

Place a Self-Query Order x

When you order a self-query you will receive (a) an electronic and (b) a paper copy of your results. Successfully complete all four steps to receive your results.

You must agree to the terms in the Rules of Behavior and Subscriber Agreement to continue.

I accept the terms in the Rules of Behavior and Subscriber Agreement

This warning banner provides privacy and security notices consistent with applicable federal laws, directives, and other federal guidance for accessing this Government system, which includes all devices/storage media attached to this system. This system is provided for Government-authorized use only. Unauthorized or improper use of this system is prohibited and may result in disciplinary action and/or civil and criminal penalties. Only specific entities authorized by law may request the disclosure of information from (i.e., query) or submit reports to the National Practitioner Data Bank (NPDB). This is a Privacy Act protected system, with routine use provisions contained in 45 CFR 60.18. Employees accessing the system should do so only in accordance with

By checking the acceptance checkbox above, you agree to:

- Provide complete and accurate responses to requests for information during the National Practitioner Data Bank (NPDB) registration process;
- Keep your passwords and tokens (if applicable) secure;
- Not share your account with any other individual;
- Use your NPDB account only for authorized purposes;
- Review the accuracy of account information;
- Request revocation of your NPDB account if you ever suspect that the security of

CancelSubmit and Continue

Learn about s

Check out the Self-Query information on the self-query individuals and organiza

y Your Order

ler?  
message from the  
ne email to access

Public Burden Statement x

OMB # 0915-0126 expiration date MM/DD/YY

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0915-0126. Public reporting burden for this collection of information is estimated to average 25 minutes to complete this form, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N-39, Rockville, Maryland, 20857.

[Close](#)[Go to Step 1](#)

Which type of

Personal

Use personal

- Applying
- Providing
- Applying
- Requesting

1. Subject Information

2. Payment

3. Review Information

4. Identify Verification

## SELF-QUERY

Confidentiality of Information ✕

Persons and entities that receive confidential information from the NPDB, either directly or indirectly from another party, must use it solely with respect to the purpose for which it was provided. **Any person who violates the confidentiality provisions of the NPDB shall be subject to a civil penalty for each violation.**

In compliance with the Privacy Act, the results of an individual self-query are sent only to the practitioner's home or work address as certified on the self-query form. Individual health care practitioners who obtain information about themselves from the NPDB are permitted to share that information with anyone they choose.

[Close](#)[Go to Step 1](#)

Which type of

 Personal

Use personal

- Applying
- Providing
- Applying
- Requesting

1. Subject Information

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Which type of NPDB search do you need?

Personal     Organizational

**Use personal search if you are ...**

- Applying to a state board for your own license
- Providing results for a school requirement
- Applying for medical malpractice insurance for yourself
- Requesting this for your personal use

Exit

Go to Step 1

1. Subject Information

2. Payment

3. Review Information

4. Identify Verification

## 1. Subject Information (Step 1 of 4)

Please fill out as much information as possible to ensure a timely and accurate response.

## Personal Information

<b>First Name</b>	<b>Middle Name</b>	<b>Last Name</b>	<b>Suffix (Jr, III)</b>
<input type="text" value="First Name"/>	<input type="text" value="Middle Name"/>	<input type="text" value="Last Name"/>	<input type="text" value="Suffix"/>

+ Additional name (e.g. maiden name)

## Gender

 Male
  Female
  Unknown

## Birthdate

## Phone Number

## Ext.

## Delivery Address

The NPDB sends a paper copy of your response to you. The NPDB is prohibited by law from sending a self-query response to a third party (e.g., a state board). [How to enter a military address.](#)

## Type of Address

 Home
  Work

## Organization Name

## Organization Type

## Country

## Address

## Address Line 2

## City

## State

## ZIP

## Profession and Licensure

## License 1

## Profession or Field of Licensure


## Name of Occupation

## Do you have a license for your selected profession or field of licensure?

 Yes
  No / Not sure

## License Number

## State

Professional Schools Attended 

Schools or institutions you attended for your professional degree, training or certification (e.g., medical school, certification program)

## Name of School or Institution

## Completion Year

+ Additional school or institution

## Identification Numbers

## SSN or ITIN (Social Security Number or Individual Taxpayer Identification Number)

+ Additional SSN or ITIN

## NPI (National Provider Identifier)

You must enter your personal NPI if you have one. Leave this field blank if you do not have an NPI.

+ Additional NPI

 Do you have a DEA, FEIN, or UPIN identification number?

## DEA (Drug Enforcement Agency)

+ Additional DEA

## FEIN (Federal Employer Identification Number)

+ Additional FEIN

## UPIN (Unique Physician Identification Numbers)

+ Additional UPIN

## Email and Password

The NPDB only uses your email address to notify you of any status changes to your Self-Query order. You will need your password to sign into your order.

