

## Profile - DR.0048440

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### General Disclaimer:

The information posted on the Healthcare Professions Profile Program (HPPP) website was provided by applicants for an original license; applicants for reinstatement or reactivation of an existing license; as well as by those individuals renewing a license. While the Division believes the information to be reliable, human or mechanical error remains a possibility, as does the delay in the posting or updating of information. The Division makes no guarantee as to the accuracy or completeness of the information and the information is not verified by the HPPP staff. The Division will take action to obtain compliance with the requirements to provide accurate and timely information as required by law when information is received that indicates information required by law has not been provided or is not accurate.

### Availability Disclaimer:

Healthcare professionals who have an inactive or lapsed license are not required to complete a Healthcare Professions Profile until they apply for reactivation or reinstatement. If you have questions about a missing Healthcare Professions Profile or any missing documents that should be listed, please contact the Healthcare Professions Profile Program at [dora\\_dpo\\_hppp@state.co.us](mailto:dora_dpo_hppp@state.co.us) or 303-894-5942.

**Malpractice Claims Disclaimer:** Some studies have shown that there is no significant correlation between malpractice history and a healthcare professional's competence. At the same time, consumers should have access to malpractice information. To make the best healthcare decisions, you should view this information in perspective. You could miss an opportunity for high quality care by selecting a healthcare professional based solely on malpractice history. When considering malpractice data, please keep in mind: Malpractice histories tend to vary by profession and by specialty. Some professions or specialties are more likely than others to be the subject of litigation. You should take into account how long the healthcare professional has been in practice when considering malpractice averages. The incident causing the malpractice claim may have happened years before a payment is finally made. Sometimes, it takes a long time for a malpractice lawsuit to move through the legal system. Some healthcare professionals work primarily with high-risk patients. These healthcare professionals may have malpractice histories that are higher than average because they specialize in cases or patients who are at very high risk for problems. Settlement of a claim may occur for a variety of reasons that do not necessarily reflect negatively on the professional competence or conduct of the healthcare professional. A payment in settlement of a malpractice action or claim should not be construed as creating a presumption that malpractice has occurred. You may wish to discuss information provided, and malpractice generally, with your healthcare professional.

Name	Meghan Louise Schaefer
Credential	DR.0048440

## HPPP - DR Introduction

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### Healthcare Professions Profile

Please be aware that this profile is only for your Physician license. Do not provide information for other license types you hold on this profile. You will be required to complete a profile for every license you hold that is included in the profiling requirement.

All information provided in this profile must be updated within 30 days of any change of information unless your profession's statute says otherwise, or unless the question specifies otherwise.

## HPPP GLOBAL - Location of Practice

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### Location of Practice

Are you currently practicing in the healthcare profession associated with this profile?

#### Policy:

Applicants are required to list all locations where they practice their licensed profession. Those who hold active licenses but who are not actively practicing in their licensed profession are not required to provide this information.

If an applicant works for a temporary agency, they need not list locations of practice unless they are in a location for more than 30 days.

Yes

## HPPP GLOBAL - WF Location of Practice If Yes

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### Location of Practice

Add your Practice Locations by clicking the "add" button below. If you already have Practice Locations listed that you need to edit you may click the pencil icon in the "Action" column:

*You must enter all locations where you practice the field in which you are licensed.*

Questions #6-#10, are being collected per HB 12-1052. These questions will assist the state in assessing the health professional workforce in your community and will effect the distribution of healthcare workforce practice incentives in under served communities. You are not required to complete questions #6-#10 as a part of your profile submission and your responses to the questions below will not be included in the public search of profiles. Your responses will, however, substantially assist the state in improving access to care within your community. Thank you in advance for your willingness to help improve access to healthcare in Colorado.

Please enter the average hours per week of the services below at this location. For questions #6-#10, please enter a zero (0) in the field if it is a service you do not provide so your information will be included in the assessment.

