

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

**FILED**

AUG 10 2011

STATE OF OKLAHOMA  
EX REL. THE OKLAHOMA BOARD  
OF MEDICAL LICENSURE  
AND SUPERVISION,

Plaintiff,

v.  
SUZZIE WALDENVILLE, P.A.

LICENSE NO. PA627

Defendant.

OKLAHOMA STATE BOARD OF  
MEDICAL LICENSURE & SUPERVISION

Case No. 11-01-4142

CITATION

YOU ARE HEREBY NOTIFIED that on the 5 day of August, 2011, 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 Physician Assistant Practice Act and the Medical Practice Act at OAC 435:15-5-11(7), OAC 435:15-5-1(b), 59 O.S. §509(8), (12), (13), (16), (18) and (20), and OAC 435:10-7-4 (1), (2), (6), (11), (27), (36), (39), (41), (48) and (49). A copy of the Complaint is attached hereto and made a part thereof.


On September 15, 2011, the Board will be in regular session at 9:00 o'clock a.m., at its offices located at 101 N.E. 51st, 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, 75 Okla. Stat. §309, *et seq.*, as amended.

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 assistant 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 5 day of August, 2011 at 7<sup>45</sup><sub>am</sub> o'clock.

  
\_\_\_\_\_  
GERALD C. ZUMWALT, M.D., Secretary  
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 of Suzzie Waldenville, PA, at Oklahoma City, Oklahoma, on the 5 day of August, 2011, and on the 10<sup>th</sup> day of August, 2011, at 3:30 o'clock P.M. served it on the within named by delivering a copy to Suzzie Waldenville, PA via Certified mail  
(Name of person served)

At (address):

Suzzie Waldenville  
P.O. Box 448  
Rushville, NE 69360

Served by: Jana Lane

Subscribed and sworn to before me on this 10<sup>th</sup> day of Aug, 2011



Janet Swindle  
Notary Public

My Commission expires: 08-22-2014

91 7108 2133 3935 1519 1749

CASE NAME: Waldenville, PA  
CASE #: 11-01-4142



Date: 08/22/2011

Jana Lane:

The following is in response to your 08/22/2011 request for delivery information on your Certified Mail(TM) item number 7108 2133 3935 1519 1749. The delivery record shows that this item was delivered on 08/20/2011 at 10:18 AM in RUSHVILLE, NE 69360. The scanned image of the recipient information is provided below.

Signature of Recipient:

A handwritten signature in black ink, appearing to read "Jana Lane". The signature is written in a cursive style with a large initial "J" and "L".

Address of Recipient:

A handwritten address number "448" in black ink, written in a simple, blocky style.

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