## Email Address

## Type your email again

## Create a new password









## Type your password again

## Mobile Phone (Optional)

 Send a sign-in code by SMS message if I forget my password

## Password Requirements

Passwords *must* have:

-  Between 8 and 14 characters
-  At least one number
-  At least one lower case letter
-  At least one upper case letter
-  At least 1 of these characters: !@#\$%^\*()-\_+[]{}|;:,.<>?
-  At least 5 different characters
-  No repeated characters, such as 'aaaa'
-  New and Confirm Passwords must match

Passwords *must not* be:

- Similar to a word in the dictionary
- Similar to your user ID
- A simple sequence, such as 'abcd1234'
- One of your last 24 passwords

Exit

Save and Finish Later

Go to Step 2

## 2. Payment

## 3. Review Information

## 4. Identify Verification

## Select an Occupation or Field of Licensure



Enter a keyword or phrase to find matching occupations. (Example: "counselor")

Search

### Physician

Physician (MD)

Physician Resident (MD)

Osteopathic Physician (DO)

Osteopathic Physician Resident (DO)

### Nurse - Advanced, Registered, Vocational or Practical

Registered Nurse

Nurse Anesthetist

Nurse Midwife

Nurse Practitioner

Licensed Practical or Vocational Nurse

Don't see what you're looking for?

1. Subject Information

 Edit

2. Payment (Step 2 of 4)

**Order Details**

The fee for a Self-Query order is \$4.00. Additional paper copies are \$4.00 each. Each paper copy is mailed separately in a sealed envelope after your order is processed and your results are available. Allow 7 business days for first class mail delivery. No express delivery is available.

Your Self-Query Order		Total amount due
<input type="text" value="1"/>	Electronic copy (PDF)	\$4.00
<input type="text" value="1"/>	Sealed paper copy (mailed)	

**Billing Information**



Your card is not charged until your self-query results are available online.

**Card Number**

**Expiration Date**

**Name of Cardholder**

**Billing Address**

Same as delivery address     A different address

**Country**

**Address**

**Address Line 2**

**City**

**State**

**ZIP**

Exit


Save and Finish Later

**Go to Step 3**


3. Review Information

4. Identify Verification

1. Subject Information

 Edit

2. Payment

 Edit

3. Review Information (Step 3 of 4)

Review your information to be sure it is correct. Select Edit if you need to make changes.

**Subject Information**

Name:	<b>Joe Jones</b>
Gender:	<b>Male</b>
DOB:	<b>01-01-1960</b>
Phone:	<b>(555) 555-5555</b>
SSN/ITIN:	<b>555-55-5555</b>
Profession/Field of Licensure:	<b>Nurse Anesthetist</b>
License Info:	<b>111111 (VA)</b>
School/Institution, Year:	<b>University College of Medicine, 2000</b>
E-mail Address:	<b>jjones@gmail.com</b>
NPI:	<i>None/NA</i>
DEA:	<i>None/NA</i>
FEIN:	<i>None/NA</i>
UPIN:	<i>None/NA</i>

**i** Self-Queries must be delivered to your personal address. By law, they cannot be delivered to a third party.

Delivery Address: **555 Cabin Rd  
Chantilly, VA 20111**

**Payment Information**

Order Details:	<b>1 Electronic copy (PDF) 1 Sealed, mailed copy (paper)</b>
Total Order Cost:	<b>\$4.00</b>
Cardholder Name:	<b>Joe Jones</b>
Card #:	<b>4111111111111111</b>
Exp:	<b>10/2024</b>
Billing Address:	<b>555 Cabin Rd Chantilly, VA 20111</b>

I certify that the above information is correct.

Exit

Go to Step 4

4. Identify Verification



1. Subject Information

 Edit

2. Payment

 Edit

3. Review Information

 Edit

4. Identify Verification (Step 4 of 4)

The NPDB must verify your identity to keep your information confidential. Verify your identity online or manually on paper. If online verification is successful there is no paper to sign or notarize so the NPDB can process your order right away.

**To verify your identity online your credit must be unlocked.**

### How do you want to verify your identity?

**Online** - *Get your response in seconds*

- Answer 4 questions regarding financial information that only you will know. Questions are provided by an external identity verification service over a secure server.
- **Questions are only displayed once and you must answer them right away.** Your correct answers verify your identity. A notarized signature is NOT required!
- Your order is processed right away. Most electronic responses are available in 30 seconds. \*

I agree to the [Terms of Service](#)

**Manual** - Wait up to 7 business days

- Print a Self-Query identity verification document.
- Take the unsigned document to a notary public and sign it in their presence.
- Provide proof of your identity to the notary by presenting a government-issued form of identification.
- Send the notarized document to the NPDB. Your order is processed after the document is received and verified.