Address	City	State	Zip Code	Phone Number
12631 E 17th Ave, AO1, B198-2	Aurora	Colorado	80045	3037242038

## HPPP - MEDICAL Education and Training

### Education and Training

Please select the highest level of education received as it pertains to your profession. *If your degree is not listed, please select "Foreign Trained" for education outside of the United States or "Other" for a United States degree that is not included.*

**Policy:**

All applicants are required to provide information regarding the education and training received as it relates to their licensed profession. Applicants will either select their school from a drop-down list, or select their highest level of education.

UMDNJ - New Jersey Medical School

Please enter the year your initial Degree was achieved: *Only enter the year in YYYY format*

## HPPP GLOBAL - Other Licenses

### Other Licenses

Have you ever held, or do you currently hold any other licenses in this profession from any other state, country or province?

**Policy:**

Applicants are required to provide information regarding all licenses held in the preceding ten years for only the profession they are seeking licensure. Information regarding other license types should not be entered. The applicant must include:

1. The year the license was originally issued;
2. The state or country of the license; and
3. The current status of the license.

Yes

## HPPP GLOBAL - Other Licenses if Yes

### Other Licenses

Add your other licenses by clicking the "add" button below. If you already have other licenses listed that you need to edit you may click the pencil icon in the "Action" column:

*You need only include the preceding ten years.*

State	License Status	Year Originally Issued
New Jersey	Active	2008

**HPPP GLOBAL - Board Certifications**

**Board Certifications**

Do you hold any current Board Certifications?

**Policy:**

Only board certifications and specialties recognized by a nationally accredited certifying body are acceptable for entry. The applicant should only enter current and active certifications and specialties for which they are appropriately trained and actively practicing.

No

**HPPP GLOBAL - Practice Specialties**

**Practice Specialties**

Do you have a practice specialty in which you are appropriately trained and actively practicing?

**Policy:**

Only board certifications and specialties recognized by a nationally accredited certifying body are acceptable for entry. The applicant should only enter current and active certifications and specialties for which they are appropriately trained and actively practicing.

Yes

**HPPP - MEDICAL Practice Specialties if Yes**

**Practice Specialties**

Please select all Practice Specialties as applicable:

*If your specialty is not listed, you can select ""Other"" and may provide information in the Optional Narrative section*

Specialty
Obstetrics and Gynecology

**HPPP GLOBAL - CO Hospital Affiliations**

**Colorado Hospital Affiliations**

Do you have a current affiliation or clinical privileges with any Colorado Hospital?

*Hospital Affiliations and clinical privileges include locum tenens lasting for longer than six months, teaching positions, and any relationship with a hospital including positions on boards of directors.*

**Policy:**

Applicants are required to report any current affiliations with Colorado hospitals and healthcare facilities and any out-of-state hospitals. This includes:

1. Locum tenens or other temporary privileges lasting for six months or more.
2. Teaching positions including professorships and clinical instructors.
3. Any fiduciary relationship with any hospital or health care facility, including positions on boards of directors, institutional review boards ("IRBs"), or other non-clinical positions with any hospital or health care facility.

Yes

**HPPP GLOBAL - CO Hospital Affiliations if Yes**

**Colorado Hospital Affiliations**

Add your Colorado hospital affiliations by clicking the "add" button below. If you already have Colorado hospital affiliations listed that you need to edit, you may click the pencil icon in the "Action" column:



Hospital	Affiliation Type	City
University of Colorado Hospital	Faculty	Aurora

## HPPP GLOBAL - Other Hospital Affiliations

### Other Health Care Facilities and Out of State Hospital Affiliations

Do you have a current affiliation with any healthcare facility or a non-Colorado hospital?

