

**RESTRICTED DELIVERY CERTIFIED MAIL  
RETURN RECEIPT REQUESTED**

**Before the Iowa Department of Public Health**

IN THE MATTER OF  Jeffrey Wiechman 401 Loomis Avenue Corning, Iowa 50841-1625  Certification: B-08-200-64	Case: 13-01-04  <b>CONSENT AGREEMENT</b>
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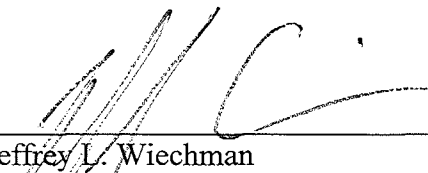
COME NOW the Iowa Department of Public Health ("Department") and Jeffrey Wiechman ("Wiechman "), and pursuant to Iowa Code sections 17A.10 and 272C.3(4), enter into the following Consent Agreement:

1. Wiechman is certified as an EMT-Basic and holds certification number B-08-200-64.
2. On July 8, 2013, Wiechman entered a plea of guilty to possession of a controlled substance.
3. The Department may take disciplinary action against a provider who possesses controlled substances without lawful authority (*IAC 641—131.7(3)q(3)*).
4. Execution of this Consent Agreement by all parties constitutes the resolution of this case. Wiechman waives his right to hearing and all attendant rights, including the right to appeal, by freely and voluntarily agreeing to this Consent Agreement.
5. This Consent Agreement is subject to approval of the Department. If the Department approves this agreement, it becomes the final disposition of this matter. If the Department fails to approve this agreement, it shall be of no force or effect to either party.
6. This Consent Agreement shall be part of Wiechman's permanent record. This Consent Agreement is a public record available for inspection and copying in accordance with the requirements of Iowa Code chapters 22 and 272C.
7. The Department has jurisdiction over the parties and subject matter of this action.
8. The Department's approval of this Consent Agreement shall constitute a FINAL ORDER of the Department and constitutes final agency action in this matter.


**IT IS THEREFORE ORDERED:**

9. Wiechman agrees to voluntarily surrender his EMT-Basic, certification number B-08-200-64. Wiechman shall surrender his certification to the Bureau of Emergency Medical Services within 10 days of the execution date of this Agreement. The execution date is that date which accompanies the Division Director's signature.
10. By voluntarily surrendering his certification, Wiechman agrees not to use any words or titles which imply or represent that he is an emergency medical responder or to otherwise hold himself out to the public as an emergency medical responder or to engage in the provision of emergency medical services for which certification is required in the state of Iowa.

AGREED AND ACCEPTED:

  
\_\_\_\_\_  
Jeffrey L. Wiechman

9-18-13  
Date

  
\_\_\_\_\_  
Rebecca Curtiss  
Bureau Chief  
Iowa Department of Public Health  
Center for Disaster Operations and Response

10/11/2013  
Date

Copies Provided To:

Heather L. Adams  
Assistant Attorney General  
Hoover State Office Building  
LOCAL

Joe Ferrell, Regulation Manager  
Bureau of Emergency Medical Services  
Iowa Department of Public Health  
LOCAL