RESTRICTED DELIVERYCERTIFIED MAIL RETURN RECEIPT REQUESTED

Before the Iowa Department of Public Health

IN THE MATTER OF	Case: 11-02-18
Amy Shostak 3905 North 153 rd Court Apt 307 Omaha, Nebraska 68116-6206	CONSENT AGREEMENT
Certification: B-05-337-16	

COME NOW the Iowa Department of Public Health ("Department") and Amy Shostack ("Shostak"), and pursuant to Iowa Code sections 17A.10 and 272C.3(4), enter into the following Consent Agreement:

- 1. Shostak is certified as an EMT-Basic and holds certification number B-05-337-16.
- 2. On 8/30/11 the Department issued an Notice of Public Action: Probation to Shostak related to violation of Iowa Administrative Code 641—131.7(3)"t."
- 3. Shostak has requested to voluntarily surrender her certification in lieu of proceeding with the probation.
- 4. Execution of this Consent Agreement by all parties constitutes the resolution of this case.

 Shostak waives her 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 Shostak'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. Shostak agrees to voluntarily surrender her EMT-Basic, certification number B-05-337-16. Shostak shall surrender her 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 her certification, Shostak agrees not to use any words or titles which imply or represent that she is an emergency medical responder or to otherwise hold herself 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:

Amy L Shostak

Date

Gerd W. Clabaugh

Deputy Director and

Director, Division of Acute Disease Prevention and Emergency Response

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