

STATE OF IOWA IOWA PHARMACY EXAMINERS
BEFORE THE BOARD OF PHARMACY EXAMINERS

IN THE MATTER OF:)
)
LINDSAY ANN RAMSEY) **CONSENT AGREEMENT**
 Applicant for Pharmacy Technician Registration)
 Respondent)

The Iowa Board of Pharmacy Examiners (Board) and Lindsay Ann Ramsey (Respondent) enter into the Consent Agreement (Agreement) pursuant to Iowa Code sections 17A.10 and 272C.3(4) (2005):

1. The Respondent seeks to register as a pharmacy technician with the Board for the purpose of obtaining and completing on-site practical experience as a pharmacy technician, a requirement of the training program in which Respondent has enrolled.
2. The Respondent is currently a student at Kirkwood Community College, enrolled in the pharmacy technician training program, and is expected to complete the program in May 2006.
3. The Respondent, on her application for registration as a pharmacy technician, disclosed that she had previously used alcohol or drugs but that she is no longer using drugs or alcohol and offered her willingness to take a drug test.
4. The Respondent, on her application for registration as a pharmacy technician, disclosed that she was charged on April 13, 2004, with possession of a controlled substance, for which she paid a fine, served two days in jail, and her license to

operate a motor vehicle was revoked for six months. Respondent failed to disclose a charge on May 24, 2002, of possession of alcohol under legal age, first offense.

5. Upon approval of this Agreement by the Board, Respondent shall receive a registration as a pharmacy technician, authorizing on-site practical experience and subsequent employment as a pharmacy technician in Iowa.
6. The Respondent's registration as a pharmacy technician in Iowa shall be issued and placed on probation for a period of two years beginning on the date of the Board's acceptance and approval of this Agreement. During the probationary period, the Respondent shall comply with the following terms:
 - a. The Respondent shall not consume alcohol.
 - b. The Respondent shall not use any controlled substance or prescription drug in any form unless the controlled substance or prescription drug has been authorized and prescribed for the Respondent by a licensed, treating physician or other qualified treating health care provider. The Respondent shall inform any treating physician or other treating health care provider of her medical history, including her history of drug and alcohol use.
 - c. The Respondent shall provide witnessed blood or urine specimens on demand by an agent of the Board. The specimens shall be used for alcohol and drug screening, all costs of which shall be paid by the Respondent.

- d. The Respondent shall file written, sworn quarterly reports with the Board attesting her compliance with all the terms and conditions of this Agreement. The reports shall be filed no later than June 5, September 5, December 5, and March 5 of each year of the Respondent's probation. The quarterly reports shall include the Respondent's place of employment, current home address, home telephone number or work telephone number, and any further information deemed necessary by the Board from time to time.
- e. The Respondent shall make personal appearance before the Board or a Board committee upon request. The Respondent shall be given reasonable notice of the date, time, and location for such appearances. Any such appearance shall be subject to the waiver provisions of 657 Iowa Administrative Code § 35.7.
- f. The Respondent shall obey all federal and state laws and regulations substantially related to the practice of pharmacy and the distribution of controlled substances.
- g. The Respondent shall inform the Board in writing within ten (10) days of any change of home address, place of employment, home telephone number, or work telephone number.
- h. The Respondent agrees to release all her medical records to the Board,

including all medical recordings pertaining to treatment for mental conditions and for alcohol and substance abuse, and agrees to allow the free flow of information between the Board and the Respondent's physician(s) and treatment provider(s) and to ensure that the Board receives all necessary information if further evaluation or treatment of the Respondent is requested or required. This release of medical records, including records pertaining to treatment for alcohol and substance abuse, is effective for two years from the date of the Board's approval of this Agreement.

7. The Board reserves the right to review the Respondent's compliance with the terms of this Agreement at any time.
8. Should the Respondent violate the terms of this Agreement in any respect, the Board may institute formal disciplinary proceedings. This Agreement shall be made part of the permanent record of the Board, and violations of this Agreement may be considered by the Board in determining the nature and severity of any future disciplinary action.
9. As evidenced by her signing this Agreement, the Respondent voluntarily agrees to enter into this Agreement with the board.
10. This Agreement is a public record available for inspection and copying in accordance with Iowa law.

11. As evidenced by the Board Chair signing this Agreement, this Agreement is approved by the Board.

WHEREFORE, the terms of this Consent Agreement are agreed to and accepted by the Iowa Board of Pharmacy Examiners and the Respondent.

17th This Consent Agreement is hereby accepted and approved by Respondent on the day of February, 2006.


Lindsay Ann Ramsey
Respondent

Subscribed and sworn to before me by Lindsay Ann Ramsey on the 17th day of February, 2006.




NOTARY PUBLIC IN AND FOR
THE STATE OF IOWA

8th This Consent Order was accepted by the Iowa Board of Pharmacy Examiners on the day of March, 2006.


