

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
BUREAU OF REGULATORY SERVICES**

In re: Sandra A. Rynaski

Petition No. 980828-072-004

CONSENT ORDER

WHEREAS, Sandra A. Rynaski of Manchester, Connecticut (hereinafter "respondent") has been issued license number 000943 to practice as an emergency medical technician - paramedic by the Department of Public Health (hereinafter "the Department") pursuant to Chapter 368d of the General Statutes of Connecticut, as amended; and,

WHEREAS, respondent admits that:

1. On or about February 5, 1997, respondent transported R.M., an intoxicated male patient, to the Hartford Hospital emergency department.
2. While at triage, respondent threatened R.M. with physical harm.
3. The above described facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §19a-180(b), taken in conjunction with §19a-179-15 of the Regulations of Connecticut State Agencies and §14 of Public Act 97-311.

WHEREAS, respondent, in consideration of this Consent Order, has chosen not to contest this matter and agrees that for purposes of this or any future proceedings before a hearing officer designated by the commissioner (hereinafter "the Department"), this Consent Order shall have the

same effect as if proven and ordered after a full hearing held pursuant to §19a-180 of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to §§19a-180 and 19a-17 of the General Statutes of Connecticut, respondent hereby stipulates and agrees to the following:

1. Respondent waives her right to a hearing on the merits of this matter.
2. Respondent's license number 000943 to practice as an emergency medical technician - paramedic in the State of Connecticut is hereby reprimanded.
3. Respondent shall pay a civil penalty of two hundred dollars (\$200) by certified or cashier's check payable to "Treasurer, State of Connecticut." The check shall reference the Petition Number on the face of the check, and shall be payable before the end of the probationary period.
4. Respondent's license shall be placed on probation for a period of two years under the following terms and conditions:
 - a. Respondent shall provide her sponsor hospital and employer at each place where respondent practices as an emergency medical technician - paramedic throughout the probationary period, with a copy of this Consent Order within fifteen (15) days of its effective date, or within fifteen (15) days of commencement of employment.
Respondent agrees to provide reports from such employer, quarterly for the entire probationary period, stating that respondent is practicing with reasonable skill and safety.
 - b. Within the probationary period respondent shall attend and successfully complete twelve hours of continuing education, in addition to the continuing education required by the conditions of her license, in ethical and professional issues, pre-

approved by the Department. Within ten days of the completion of such coursework, respondent shall provide the Department with proof, to the Department's satisfaction, of the successful completion of such course(s).

5. All correspondence and reports are to be addressed to:

Bonnie Pinkerton, Nurse Consultant
Department of Public Health
Division of Health Systems Regulation
410 Capitol Avenue, MS #12HSR
P.O. Box 340308
Hartford, CT 06134-0308

6. All reports required by the terms of this Consent Order shall be due on the tenth business day of every third month.
7. Respondent shall comply with all state and federal statutes and regulations applicable to her licensure.
8. Respondent shall pay all costs necessary to comply with this Consent Order.
9. Any alleged violation of any provision of this Consent Order may result in the following procedures at the discretion of the Department:
- a. The Department shall notify respondent in writing by first-class mail that the term(s) of this Consent Order have been violated, provided that no prior written consent for deviation from said term(s) has been granted.
 - b. Said notification shall include the acts or omission(s) which violate the term(s) of this Consent Order.
 - c. Respondent shall be allowed fifteen (15) days from the date of the mailing of notification required in paragraph 9a above to demonstrate to the satisfaction of the Department that she has complied with the terms of this Consent Order or, in the alternative, that she has cured the violation in question.

- d. If respondent does not demonstrate compliance or cure the violation by the limited fifteen (15) day date certain contained in the notification of violation to the satisfaction of the Department, she shall be entitled to a hearing before the Department which shall make a final determination of the disciplinary action to be taken.
 - e. Evidence presented to the Department by either the Department or respondent in any such hearing shall be limited to the alleged violation(s) of the term(s) of this Consent Order.
10. In the event respondent violates any term of this Consent Order, respondent agrees immediately to refrain from practicing as an emergency medical technician - paramedic, upon request by the Department, for a period not to exceed 45 days. During that time period, respondent further agrees to cooperate with the Department in its investigation of the violation and to submit to and complete a medical, psychiatric and/or psychological evaluation, if requested to do so by the Department; and, that the results of the evaluation shall be submitted directly to the Department. Respondent further agrees that failure to cooperate with the Department in its investigation during said 45 day period shall constitute grounds for the Department to seek a summary suspension of respondent's license. In any such summary action, respondent stipulates that her failure to cooperate with the Department's investigation shall constitute an admission that her conduct constitutes a clear and immediate danger as required pursuant to the General Statutes of Connecticut, sections 4-182(c) and 19a-17(c).
11. In the event respondent violates any term of this Consent Order, said violation may also constitute grounds for the Department to seek a summary suspension of her license before the Department.

