT (NREMT) advanced level practical examination. This examination is part of the state-approved certification examination used for EMT-Intermediates, EMT-Paramedics and Paramedic Specialists.

The NREMT Exam Coordinator's Manual for Advanced Exams states that the examination coordinator is responsible for the selection of qualified skill examiners and that, "in no case should a primary instructor serve as a skill examiner."


The skill examiners for the exam included the course coordinator, who was also the primary instructor for three courses, and an assistant instructor who taught the trauma topics and evaluated the patient assessment – trauma station.

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
EMS Bureau Chief



Date