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DCN: 7950000078783647 Process Date: 01/08/2013

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FAIRFAX CANCER CENTER For authorized use by:

STATE BOARD

FAIRFAX CANCER CENTER - ONE-TIME QUERY RESPONSE

A. SUBJECT IDENTIFICATION INFORMATION (Recipients should verify that subject identified is, in fact, the subject of interest.)

Organization Name: FAIRFAX CANCER CENTER

Organization Type: MEDICAL GROUP/PRACTICE (365)

Work Address: 111 MAIN STREET, FAIRFAX, VA 22033-1234

Social Security Number: ***-**-0012 **ITIN:** 921000012

 DEA:
 123
 Medicare:
 123

 FEIN:
 123456789
 NPI:
 123

License: 123VA, VA

B. QUERY INFORMATION

Statutes Queried: Section 1921, Section 1128E

Query Type: This is a One-Time query response. Your organization will only receive future reports on this practitioner

if another query is submitted.

Entity Name: STATE BOARD (DBID ending in ...72)

Authorized Submitter: TEST SUBMITTER, SUBMITTER, (703) 555-1212

C. SUMMARY OF REPORTS ON FILE WITH THE DATA BANK AS OF 01/08/2013

The following report types have been searched:

State Licensure Action(s): No Reports
Exclusion or Debarment Action(s): No Reports
Government Administrative Action(s): No Reports
Accreditation Action(s): No Reports
Accreditation Action(s): No Reports
No Reports

Health Plan Action(s): No Reports

 No Reports Found	d
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