

February 22, 2012

Carl G Knopke III, MD
Raincross Medical Group
4646 Brockton Ave
Ste 203-1A
Riverside, CA 92506-0173



Dear Dr. Knopke:

Congratulations! You have been recognized as one of **America's Most Compassionate Doctors**.

Treating patients, not just the disease, is what you excel at, and your patients appreciate the kindness you have dispensed along with your medical care.

This award is based on reviews written by hundreds of thousands of patients. While physicians generally receive positive feedback from their patients, only a select few receive praise about the compassion that accompanied their care. In fact, of the nation's 720,000 active physicians, less than 3% were accorded this honor by their patients in 2011.

The **Compassionate Doctor** notation will be prominently displayed in your Profile on a broad collection of web sites, including Patients' Choice, Vitals, Google, and a variety of managed care sites as well as top health insurance sites. More than 500,000 people view these websites on a daily basis.

The **Compassionate Doctor** certification is part of Patients' Choice recognition program, where patients rate and vote for their favorite doctors.

A summary of your Physician Profile is included with this letter. To ensure all aspects of your profile are correct, please go to www.vitals.com and click "login: physician" in the upper right-hand corner of the site. There, you can log in using your previously registered email and password, or if you have not previously registered, you can do so by clicking "get started."

Congratulations once again on this outstanding distinction.

Sincerely,

Erika Boyer
Vice President, Consumer Research

The "Compassionate Doctor" award is tabulated by PatientsChoice.org
210 Clay Avenue, Lyndhurst, NJ 07071 T. 201.624.2480 F. 201.438.4555

Data Summary for Dr. Carl Knopke:

Please review the summary below and, if any changes are needed, you can simply update online by clicking on 'login: physician' in the upper right of our website at www.vitals.com. Or, make corrections on the attached sheet and fax back to us at **201-438-4555**.

Primary Contact Information:

Carl G Knopke III, MD
Raincross Medical Group
4646 Brockton Ave
Ste 203-1A
Riverside, CA 92506-0173

If necessary, please correct your office address on the lines below.

Office Phone Number: 9517742723
Office Fax Number: 9517742740
Years Experience: 6
Languages Spoken: Spanish

Email Address: drknopke@inlandempireweightloss.com
Website Address: _____
Accepting New Patients: Y/N

Specialties: Please list up to four board certifications and the year granted or the most recent re- certification, if applicable:

1. Family Medicine
- 2.
- 3.
- 4.

Special Expertise: _____
Others to add: _____

Medical School: University of Texas Health Science Center at San Antonio
Graduation Year: 2001

Residencies and Fellowships: Include the specialty, the hospital(including city and state), and the years the training ended.

	Specialty	Hospital	City, State	Grad Year
1st Residency:	Family Medicine	Riverside Co Reg Med Ctr	_____, ____	2004
2nd Residency:	_____	Riverside County Regional Medical Centers	Moreno Valley, CA	_____
1st Fellowship:	_____	_____	_____, ____	_____
2nd Fellowship:	_____	_____	_____, ____	_____

Faculty Appointments: List your medical school faculty appointment, if applicable.

Position: _____

Medical School: _____

Hospital Affiliations: List the hospitals for which you have admitting privileges.

Hospital Name	City, State
1. Riverside Community Hospital	Riverside, CA
2. Parkview Community Hospital MC	Riverside, CA
3. _____	_____, ____
4. _____	_____, ____

Peer Referral: List your peers that you would highly recommend to your patients.

Doctor Name	City, State	Doctor Specialty	Relationship (Local Doctor, Fellow Alumni, Co-worker, Friend)
_____	_____, ____	_____	_____
_____	_____, ____	_____	_____
_____	_____, ____	_____	_____

COMPE 2012