STATE OF NORTH CAROLINA
BEFORE THE NORTH CAROLINA
RESPIRATORY CARE BOARD

IN THE MATTER OF:  
CraIG A. Ditmars, RCP  
License Number – 2701  

CONSENT ORDER

1. Jurisdiction


2. Identification of Licensee

The Applicant is Craig A. Ditmars (the “Applicant”). His mailing address is PO Box 1258, Wilmington NC 28401. The Respiratory Care Practitioner held North Carolina Respiratory Care License number 2701 (the “License”), first issued on September 17, 2002, which was revoked on July 7, 2005.

3. Waiver of Rights

I, Craig A. Ditmars, understand that I have each of the following rights:

(Initials)

- The right to a hearing before the Board;
- The right to present evidence to limit or reduce any sanction that could be imposed for a violation;
- The right to confront and cross-examine witnesses and to challenge evidence presented by the Board against me;
- The right to present legal arguments in a brief; and
- The right to appeal from any final decision adverse to my license to practice respiratory care.

As noted by my initials above, I hereby freely and knowingly waive these rights without further process and agree to the terms of this Consent Order regarding my license. In order to resolve
this matter by a Consent Order, I also agree that the Board staff and counsel may discuss this Consent Order with the Board *ex parte* whether or not the Board accepts this Order as written.

4. **Stipulation to Facts**

The Applicant and the Board stipulate to the following facts:

A. The Applicant has been out of the practice of respiratory care in North Carolina since his license was revoked.

B. The Applicant has petitioned the Board to reinstate his license and has provided the Board with the required application, fees, current basic life support certification, finger print card and continuing education.

C. The Applicant currently works at Stepping Stone, a mental health facility that works with chemical dependency. The Applicant attends 4 to 5 AA meetings per week.

D. The Applicant has completed the EMT basic program and is currently volunteering at Pender County Rescue Squad.

5. **Stipulated Order**

A. **Stipulation to Sanction:**

Under N.C. Gen. Stat. § 90-652, in lieu of proceeding to hearing, the Applicant and the Board hereby enter into this consent order whereby the Respiratory Care Practitioner Applicant and the Board agree to the following terms:

1. The Applicant consents to being licensed to practice respiratory care on Probationary Status for a period of 24 months from the date of his return to Respiratory Care practice;

2. The Applicant agrees to notify the Board of his place of employment in the practice of Respiratory Care, the start date and any changes in employment in the practice of respiratory care during his probationary period with the dates;

3. The Applicant shall cause his immediate Respiratory Care supervisor to submit written quarterly reports to the Board during the probationary period. Each such written report shall document the performance in the delivery of Respiratory Care, and detail any concerns of the supervisor about the practice of Respiratory Care. The report forms shall be supplied by the Board.

4. The Applicant agrees to permit the Board to conduct random drug testing during the term of his probation. The drug testing may be performed at any time during the term of his
probation. The costs of all drug testing will be paid by the Licensee. The Board will determine the laboratory where the testing would be performed and the manner in which the sample would be collected, and will instruct the Licensee regarding the details of how any drug test should occur;

5. The Applicant agrees to continue to attend AA meetings regularly with a minimum of 3 meetings per week during the probationary period.

6. The Applicant agrees to continue to comply with the Respiratory Care Practice Act, the Board’s Rules, and the Board’s published interpretation of those rules.

6. Public Record

The parties agree that this Consent Order is public record, as required by N.C. Gen. Stat. § 132-1. Documents that are part of the investigative file are not public record.

7. Reporting

This action will be reported to the appropriate entities as outlined in Board policy and required by state and/or federal law or guidelines. Those entities include, but are not limited to, the National Databank maintained by the National Board for Respiratory Care and the Healthcare Integrity and Protection Data Bank (HIPDB).

8. Costs

The Applicant assumes financial responsibility for any costs associated with fulfilling the terms of this Consent Order.

9. Effective Date

All provisions of this Consent Order are effective upon the date that the Executive Director of the Board signs this Order.


10. **Noncompliance with Consent Order**

Failure to comply with the terms of this Order, either in substance or in timing, is a violation of 21 N.C. Admin. Code § 61 .0307(3). If, during the term of this Consent Order, the Board staff receives evidence that the individual has violated any of the above conditions, the Board may schedule a show cause hearing for a determination of the violations. If the Board determines that such violations have occurred, then the Board may suspend or revoke the license, revoke any stay, or may impose additional disciplinary action.

All provisions of this Order are effective upon this Order’s effective date. Fulfillment of time-specific elements intended to coincide with active practice (such as, but not limited to; probation, supervision or therapy) will only accrue during periods of active practice in compliance with the terms of this Order. Therefore, any period of noncompliance or inactive practice will not accrue towards fulfillment of those terms.

Should circumstances arise that affect the individual’s ability to remain in compliance, the individual shall immediately notify the Board in writing by return receipt mail, fully describing the situation along with any attendant request for Board consideration.

Any modification of this Consent Order must be pre-approved in writing by the Board before it may occur.

**THE REMAINDER OF THIS PAGE INTENTIONALLY LEFT BLANK**
CONSENT TO ISSUANCE OF ORDER BY RESPIRATORY CARE PRACTITIONER

I, Craig A. Ditmars, state that I have read the foregoing Consent Order; that I know and fully understand its contents; that I agree freely and without threat or coercion of any kind to comply with the terms and conditions stated herein; and that I consent to the entry of this Consent Order as a condition of maintaining my license from the North Carolina Respiratory Care Board.

Craig A. Ditmars

STATE OF NORTH CAROLINA
COUNTY OF New Hanover

There personally appeared before me, a Notary Public in and for the County of New Hanover, State of North Carolina, Craig A. Ditmars, who, after having presented documentation of his identity that was satisfactory to me, did acknowledge that he executed the foregoing Consent Order as his free and voluntary act.

This 21st day of April, 2009.

Amy E. Jeffrey
Notary Public
New Hanover County, NC
My Commission Expires July 1, 2012 (SEAL)

ENTRY OF CONSENT ORDER ON BEHALF OF THE NORTH CAROLINA RESPIRATORY CARE BOARD

The foregoing Consent Order is entered at Raleigh, North Carolina, this 23rd day of April, 2009.

Floyd E. Boyer, RRT, RCP
Executive Director, North Carolina Respiratory Care Board