## IN AND BEFORE THE OKLAHOMA STATE BOARD OF MEDICAL LICENSURE AND SUPERVISION STATE OF OKLAHOMA

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FILED

MAR 28 2014

OKLAHOMA STATE BOARD OF MEDICAL LICENSURE & SUPERVISION

CASE NO. 13-05-4737

STATE OF OKLAHOMA ex rel. THE OKLAHOMA STATE BOARD OF MEDICAL LICENSURE AND SUPERVISION, Plaintiff,

vs.

JEFFREY HICKMAN, P.A. LICENSE NO. 1298

Defendant.

## **CITATION**

YOU ARE HEREBY NOTIFIED that on the <u>v</u> day of March, 2014, a sworn Complaint was filed with the undersigned Secretary of the Oklahoma State Board of Medical Licensure and Supervision, State of Oklahoma, charging you with violations of the Medical Practice Act at Okla. Stat. tit. 59 §509(13) and Oklahoma Administrative Code section 435:10-7-4. A copy of the Complaint is attached hereto and made a part thereof.

On May 15, 2014, the Board will be in regular session at 9:00 o'clock a.m., at its offices located at 101 N.E. 51<sup>st</sup> Street, Oklahoma City, Oklahoma, at which time your Complaint will be considered by the Board, and a hearing will be held pursuant to the Oklahoma Administrative Procedures Act, Okla. Stat. tit. 75 §309, et seq.

If the Board decides, after considering all the testimony and evidence, that you are guilty as charged, your license to practice as a physician assistant within the State of Oklahoma may be suspended or revoked or other disciplinary action may be taken by the Board as authorized by law, including the assessment of costs and attorney's fees for this action as provided by law.

Under the laws of the State of Oklahoma, you are required to file your written Answer under oath with the Secretary of the Board within twenty (20) days after the Citation is served upon you. Unless your Answer is so filed, you will be considered in default, and the Board may accept the allegations set forth in the Complaint as true at the hearing of the Complaint. If the charges are deemed sufficient by the Board, your license to practice as a physician in the State of Oklahoma may be suspended or revoked. **THEREFORE**, you are cited to appear at the hearing. If you are not present in person, you may be present through your attorney.

DATED this 28 day of March, 2014 at  $9^{\circ}$  o'clock.

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Gerald C. Zumwalt, M.D. Secretary and Medical Advisor Oklahoma State Board of Medical Licensure and Supervision



## RETURN OF SERVICE BY AGENT

Received the attached and foregoing Citation and Scheduling Order				
in the investigation ofJeffrey Hickman, PA, at				
Oklahoma City, Oklahoma, on the <u>28</u> day of <u>March</u> , 2014,				
and on the 1day of April,2014 , at1:02o'clock				
P.M. served it on the within named by delivering a copy to				
(Name of person served)				
At (address):				
629 E. Missouri St				
Walters, OK 73572				
Served by: USPS-Jana Fane				
Subscribed and sworn to before me on this $4^{4}$ day of $2014$ and $1000000000000000000000000000000000000$				
Subscribed and sworn to before me on this <u>4</u> <sup>th</sup> day of <u>April</u> , 2014 <u>1000</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u> <u>11100</u>				
My Commission expires: August 1. 2010				
CASE NAME: Jeffrey Hickman, PA CASE #: 13-05-4737				



Date: April 4, 2014

Amber Romero:

The following is in response to your April 4, 2014 request for delivery information on your Certified Mail<sup>™</sup> item number 9171999991703342811326. The delivery record shows that this item was delivered on April 1, 2014 at 1:02 pm in WALTERS, OK 73572. The scanned image of the recipient information is provided below.

Signature of Recipient :

sture (	Sit	16-	-
ted 10	Juff	Hickman	

Address of Recipient :

101Y 1855 629 I Missouri st

Thank you for selecting the Postal Service for your mailing needs.

If you require additional assistance, please contact your local Post Office or postal representative.

Sincerely, United States Postal Service