

WISCONSIN DEPARTMENT OF REGULATION & LICENSING



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FILE COPY

STATE OF WISCONSIN
BEFORE THE BOARD OF NURSING

IN THE MATTER OF THE DISCIPLINARY :
PROCEEDINGS AGAINST :

KRISTA L. KINZIGER, RN
RESPONDENT

: FINAL DECISION AND ORDER

:
: LS9809177NUR

**Division of Enforcement
98 NUR 108**

The parties to this action for the purposes of section 227.53 of the Wisconsin statute are:

Krista L. Kinziger
2042 Memorial Dr. #204
Green Bay, WI 54303

Department of Regulation and Licensing
Division of Enforcement
PO Box 8935
Madison, WI 53708-8935

The parties in this matter agree to the terms and conditions of the attached Stipulation as the final decision of this matter, subject to the approval of the Board. The Board has reviewed this Stipulation and considers it acceptable.

Accordingly, the Board in this matter adopts the attached Stipulation and makes the following:

FINDINGS OF FACT

1. Krista L. Kinziger (DOB 02-28-74) is duly licensed as a registered nurse in the state of Wisconsin (license number 124658). This license was first granted on October 22, 1996.

2. Ms. Kinziger's most recent address on file with the Wisconsin Board of Nursing is 2042 Memorial Dr. #204, Green Bay, WI 54303.

3. On March 1, 1998, Ms. Kinziger's nursing registration expired. Ms. Kinziger did not renew her registration until on or about June 3, 1998. Ms. Kinziger admits she worked as a licensed registered nurse at St. Vincent Hospital in Green Bay, Wisconsin during the time her license was expired.

4. In resolution of this matter, Ms. Kinziger consents to the entry of the following Conclusions of Law and Order.

CONCLUSIONS OF LAW

Krista L. Kinziger, by the conduct described above, has violated sec. 441.10(3)(b), Stats. and Wisconsin Administrative Code § N 7.04(15).

ORDER

NOW, THEREFORE, **IT IS HEREBY ORDERED** that Krista L. Kinziger, is **REPRIMANDED**.

IT IS FURTHER ORDERED that within thirty (30) days from the date of this order, Ms. Kinziger shall pay the costs of this proceeding in the amount of SEVENTY-FIVE dollars (\$75.00). Payment shall be made by certified check or money order, payable to the Wisconsin Department of Regulation and Licensing and sent to:

Department Monitor
Division of Enforcement
PO Box 8935
Madison, WI 53708-8935

This Order shall become effective upon the date of its signing.

WISCONSIN BOARD OF NURSING

By: 
A member of the Board

17 SEP 98
Date

STATE OF WISCONSIN
BEFORE THE BOARD OF NURSING

IN THE MATTER OF THE DISCIPLINARY :
PROCEEDINGS AGAINST :

KRISTA L. KINZIGER, RN :
RESPONDENT :

STIPULATION

It is hereby stipulated between Krista L. Kinziger, R.N., and Steven M. Gloe, attorney for the Department of Regulation and Licensing, Division of Enforcement, as follows that:

1. This Stipulation is entered into as a result of a pending investigation by the Division of Enforcement (98 NUR 108). Ms. Kinziger consents to the resolution of this investigation by stipulation and without the issuance of a formal complaint.

2. The respondent understands that by the signing of this Stipulation she voluntarily and knowingly waives her rights, including: the right to a hearing on the allegations against her, at which time the state has the burden of proving those allegations by a preponderance of the evidence; the right to confront and cross-examine the witnesses against her; the right to call witnesses on her behalf and to compel their attendance by subpoena; the right to testify herself; the right to file objections to any proposed decision and to present briefs or oral arguments to the officials who are to render the final decision; the right to petition for rehearing; and all other applicable rights afforded to her under the United States Constitution, the Wisconsin Constitution, the Wisconsin statutes and the Wisconsin Administrative Code.

3. Respondent is aware of her right to seek legal representation and has been provided an opportunity to obtain legal advice prior to signing this stipulation.

4. Respondent agrees to the adoption of the attached Final Decision and Order by the Board of Nursing. The parties to the Stipulation consent to the entry of the attached Final Decision and Order without further notice, pleading, appearance or consent of the parties. Respondent waives all rights to any appeal of the attached order, if adopted in the form as attached.

5. If the terms of this Stipulation are not acceptable to the Board, the parties shall not be bound by the contents of this Stipulation, and the matter shall be returned to the Division of Enforcement for further proceedings. In the event that this Stipulation is not accepted by the Board, the parties agree not to contend that the Board has been prejudiced or biased in any manner by the consideration of this attempted resolution.

6. The parties to this stipulation agree that the attorney for the Division of Enforcement and the member of the Board of Nursing assigned as an advisor in this investigation may appear before the Board for the purposes of speaking in support of this agreement and answering questions that the Board may have in connection with their deliberations on the stipulation.

7. The Division of Enforcement joins Krista L. Kinziger in recommending that the Board adopt this Stipulation and issue the attached Final Decision and Order.

Krista L. Kinziger
Krista L. Kinziger

7/28/98
Date

Steven M. Gloe
Steven M. Gloe, Attorney
Division of Enforcement

8.3.98
Date

Department of Regulation & Licensing

State of Wisconsin

P.O. Box 8935, Madison, WI 53708-8935
(608)

TTY# (608) 267-2416, hearing or speech
TRS# 1-800-947-3529, impaired only

GUIDELINES FOR PAYMENT OF COSTS AND/OR FORFEITURES

On September 17, 1998, the Board of Nursing
took disciplinary action against your license. Part of the discipline was an assessment of costs and/or a
forfeiture.

