

**RESTRICTED DELIVERY CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

Before the Iowa Department of Public Health

IN THE MATTER OF: Nathanial Overturf 218 North West State Street Apartment 4 Ankeny, Iowa 50023-2238 Certification: B-19-310-01	Case Number: 09-03-10 NOTICE OF PROPOSED ACTION REVOCATION
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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 EMS certification identified above.

The department may revoke an EMS certification when it finds that the applicant or certificate holder has committed any of the following acts or offenses:

Fraud in procuring certification or renewal including, but not limited to:

(3) Attempting to file or filing with the Iowa department of public health or training program any false or forged diploma or certificate or affidavit or identification or qualification in making an application for certification in this state.

IAC 641—131.7(2)d

Knowingly making misleading, deceptive, untrue or fraudulent representation 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:

(5) Falsification of medical records.

Iowa Code Section 147A.7(1)f and IAC 641-131.7(2)f

The following incidents resulted in issuance of this proposed action:

You filed falsified preceptor evaluations with your training program as part of your clinical requirements in the Paramedic Specialist course. You submitted documentation of your clinical education which contained forged signatures of preceptors. The submitted paperwork also included falsified patient contacts.

In addition, you admitted to the EMS service with which you functioned that you took gasoline and a laptop computer belonging to the service when you were not authorized by the service to do so.. You also admitted to taking a camera from a co-worker at the service.

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