

Report Notification

NATIONAL HEALTHCARE DATA BANK
NPDB
P.O. Box 10832
Charlottesville, VA 22915-0832
<https://www.npdb.hrsa.gov>

Entity Subject ID: [REDACTED]
DCN: [REDACTED]
Process Date: 11/25/2020 Page 1 of 2
For authorized use by:
[REDACTED]

[REDACTED] - CONTINUOUS QUERY RESPONSE

A. SUBJECT IDENTIFICATION INFORMATION (Recipients should verify that subject identified is, in fact, the subject of interest.)
Practitioner Name: [REDACTED] Gender: [REDACTED]
Date of Birth: [REDACTED]
Entity Subject ID Number: [REDACTED]
Work Address: [REDACTED]
Home Address: [REDACTED]
Social Security Number: [REDACTED] DEA: [REDACTED]
NPI: [REDACTED]
License: [REDACTED]
Professional School(s): [REDACTED]

B. CONTINUOUS QUERY ENROLLMENT INFORMATION
Enrollment Status: Enrolled - 07/08/2020 - 07/31/2021*
* Unless enrollment is canceled by the entity prior to this date
Statutes Queried: Title IV, Section 1921; Section 11208
Entity Name: [REDACTED]
Authorized Submitter: [REDACTED]

C. SUMMARY OF REPORTS ON FILE WITH THE DATA BANK AS OF 11/25/2020

The following report types have been searched:

Medical Malpractice Payment Report(s):	No Reports	Health Plan Action(s):	No Reports
State Licensure Action(s):	Yes, See Below	Professional Society Action(s):	No Reports
Exclusion or Debarment Action(s):	Yes, See Below	DEA/Federal Licensure Action(s):	No Reports
Government Administrative Action(s):	No Reports	Judgment or Conviction Report(s):	No Reports
Clinical Privileges Action(s):	Yes, See Below	Peer Review Organization Action(s):	No Reports

HHS OFFICE OF INSPECTOR GENERAL
EXCLUSION/DEBARMENT
Basis for Action: - INFORMATION NOT PROVIDED
Initial Action: - REINSTATEMENT Date of Action: [REDACTED]
DCN: [REDACTED]

TN BOARD OF MEDICAL EXAMINERS
LICENSE
Basis for Action: - INFORMATION NOT PROVIDED
Initial Action: - LICENSE-MISC: LICENSE RESTORED OR REINSTATED Date of Action: [REDACTED]
DCN: [REDACTED]

HHS OFFICE OF INSPECTOR GENERAL
EXCLUSION/DEBARMENT
Basis for Action: - LICENSE REVOCATION, SUSPENSION OR OTHER DISCIPLINARY ACTION TAKEN BY A FEDERAL, STATE OR LOCAL LICENSING AUTHORITY
Initial Action: - EXCLUSION FROM MEDICARE AND STATE HEALTH CARE PROGRAMS Date of Action: [REDACTED]
DCN: [REDACTED]

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BOARD OF MEDICAL EXAMINERS
LICENSE
Basis for Action: - INFORMATION NOT PROVIDED
Initial Action: - LICENSE SUSPENDED: MENTAL DISORDER Date of Action: [REDACTED]
DCN: [REDACTED]

SOUTHERN TENNESSEE MEDICAL CENTER
CLINICAL PRIVILEGES
Basis for Action: - INFORMATION NOT PROVIDED
Initial Action: - PRIVS SUSPENDED: MENTAL DISORDER Date of Action: [REDACTED]
DCN: [REDACTED]