\* Responses may require 1 business day to ensure identity protection.

[Finish Later](#)

## Online Identity Verification Questions

Due to privacy regulations, you must answer all questions now to prove your identity online.

## Question 1

According to your credit profile, you may have opened a mortgage loan in or around February 2016. Please select the lender to whom you currently make your mortgage payments. If you do not have a mortgage, select 'NONE OF THE ABOVE/DOES NOT APPLY'.

- GE CAPITAL MORTGAGE
- PRUDENTIAL HOME MORT
- CHITTENDEN BANK
- ROCK FINANCIAL CORP
- NONE OF THE ABOVE/DOES NOT APPLY

## Question 2

According to your credit profile, you may have opened a Home Equity Line of Credit type loan in or around April 2015. Please select the lender to whom you currently make your payments or made your payments.

- HOMESIDE LENDING
- GMAC MORTGAGE
- NORWEST BANK
- INDEPENDENT MTG
- NONE OF THE ABOVE/DOES NOT APPLY

## Question 3

According to our records, you graduated from which of the following High Schools?

- PEARL RIVER HIGH SCHOOL
- FAIRFIELD HIGH SCHOOL
- CHATSWORTH HILLS ACADEMY
- NORTH MIAMI HIGH SCHOOL
- NONE OF THE ABOVE/DOES NOT APPLY

## Question 4

You currently or previously resided on one of the following streets. Please select the street name from the following choices.

- DOLPHIN
- WELDON
- GOODGE
- MOHAWK

**Don't know the answers to these questions?** [Use manual identity verification](#)

[Submit Answers](#)

[Sign Out](#)

Submit online form



Verify your identity



NPDB processing



Online results report



Paper report mailed

JOHN SMITH

ORDER ID: 7950000124994947

## Next Steps

**The NPDB is processing your order.**

[View Your Order](#)

**Allow 1 business day for order processing.**

NPDB sends you an email when processing is complete and your results are ready. Paper copies of your results are mailed within 1 business day after the online results are available.



**When your envelope arrives, do not open it** if you are sending your self-query to an organization such as a licensing board. Most organizations reject self-query responses if the envelope seal is broken.

Do you have a question?  
[Try our FAQ page](#) or [Contact Us](#)

## View/Modify Your Order

You have completed the order form for your self-query.  
You must complete Identity Verification before we can process your order.

**JONES, JOHN**ORDER ID: 5500000126687387 

- Order form completed
- Identity Verification
- Order processing
- Electronic delivery
- Paper copy mailed

### We are waiting for your Identity Verification

We must receive your notarized Self-Query Identity Verification form before we can process your order. To print another copy, select the [Print Identity Verification](#) button on the right side of this page.

If you need to change something, select the [Edit Your Order Form](#) button. Complete your revisions, then print the revised document and take it to a Notary Public. Most banks have a notary available at no charge for their customers.

#### After your document is notarized:

- Scan all pages of the notarized document and save the files in one of these formats: .gif, .jpg, .pdf, or .png. Be sure all images are clearly readable.
- Use the upload feature at the bottom of this page to select the files and upload them.
- If you cannot use the upload feature, you must mail all pages of the original notarized documents to the address printed on the first page. Allow 7 business days for U.S. first-class mail delivery, 2 business days for overnight delivery.

Allow one business day for the NPDB to process your order after the documents are received, either electronically or by mail delivery. Due to security requirements, we cannot accept documents through fax or email.

#### Upload Your Files

The NPDB automatically receives your files after they are uploaded. Self-Query documents are processed in the order they are received.

[Choose Files to Upload](#)

Use the **Choose Files to Upload** button above or you may drag files from your computer and drop them here

[Print Identity Verification](#)[View Your Order](#)[Edit Your Order Form](#)

## Non-visible Questions and State Changes - Self-Query - Individual

### Non-visible Questions

Label	PDF Name (step)	Location	Response Input Item	Visibility Trigger	Other
Organization Name	Self-Query on an Individual (1)	Below Home and Work radio buttons for Type of Address	Text Entry	The field is displayed if the user selects Work radio button for Type of Address.	
Organization Type	Self-Query on an Individual (1)	Below Organization Name text entry	Drop list		
Organization Description	Self-Query on an Individual (1)	Below Organization Type	Text Entry	The field is displayed if the user selects an organization type that requires a description.	
Specific Name of Occupation	Self-Query on an Individual (1)	Beside Profession or Field of Licensure	Text Entry	The field is displayed if the user selects a profession or field of licensure that requires a description.	“Specialty” is displayed in place of “Specific Name of Occupation” if the selected profession or field of licensure requires specialty information.
Specialty	Self-Query on an Individual (1)	Beside Profession or Field of Licensure	Drop List	The field is displayed if the user selects a profession or field of licensure that requires information for specialty.	“Specific Name of Occupation” is displayed in place of “Specialty” if the selected profession or field of licensure does not require information for specialty.