The amount of the costs assessed is: \$75.00 Case #: LS9809177NUR

The amount of the forfeiture is: _____ Case # _____

Please submit a check or a money order in the amount of \$75.00

The costs and/or forfeitures are due: October 17, 1998

NAME: Krista L. Kinziger LICENSE NUMBER: 124658

STREET ADDRESS: 2042 Memorial Drive #204

CITY: Green Bay STATE: WI ZIP CODE: 54303

Check whether the payment is for costs or for a forfeiture or both:

COSTS FORFEITURE

Check whether the payment is for an individual license or an establishment license:

INDIVIDUAL ESTABLISHMENT

If a payment plan has been established, the amount due monthly is:

Make checks payable to:

DEPARTMENT OF REGULATION AND LICENSING
1400 E. WASHINGTON AVE., ROOM 141
P.O. BOX 8935
MADISON, WI 53708-8935

#2145 (Rev. 9/96)

Ch. 440.22, Stats.

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For Receiving Use Only

STATE OF WISCONSIN
DEPARTMENT OF REGULATION AND LICENSING
BEFORE THE BOARD OF NURSING

In the Matter of the Disciplinary Proceedings Against

Krista L. Kinziger, RN,

AFFIDAVIT OF MAILING

Respondent.

STATE OF WISCONSIN)
)
COUNTY OF DANE)

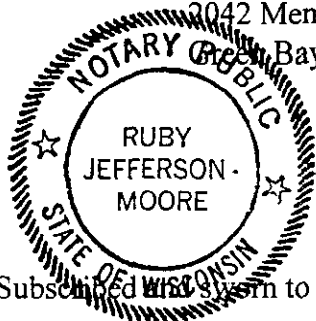
I, Kate Rotenberg, having been duly sworn on oath, state the following to be true and correct based on my personal knowledge:

1. I am employed by the Wisconsin Department of Regulation and Licensing.

2. On September 21, 1998, I served the Final Decision and Order dated September 17, 1998, and Guidelines for Payment of Costs and/or Forfeitures, LS9809177NUR, upon the Respondent Krista L. Kinziger, RN by enclosing true and accurate copies of the above-described documents in an envelope properly stamped and addressed to the above-named Respondent and placing the envelope in the State of Wisconsin mail system to be mailed by the United States Post Office by certified mail. The certified mail receipt number on the envelope is Z 233 819 809.

3. The address used for mailing the Decision is the address that appears in the records of the Department as the Respondent's last-known address and is:

Krista L. Kinziger, RN
2042 Memorial Drive, #204
Green Bay WI 54303



Subscribed and sworn to before me

this 21ST day of September 1998.

Ruby Jefferson-Moore
Notary Public, State of Wisconsin
My commission is permanent.

Kate Rotenberg
Kate Rotenberg
Department of Regulation and Licensing
Office of Legal Counsel

NOTICE OF RIGHTS OF APPEAL

TO: KRISTA L KINZIGER RN

You have been issued an Order. For purposes of service the date of mailing of this Order is 9/21/98. Your rights to request a rehearing and/or judicial review are summarized below and set forth fully in the statutes reprinted on the reverse side.

A. REHEARING.

Any person aggrieved by this order may file a written petition for rehearing within 20 days after service of this order, as provided in section 227.49 of the Wisconsin Statutes. The 20 day period commences on the day of personal service or the date of mailing of this decision. The date of mailing of this Order is shown above.

A petition for rehearing should name as respondent and be filed with the party identified below.

A petition for rehearing shall specify in detail the grounds for relief sought and supporting authorities. Rehearing will be granted only on the basis of some material error of law, material error of fact, or new evidence sufficiently strong to reverse or modify the Order which could not have been previously discovered by due diligence. The agency may order a rehearing or enter an order disposing of the petition without a hearing. If the agency does not enter an order disposing of the petition within 30 days of the filing of the petition, the petition shall be deemed to have been denied at the end of the 30 day period.

A petition for rehearing is not a prerequisite for judicial review.

B. JUDICIAL REVIEW.

Any person aggrieved by this decision may petition for judicial review as specified in section 227.53, Wisconsin Statutes (copy on reverse side). The petition for judicial review must be filed in circuit court where the petitioner resides, except if the petitioner is a non-resident of the state, the proceedings shall be in the circuit court for Dane County. The petition should name as the respondent the Department, Board, Examining Board, or Affiliated Credentialing Board which issued the Order. A copy of the petition for judicial review must also be served upon the respondent at the address listed below.

A petition for judicial review must be served personally or by certified mail on the respondent and filed with the court within 30 days after service of the Order if there is no petition for rehearing, or within 30 days after service of the order finally disposing of a petition for rehearing, or within 30 days after the final disposition by operation of law of any petition for rehearing. Courts have held that the right to judicial review of administrative agency decisions is dependent upon strict compliance with the requirements of sec. 227.53 (1) (a), Stats. This statute requires, among other things, that a petition for review be served upon the agency and be filed with the clerk of the circuit court within the applicable thirty day period.

The 30 day period for serving and filing a petition for judicial review commences on the day after personal service or mailing of the Order by the agency, or, if a petition for rehearing has been timely filed, the day after personal service or mailing of a final decision or disposition by the agency of the petition for rehearing, or the day after the final disposition by operation of the law of a petition for rehearing. The date of mailing of this Order is shown above.

The petition shall state the nature of the petitioner's interest, the facts showing that the petitioner is a person aggrieved by the decision, and the grounds specified in section 227.57, Wisconsin Statutes, upon which the petitioner contends that the decision should be reversed or modified. The petition shall be entitled in the name of the person serving it as Petitioner and the Respondent as described below.

SERVE PETITION FOR REHEARING OR JUDICIAL REVIEW ON:

STATE OF WISCONSIN BOARD OF NURSING
1400 East Washington Avenue
P.O. Box 8935
Madison WI 53708-8935