*Other healthcare facilities can include ambulatory surgery centers and rehabilitation hospitals. Affiliations with non-Colorado hospitals includes locum tenens lasting for longer than six months, teaching positions, and any relationship with a hospital including positions on boards of directors.*

**Policy:**

Applicants are required to report any current affiliations with Colorado hospitals and healthcare facilities and any out-of-state hospitals. This includes:

1. Locum tenens or other temporary privileges lasting for six months or more.
2. Teaching positions including professorships and clinical instructors.
3. Any fiduciary relationship with any hospital or health care facility, including positions on boards of directors, institutional review boards ("IRBs"), or other non-clinical positions with any hospital or health care facility.

No

## HPPP GLOBAL - Business Ownership

### Business Ownership

Do you have a current business ownership interest in any healthcare-related business?

**Policy:**

Applicants must disclose any current healthcare-related business ownerships whether or not the business is located in Colorado and regardless of the size of the applicant's financial interest. Healthcare-related business ownership interests may include:

1. Any business that markets healthcare-related products or services.
2. Any business that provides "designated health services" as defined in § 25.5-4-414(1), C.R.S.
3. Medical billing services, medical supply companies, healthcare related staffing companies, pharmacies, health insurance companies, or nursing homes.
4. Companies that perform, coordinate, or facilitate independent medical examinations.

No

## HPPP GLOBAL - Employer

### Employer

Do you have an employer in the profession in which you are licensed or are applying for a license?

**Policy:**

Applicants are required to provide information for all current employers as they relate to the license to practice. If an applicant is employed by more than one entity, they must list all employers. The information provided in this section may be the same as provided in the employee contracts field. Both fields must be completed.

Yes

## HPPP GLOBAL - Employer if Yes

### Employer

Add your current Employer(s) by clicking the "add" button below. If you already have employers listed that you need to edit, you may click the pencil icon in the "Action" column:

List all current employers. If you work for a temporary agency, please list the agency as your employer. Any changes in employers must be updated within one year of the change.

Employer Name	Address	City	State	Zip Code	Phone Number
University of Colorado	12631 E 17th Ave, AO1, B198-2	Aurora	Colorado	80045	(303) 724-2038

## HPPP GLOBAL - Employment Contracts

### Employment Contracts

Do you have a contract with any business whose mission relates to healthcare services or products where the value is greater than \$5000 annually?

*This does not include contracts with insurance providers. Any contract with a hospital, durable medical equipment company or pharmaceutical company must be reported.*

**Policy:**

Healthcare related employment contracts with an annual total value of more than five thousand dollars must be included in an applicant's profile. Employment contracts include permanent, temporary, or independent contractor agreements. The applicant/licensee must also disclose contracts with any entities disclosed in section D. of this policy. The information required includes:

1. The entity with whom the applicant is contracted;
2. The length of the contract
3. The applicants role with the entity (employee, temporary employee or independent contractor);

Applicants/licensees who are working in a group setting and are a named party to a contract, providing services or duties outlined in the contract, or expected to receive compensation or gifts with an annual value of greater than five thousand dollars are required to report the contract. Updates to the employment contract information provided in the profile must be made within one year of the change.

No

## HPPP GLOBAL - Disciplinary Actions

### Disciplinary Actions

Have you ever had public disciplinary action taken against your license by any board or licensing agency in any state or country?

**Policy:**

Applicants are required to disclose any public disciplinary actions, public actions, agreements to cease or restrict practice or any order restricting or suspending the applicant's license regardless of how long ago the action was taken. Actions from all countries, states, and jurisdictions, including those taken in Colorado must be reported. This also includes:

1. Suspension
2. Revocation
3. Probation
4. Limitation on or Conditional License
5. Public Letter of Admonition or Reprimand
6. Agreement to Temporarily Cease Practice
7. Agreement to Restrict Practice

Copies of all public action documents must be submitted to the Healthcare Professions Profiling Program (HPPP). The profile must include the year of the action. If a public action only includes a restriction or suspension, the action should only be listed under the restriction and suspension question. All other actions should be listed under disciplinary actions. The same action need not be reported multiple times. Actions that are not considered public are not required to be reported.

