

BEFORE THE PHYSICAL THERAPIST LICENSING BOARD
OF THE STATE OF OREGON

| | | |
|-------------------------------|---|----------------------|
| In the Matter of the |) | Case Number: PT-50 |
| Physical Therapist License of |) | License Number: 8132 |
| |) | |
| KARIS A. ROTH, PTA |) | CONSENT ORDER |
| |) | |
| Licensee |) | |

WHEREAS, Karis A. Roth, PTA "licensee" is a physical therapist assistant licensed by the Physical Therapist Licensing Board "Board"; and

WHEREAS, Karis A. Roth, PTA is employed by Rehab Associates in Hermiston, Oregon; and

WHEREAS, the Board conducted an investigation and is prepared to issue a Notice of Proposed Civil Penalty alleging that the licensee practiced as a physical therapist assistant, for the period just under one year, without a current license; and

WHEREAS, the Board and the licensee are desirous of resolving this matter without further proceedings thereon; and

WHEREAS, the licensee is aware of her right to a hearing on these matters with the assistance of counsel and is aware of her right to judicial review of any adverse decision by the Board and she hereby knowingly and voluntarily waives those rights and agrees to the entry of the Consent Order:

NOW THEREFORE IT IS HEREBY ORDERED:

The licensee shall pay to the Board a Civil Penalty, in the amount of \$250.00, at the time of signing this Consent Order. (The licensee has paid the Civil Penalty in full).

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DATED this ~~25~~ ^{4TH} day of ~~May~~ ^{JUNE} 2001.

PHYSICAL THERAPIST LICENSING BOARD

Signature On File

Patti Gustafson
Executive Director

CONSENT

I hereby acknowledge that I have read and understand the provisions of this Consent Order. I hereby agree to the Board entering the Consent Order.

Signature On File

5-25-01
Date

Karis A. Roth, PTA
Licensee