MICHAEL J. SEIFERT, Chairperson
Iowa Board of Pharmacy Examiners
400 SW Eighth Street, Suite E
Des Moines, IA 50309-4688

**BEFORE THE BOARD OF PHARMACY
OF THE STATE OF IOWA**

Re:)	
Pharmacy Technician Registration of)	ORDER
LINDSAY RAMSEY)	ACCEPTING
Registration No. 11225)	SURRENDER OF
)	PHARMACY TECHNICIAN
)	REGISTRATION

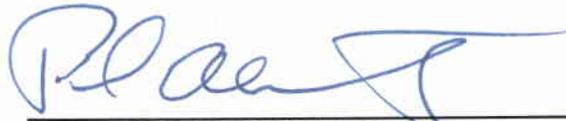
COMES NOW, Paul Abramowitz, Chairperson of the Iowa Board of Pharmacy, on the 5th day of June 2007, and declares that:

1. The Respondent's Iowa pharmacy technician registration number is 11225.
2. On December 20, 2006, Respondent executed a voluntary surrender of her Iowa pharmacy technician registration number 11225.
3. On June 5, 2007, the Board reviewed Respondent's voluntary surrender of her pharmacy technician registration and agreed to accept it.

This surrender, pursuant to 657 Iowa Administrative Code § 36.15, shall be considered a revoked license, permit, or registration with respect to any future request for reinstatement. Any request for reinstatement will be handled under terms established by 657 Iowa Administrative Code § 36.13.

WHEREFORE, it is hereby ordered that Respondent's voluntary surrender of her Iowa pharmacy technician registration number 9044 is hereby accepted.

IOWA BOARD OF PHARMACY



PAUL ABRAMOWITZ, Chairperson

Copies:

Lindsay Ramsey
720 Danbury Street NE
Cedar Rapids, IA 52402

RECEIVED

DEC 20 2006

VOLUNTARY SURRENDER OF PHARMACY TECHNICIAN REGISTRATION
IOWA PHARMACY EXAMINERS

I, Lindsay Ramsey, a resident of 720 Danbury Street NE, Cedar Rapids, Iowa 52402, of my own free will and without any mental reservation and not as a result of any inducement, promise or threat on the part of anyone, do hereby voluntarily surrender my pharmacy technician registration in the State of Iowa, number 11225, to the Iowa Board of Pharmacy Examiners, for an indefinite period of time. This surrender of registration shall become effective upon the notarized signature of the registrant, Lindsay Ramsey, being affixed to this voluntary surrender document.

I, Lindsay Ramsey, do hereby acknowledge that pursuant to 657 Iowa Administrative Code section 36.25, a pharmacy technician registration which has been voluntarily surrendered shall be considered a revocation of license with respect to a request for reinstatement, which will be handled under the terms established by 657 Iowa Administrative Code section 36.23, which provides as follows:

Any person ... whose pharmacy technician registration ... has been revoked or suspended must meet the following eligibility requirements:

1. Must have satisfied all the terms of the order of revocation or suspension or court proceedings as they apply to that revocation or suspension. If the order of revocation or suspension did not establish terms and conditions upon which reinstatement might occur, or if the license, registration, or permit was voluntarily surrendered, an initial application for reinstatement may not be made until one year has elapsed from the date of the board's order or the date of voluntary surrender.

....

3. All proceedings for reinstatement shall be initiated by the respondent who shall file with the board an application for reinstatement of the license, registration, or permit. Such application shall be docketed in the original case in which the license, registration, or permit was revoked, suspended, or relinquished. All proceedings upon petition for reinstatement, including all matters preliminary and ancillary thereto, shall be subject to the same rules of procedure as other cases before the board. The board and the respondent may informally settle the issue of reinstatement. The respondent may choose to have an informal reinstatement conference before the board, as provided in rule 657—9.24 (17A,124B,147,155A,272C).

4. An application for reinstatement shall allege facts which, if established, will be sufficient to enable the board to determine that the basis for the revocation or suspension no longer exists and that it will be in the public interest for the license, registration, or permit to be reinstated. The burden of proof to establish such facts shall be on the respondent.

5. An order for reinstatement shall be based upon a decision which incorporates findings of facts and conclusions of law and must be based

12-21-06

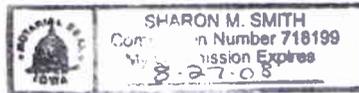
upon the affirmative vote of a quorum of the board. This order shall be available to the public as provided in 657 Chapter 14.

I, Lindsay Ramsey, hereby further acknowledge that I shall not engage in any of the practices or aspects thereof of a pharmacy technician in the State of Iowa for which a registration is required.

12-20-06
Date of signature

Lindsay Ramsey
Lindsay Ramsey

State of Iowa
County: of Linn



Signed and sworn to (or affirmed) before me on 12-20-06
Date

By Lindsay Ramsey.

Sharon M. Smith
Signature of Notary Public