No

## HPPP GLOBAL - Restrictions and Suspensions

### Restrictions and Suspensions

Have you ever entered into any agreement or stipulation to temporarily cease your practice or had a board order issued restricting or suspending your license?

**Policy:**

Applicants are required to disclose any public disciplinary actions, public actions, agreements to cease or restrict practice or any order restricting or suspending the applicant's license regardless of how long ago the action was taken. Actions from all countries, states, and jurisdictions, including those

taken in Colorado must be reported. This also includes:

1. Suspension
2. Revocation
3. Probation
4. Limitation on or Conditional License
5. Public Letter of Admonition or Reprimand
6. Agreement to Temporarily Cease Practice
7. Agreement to Restrict Practice

Copies of all public action documents must be submitted to the Healthcare Professions Profiling Program (HPPP). The profile must include the year of the action. If a public action only includes a restriction or suspension, the action should only be listed under the restriction and suspension question. All other actions should be listed under disciplinary actions. The same action need not be reported multiple times. Actions that are not considered public are not required to be reported.

No

## **HPPP GLOBAL - Healthcare Facility Actions**

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### **Healthcare Facility Actions**

Since September 1, 1990, have you had any final actions resulting in involuntary limitations or probationary status on or reduction, nonrenewal, denial, revocation or suspension of medical staff membership or clinical privileges at a hospital or healthcare facility? You are not required to report a precautionary or administrative suspension unless you resigned your medical staff membership or clinical privileges while the suspension was pending.

**Policy:**

Any involuntary actions from a hospital or healthcare facility occurring after September 1, 1990 must be reported. These actions include limitation, probationary status, reduction, nonrenewal, denial, revocation, or suspension of staff or clinical privileges at any hospital or healthcare facility. The reporting requirements include:

1. The name of the facility or entity that took the action;
2. The date of the action;
3. The type of action;
4. The duration of the action; and
5. Whether the terms or conditions of the action have been completed.

No

## **HPPP GLOBAL - Termination of Employment**

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### **Termination of Employment**

Have you ever been terminated by an employer for a reason that would be considered a violation of your profession's practice law?

**Policy:**

Applicants are required to report any termination of employment where the grounds for termination may constitute a violation of the laws governing their practice. The applicant must report:

1. The name of the employer that terminated the employment; and
2. The effective date of the termination.

No

## **HPPP GLOBAL - DEA Registration**

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### **DEA Registration Surrender**

Have you ever had to involuntarily surrender your United States Drug Enforcement Agency Administration Registration?

No

## **HPPP GLOBAL - Convictions**

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## Convictions

Since you were issued a license to practice your profession in any state or country, have you had any final criminal conviction(s) or plea arrangement(s) resulting from the commission or alleged commission of a felony or crime of moral turpitude in any jurisdiction?

### **Policy:**

All applicants are required to report any final criminal conviction or plea arrangement resulting from a felony or crime of moral turpitude in any jurisdiction. Applicants are only required to report criminal convictions finalized after they were issued a license to practice their profession from any jurisdiction. The Director of the Division of Professions and Occupations ("Director") interprets the terms as follows:

**A. Felony Conviction:** A felony conviction includes a conviction of or a plea of guilty to any crime that:

1. Was committed in the state of Colorado and defined as a felony in the state of Colorado;
2. Was committed in any jurisdiction and defined as a felony under the law of that jurisdiction;
3. Was committed in any jurisdiction and the elements would meet the definition of a felony under Colorado law.