DEA (Drug Enforcement Agency)	Self-Query on an Individual (1)	Below checkbox "Do you have a DEA, FEIN, or UPIN identification number?"	Text Entry	Field is displayed if user selects the checkbox for "Do you have a DEA, FEIN, or UPIN identification number?"	Selecting the checkbox displays DEA, FEIN and UPIN text entry fields.
FEIN (Federal Employer Identification Number)	Self-Query on an Individual (1)	Below DEA text entry.	Text Entry	The field is displayed if the user selects the checkbox for "Do you have a DEA, FEIN, or UPIN identification number?"	Selecting the checkbox displays DEA, FEIN and UPIN text entry fields.
UPIN (Unique Physician Identification Numbers)	Self-Query on an Individual (1)	Below FEIN text entry	Text Entry	The field is displayed if the user selects the checkbox for "Do you have a DEA, FEIN, or UPIN identification number?"	Selecting the checkbox displays DEA, FEIN and UPIN text entry fields.
Mobile Phone	Self-Query on an Individual (1)	Below checkbox "Send a sign-in code by SMS message if I forget my password"	Text Entry	The field is displayed if the user selects the checkbox for "Send a sign-in code by SMS message if I forget my password"	
Country	Self-Query on an Individual (2)	Below "Same as delivery address" and "A different address" options for Billing Address	Drop List	The field is displayed if the user selects the radio button "A different address"	Selecting "A different address" displays Country, Address, Address Line 2, City, State and ZIP entries. United States is the default selection.

Address	Self-Query on an Individual (2)	Below Country	Text Entry	The field is displayed if the user selects the radio button "A different address"	Selecting "A different address" displays Country, Address, Address Line 2, City, State and ZIP entries.
Address Line 2	Self-Query on an Individual (2)	Below Address	Text Entry	The field is displayed if the user selects the radio button "A different address"	Selecting "A different address" displays Country, Address, Address Line 2, City, State and ZIP entries.
City	Self-Query on an Individual (2)	Below Address Line 2	Text Entry	The field is displayed if the user selects the radio button "A different address"	Selecting "A different address" displays Country, Address, Address Line 2, City, State and ZIP entries.
State	Self-Query on an Individual (2)	Beside City	Drop List	The field is displayed if the user selects the radio button "A different address"	Selecting "A different address" displays Country, Address, Address Line 2, City, State and ZIP entries.
ZIP	Self-Query on an Individual (2)	Below State	Text Entry	The field is displayed if the user selects the radio button "A different address"	Selecting "A different address" displays Country, Address, Address Line 2, City, State and ZIP entries.

Experian Questions	Self-Query on an Individual (4)	After Step (3) - Review Information	Radio button		Question and answer content is determined by Experian. User will be shown four questions, at least one of which contains financial information. The questions are customized based on the user's information. The user may be shown questions other than those pictured in the PDF.
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**State Changes**

Label	PDF Name	Item Type	Trigger
Place a Self-Query Order	Self-Query on an Individual	Modal	When user starts a Self-Query, the modal is displayed.
Public Burden Statement	Self-Query on an Individual	Modal	When the user selects the Public Burden Statement link the modal is displayed.
Confidentiality Statement	Self-Query on an Individual	Modal	When the user selects the Confidentiality link the modal is displayed.



Select an Occupation or Field of Licensure	Self-Query on an Individual	Modal	When the user sets focus on the Profession or Field of Licensure text entry, the modal to select a profession is displayed and focus is set on the Search text entry. The user can enter text in the Search text box to find a specific profession or select a profession from the list without searching. The modal is hidden once the user selects a profession from the list. The user's selection populates the Profession or Field of Licensure text entry.
Other Name for Occupation	Self-Query on an Individual	Text Entry	Text entry is disabled if the user does not select a profession or field of licensure requiring a description.
License Number	Self-Query on an Individual	Text Entry	Text entry is disabled if the user selects the "No/ Not sure" option for "Do you have a license for your selected profession or field of licensure?"
Password Requirements	Self-Query on an Individual	Info box	When the user sets focus on the "Create a new password" text entry, the info box is displayed. The state of each rule changes to indicate whether or the rule is met as the user enters their text.