12. In the event respondent is not employed as an emergency medical technician - paramedic for periods of thirty (30) consecutive days or longer, or is employed as an emergency medical technician - paramedic less than twenty (20) hours per week, or is employed outside of the State of Connecticut, respondent shall notify the Department in writing. Such periods of time shall not be counted in reducing the probationary period covered by this Consent Order.
13. Legal notice shall be sufficient if sent to respondent's last known address of record reported to the Licensure and Registration Section of the Division of Health Systems Regulation of the Department.
14. This Consent Order is effective on the first day of the month immediately following the date this Consent Order is accepted and ordered by the Department.
15. Respondent understands this Consent Order may be considered as a public document and evidence of the above admitted violations in any proceeding before the Department in which her compliance with this Consent Order or with §19a-180 of the General Statutes of Connecticut, as amended, is at issue.
16. Any extension of time or grace period for reporting granted by the Department shall not be a waiver or preclude the Department from taking action at a later time. The Department shall not be required to grant future extensions of time or grace periods.
17. This Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Further, this Order is not subject to appeal or review under the provisions of Chapters 54 or 368a of the General Statutes of Connecticut, provided that this stipulation shall not deprive respondent of any rights that she may have under the laws of the State of Connecticut or of the United States.

18. This Consent Order is a revocable offer of settlement which may be modified by mutual agreement or withdrawn by the Department at any time prior to its being executed by the last signatory.
19. Respondent permits a representative of the Legal Office of the Bureau of Regulatory Services to present this Consent Order and the factual basis for this Consent Order to the Department. Respondent understands that the Department has complete and final discretion as to whether this executed Consent Order is approved or accepted.
20. Respondent understands and agrees that she is responsible for satisfying all of the terms of this Consent Order during vacations and other periods in which she is away from her residence.
21. Respondent has the right to consult with an attorney prior to signing this document.

I, Sandra A. Rynaski, E.M.T.-P., have read the above Consent Order, and I stipulate and agree to the terms as set forth therein. I further declare the execution of this Consent Order to be my free act and deed.

Sandra Rynaski
Sandra A. Rynaski

Subscribed and sworn to before me this 26th day of February 1999.

Patricia M. Royce
Notary Public or person authorized
by law to administer an oath or affirmation

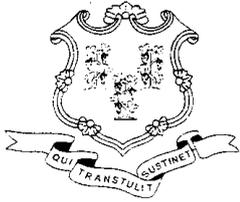
The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 18th day of March 1999, it is hereby accepted.

Cynthia Denne
Cynthia Denne, Director
Division of Health Systems Regulation

S: milt/rynaski/legal/co. 12/31/98

The above Consent Order having been presented to the duly appointed Hearing Officer on the 25th day of April 1999, it is hereby ordered and accepted.

Elisabeth Borrino
Elisabeth Borrino
Hearing Officer



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

15 April 2005

Sandra Rynaski
77 Cambridge Drive
East Hartford, CT 06118

Re: Consent Order
Petition No. 980828-072-004

Ms. Rynaski,

Please accept this letter as notice that you have satisfied the terms of your certificate probation, effective 1 April 2001.

Notice will be sent to the Department's Licensure and Registration section to remove all restrictions from your certificate related to the above-referenced Consent Order.

Please be certain to retain this letter as documented proof that you have completed your certificate probation.

Thank you for your cooperation during this process.

Sincerely,

Michael Zanker, MD
Medical Director
Office of Emergency Medical Services

Cc: J. Filippone



Phone:
Telephone Device for the Deaf: (860) 509-7191
410 Capitol Avenue - MS # _____
P.O. Box 340308 Hartford, CT 06134
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