**B. Crime of Moral Turpitude:** The following misdemeanors are considered crimes of moral turpitude and must be included in profiles (all references to title, article, or part number refer to the Colorado Revised Statutes):

1. Assault, menacing, unlawful sexual behavior, or other offenses set forth in Title 18, Article 3;
2. Arson, theft, trespass, criminal mischief, or other offenses set forth in Title 18, Article 4;
3. Any of the offenses involving fraud set forth in Title 18, Article 5;
4. Computer crime set forth in Title 18, Article 5.5;
5. Any of the offenses involving family relations set forth in Title 18, Article 6, Parts 4 (wrongs to children), when committed knowingly or recklessly; 6 (harboring a minor); or 8 (domestic violence);
6. Any offense constituting wrongs to at-risk adults set forth in Title 18, Article 6.5;
7. Prostitution, indecent exposure, criminal invasion of privacy, or other offenses set forth in Title 18, Article 7;
8. Any offense in any jurisdiction that is committed intentionally, knowingly, or recklessly, and involves violence, coercion, threats, cruelty, fraud, deception, or deprivation of legally recognized rights; or
9. Any conspiracy, solicitation, or criminal attempt to commit any of the above offenses, or participation as an accessory to any of the above offenses.

**C. Final Conviction or Plea Arrangement:** A final criminal conviction or plea arrangement must be reported according to the timeline outlined in the applicant's professional license governing statute, or within 30 days of sentencing following a court or jury verdict, or sentencing following the entry of a plea of guilty, no contest, or nolo contendere. If an appeal is pending at the time the profile is completed, the conviction must still be reported but can be removed at a later date by the applicant if the appeal results in a reversal of the conviction. Additionally, if an applicant successfully completes the terms of a deferred judgment and the guilty plea is withdrawn, the applicant may update their profile accordingly. Items that do not need to be reported include:

1. Juvenile adjudications; and
2. A conviction that has been sealed or expunged by a court.

No

## HPPP GLOBAL - Malpractice Claims

### Malpractice Claims

Since September 1, 1990, have you had any final judgment, entered into a settlement, or paid an arbitration award for malpractice?

### **Policy:**

Any final judgment, settlement entered into, or arbitration award paid on behalf of the applicant on or after September 1, 1990 for medical malpractice must be reported.

Applicants who report a final settlement for medical malpractice must identify the mediator that aided in the settlement, if applicable. The Director finds that the identity of a mediator is "applicable" and reportable if a mediator was actively involved in the settlement negotiations and prepared or signed a document outlining the parties' agreement.

Additionally, all applicants must report if they have ever been refused, limited, restricted or terminated by any malpractice insurance carrier. A copy of the refusal from the malpractice insurance carrier must be provided and the year of the refusal is must be entered into the profile. Termination due to non-payment does not need to be reported.

No

## HPPP GLOBAL - Malpractice Carrier Refusal

### Malpractice Carrier Refusal

Have you been denied liability insurance, or has your liability insurance coverage been limited, restricted or terminated by the insurance carrier?

*This does not include cancellations or terminations due to non-payment*

**Policy:**

Any final judgment, settlement entered into, or arbitration award paid on behalf of the applicant on or after September 1, 1990 for medical malpractice must be reported.

Applicants who report a final settlement for medical malpractice must identify the mediator that aided in the settlement, if applicable. The Director finds that the identity of a mediator is "applicable" and reportable if a mediator was actively involved in the settlement negotiations and prepared or signed a document outlining the parties' agreement.

Additionally, all applicants must report if they have ever been refused, limited, restricted or terminated by any malpractice insurance carrier. A copy of the refusal from the malpractice insurance carrier must be provided and the year of the refusal is must be entered into the profile. Termination due to non-payment does not need to be reported.

No

## HPPP GLOBAL - Optional Narrative

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### Optional Narrative

Please provide any information regarding awards and/or recognitions you have received, or charity care you have provided that directly relate to your profession.

*Please be aware that the Director may remove any information that is not pertinent or may be considered inappropriate.*

## HPPP GLOBAL - Attestation

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### Attestation

By submitting this Healthcare Professions Profile to the Division of Professions and Occupations you are attesting that:

- You are the person identified in this profile; or
- You are authorized to submit information on behalf of the person identified in this profile; and
- The information contained herein is true and correct to the best of my knowledge.

Enter today's date:

04/15/2011