

**BEFORE THE DENTAL BOARD
OF THE STATE OF IOWA**

IN THE MATTER OF:)	
TAMMY S. BERTCH, R.D.H.)	
1613 Wakonda Drive)	ORDER MODIFYING
Waterloo, IA 50703)	CONDITIONS OF
Dental Hygiene License #2596)	PROBATION
Respondent)	

On this 29th of October, 2008, the Board having reviewed a report from the evaluating facility pursuant to paragraphs 3 and 4 of the Board's Decision and Order dated May 13, 2008, hereby issues this Order modifying the terms and conditions of Respondent's probation.

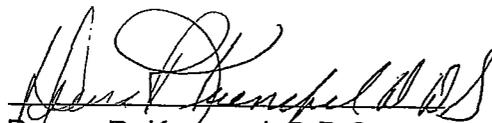
NOW, THEREFORE IT IS HEREBY ORDERED that Respondent shall immediately document evidence of:

1. Respondent shall enroll in the Better Choices Pre-Treatment Program in Waterloo, Iowa, within thirty (30) days of the date of this Order.
2. Respondent shall immediately comply and document successful compliance with all recommendations of the Better Choices facility.
3. Respondent shall sign releases to allow for the free flow of information between the Board and Respondent's evaluators/treatment providers.
4. Respondent shall fully cooperate with random unannounced visits by agents of the Board to determine compliance with this Order.

5. Respondent shall participate in the Board's random drug and alcohol screening program. Respondent agrees to submit to testing at the frequency rate determined by the Board. In addition, Respondent shall submit to unannounced random witnessed blood, urine, hair, or breath analysis samples on demand by any agent or designee of the Board.
6. Respondent shall promptly pay all costs associated with all drug and alcohol screenings.
7. The Respondent shall submit quarterly reports detailing her compliance with the terms of her Order during the remainder of her probationary period. Respondent shall ensure that the reports are submitted prior to the first day of January, April, July, and October, of each calendar year during the probationary period. These reports shall include, but not be limited to, verification attendance and participation with her treatment provider(s).
8. Respondent shall be responsible for all costs associated with compliance with this Order, and shall also be responsible for all costs incurred by the Board in the monitoring of this Order to determine compliance. Respondent shall promptly remit fifty dollars (\$50.00) dollars on or before the first day of January, April, July, and October, of each calendar year for monitoring costs.

This Modifying Order and all other terms and conditions in Respondent's May 13th, 2008, Decision and Order remain in full force and effect.

Dated this 29th day of October, 2008.



Deena R. Kuempel, D.D.S.
Chairperson
Iowa Dental Board
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687

cc: Theresa O'Connell Weeg
Assistant Attorney General
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