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DCN: 7950000165420115 Process Date: 12/22/2020

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TEST CANCER CENTER
For authorized use by:
TEST HOSPITAL

TEST 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: TEST CANCER CENTER

Organization Type: MEDICAL GROUP/PRACTICE (365) Work Address: 111 MAIN ST, FAIRFAX, VA 22222

Social Security Number: ***-**-0012 NPI: 1558444216

License: 123VA, VA

B. QUERY INFORMATION

Statutes Queried: Query Section 1921; Section 1128E

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: TEST HOSPITAL (DBID ending in ...29)
Authorized Submitter: JANE SMITH, CEO, (748) 562-3322

C. SUMMARY OF REPORTS ON FILE WITH THE DATA BANK AS OF 12/22/2020

The following report types have been searched:

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

Administrative Action(s): Health Plan Action(s): No Reports

Action(s): No Reports

No Reports Accreditation Action(s): No Reports

No Reports Accreditation Action(s): No Reports

----- No Reports Found Based on the Subject Information Submitted -----

