

**BEFORE THE MINNESOTA
EMERGENCY MEDICAL SERVICES REGULATORY BOARD**

In the Matter of
Jackie Bruder, EMT-B
Certificate Number: 510580

**FINDINGS OF FACT,
CONCLUSIONS,
AND FINAL ORDER**

On October 15, 2007, the Complaint Review Panel ("Panel") of the Minnesota Emergency Medical Services Regulatory Board ("Board") initiated the above-entitled proceeding against Jackie Bruder, EMT-B ("Respondent"), by service of a Notice of Petition and Petition to Suspend Certification.

The matter came on for consideration by the Board pursuant to Minnesota Statutes section 144E.28, subdivision 5(b) (2006), at a regularly scheduled meeting on November 15, 2007, convened in Conference Room A (fourth floor), University Park Plaza, 2829 University Avenue S.E., Minneapolis, Minnesota 55414.

Karen B. Andrews, Assistant Attorney General, appeared and presented oral argument on behalf of the Panel. Respondent was not present or otherwise represented at the meeting. Nathan W. Hart, Assistant Attorney General, was present as legal advisor to the Board.

The following members of the Board were present: James Rieber, Chair; Brenda Brown; Lori Brown; Bonnie Engen, R.N.; Shanna Hanson; Susan Jacobson; Robert Jensen; Lee Pyles, M.D.; Mark Schoenbaum; Marlys Tanner; and Mari Thomas, M.D. As members of the Panel, Dawn Bidwell; Kory Kaye, M.D.; Kevin Miller; and Katherine Burke Moore did not participate in deliberations or vote in the matter.

Based on the record and the proceedings herein, the Board makes the following:

FINDINGS OF FACT

1. On June 21, 2006, Respondent had a positive urine screen for cannabis and was placed on leave by her employer. Respondent self-reported to the Health Professionals Services Program ("HPSP") on July 12, 2006. On August 1, 2006, HPSP received Respondent's signed Participation Agreement and Monitoring Plan. The Monitoring Plan required, among other things, that Respondent abstain from alcohol and any other mood-altering chemicals and submit to unscheduled toxicology screens at the request of HPSP.

2. Respondent entered outpatient chemical dependency treatment in the summer of 2006 and completed treatment through Recovery in the Pines in October 2006. Respondent met with a therapist from Recovery in the Pines for counseling at least twice monthly on an ongoing basis.

3. Respondent has periodically been prescribed hydrocodone (Vicodin) for pain control. Concern regarding possible cross-addiction was raised by HPSP and Respondent's therapist. On March 19, 2007, Respondent's urine screen was positive for opiates. The screen confirmed hydrocodone and oxycodone. Respondent had a prescription for hydrocodone (Vicodin) but did not have a prescription for oxycodone (Percocet/Percodan). Respondent admitted taking her mother's prescription Percocet. On April 12, 2007, HPSP reported to Board staff that Respondent took pain medication not prescribed to her.

4. On July 5, 2007, Respondent was served with a Notice of Conference, scheduling a conference with the Panel for July 23, 2007, at 1:00 p.m. Respondent failed to appear before the Panel and provided no prior notice that she would not be present. Further, Respondent failed to provide any written response to the allegations contained in the Notice.

CONCLUSIONS

1. The Board has jurisdiction in this matter pursuant to Minnesota Statutes sections 144E.28, subdivision 5, and 144E.30 (2006).

2. Respondent was given timely and proper notice of the November 15, 2007, hearing before the Board and of her right under Minnesota Statutes section 144E.28, subdivision 5(b), to request a contested case hearing to be conducted in accordance with Minnesota Statutes chapter 14.

3. The Panel has proven by a preponderance of the evidence that Respondent has violated Minnesota Statutes section 144E.30, subdivision 3, by failing to cooperate with a Board investigation.

4. The Panel has proven by a preponderance of the evidence that Respondent has violated Minnesota Statutes section 144E.28, subdivision 5(4), in that she is actually or potentially unable to provide emergency medical services with reasonable skill and safety to patients by reason of illness, use of alcohol, drugs, chemicals, or any other material, or as a result of any mental or physical condition.

5. As a result of the violations set forth above and Respondent's failure to request a contested case hearing within 30 days of receipt of notice of her right to do so or at any time, the Board has the authority without further proceedings to take disciplinary action against Respondent's EMT-B certification. *See* Minn. Stat. § 144E.28, subs. 4 and 5.

Based on the foregoing Findings of Fact and Conclusions, the Board issues the following:

ORDER

1. Respondent's EMT-B certificate is **SUSPENDED**, effective immediately. At no time subsequent to the date of this Order shall Respondent engage in any act in Minnesota which

constitutes practice as an emergency medical technician-basic as defined in Minnesota Statutes sections 144E.001 and 144E.28, nor shall she in any manner represent or hold herself out as being authorized to so practice.

2. Not later than 7 (seven) days from the date of this Order, Respondent shall surrender and cause the Board to receive her current EMT-B certificate.

3. Respondent may apply to the Board for reinstatement of her certification as an EMT-B not earlier than 6 (six) months from the date of this Order. Any such application shall be accompanied by:

- a. The results of a chemical use evaluation at Respondent's expense;
- b. Evidence that Respondent has successfully completed or is successfully participating in any and all treatment indicated by the evaluation; and
- c. Evidence of compliance with all applicable continuing education or training requirements under Minnesota Statutes section 144E.28, subdivisions 7 and 8.

4. Respondent shall appear before the Panel to review any application for reinstatement submitted pursuant to paragraph 3. The burden of proof shall be on Respondent to demonstrate that she is able to provide emergency medical services in a fit and competent manner without risk of harm to the public. The Board reserves the right to approve an application for reinstatement only upon the imposition of conditions and limitations which the Board deems necessary to ensure public protection. Such conditions and limitations may include, but need not be limited to, restricted duties and practice supervision.

5. This Order is a public document.

The foregoing Findings of Fact, Conclusions, and Order constitute the decision of the Board in this matter.

Dated this 3 day of December, 2007.

MINNESOTA EMERGENCY MEDICAL
SERVICES REGULATORY BOARD

By: 

JAMES RIEBER
Board Chair

AG: #1880959-v1