

Medical Professional Information Profile

This report provides credentialing information for:

Name: **Freeman, Emily Ann**

Social Security Number: **XXX-XX-Redacted**

Date of Birth: **May 30, 1988**

FID#: **300389681**

Recipient: **OH - State Medical Board of Ohio**

Delivery Date: **05/10/2022**

ABOUT THIS PROFILE

The Federation Credentials Verification Service (FCVS) was retained by the above referenced medical professional to verify his/her medical credentials for submission to your agency/organization. Unless noted otherwise, all documents contained in this report were received directly from the issuing institution per written request made by FCVS.

NOTICE: All documents bearing an original Official FCVS seal are certified to be an exact reproduction of the original. Where required, original documents are provided according to the agreements with the Institution issuing such document. FCVS maintains all original documents (excluding third-party examination transcripts) in the physician's source file.

This FCVS Medical Professional Information Profile ("Profile") is compiled and provided by the Federation of State Medical Boards of the United States, Inc. (Federation) as a reference source for, and only for, its member boards and other entities authorized by the Federation. The Profile embodies and contains confidential business information because the information, and the format and presentation of that information, comprise trade secrets of the Federation and because the Profile's disclosure would harm the Federation by providing others with an unfair business advantage in competing with the Federation's FCVS services. Further, the form of the Profile and the contents of this Profile, including the compilation of information in this Profile, are the Federation's copyrighted works and proprietary, confidential information and are subject to the protections of United States laws governing copyright, trademark and trade secrets, as well as various state laws protecting the Federation's trade secrets and other intellectual property rights. This Profile and its contents may not be (1) copied, reformatted, modified, published or displayed publicly or (2) used, disclosed, distributed, shared or sold, in whole or part, for any purpose, including use to establish any database or files as a compendium or otherwise, all of which is strictly prohibited without the express written consent of the Federation's CEO.

I, the undersigned, hereby certify under oath that I am the person named in this application, that all statements I have or shall make with respect thereto are true, that I am the original and lawful possessor and person named in the various forms and credentials furnished or to be furnished with respect to my application and that all documents, forms or copies thereof furnished or to be furnished with respect to my application are strictly true in every aspect.

I acknowledge that I have answered all questions contained in the application truthfully and completely. I further acknowledge that failure on my part to answer questions truthfully and completely may lead to me being prosecuted under appropriate federal and state laws.

I authorize and request every person, hospital, clinic, government agency (local, state, federal or foreign), court, association, institution or law enforcement agency having custody or control of any documents, records and other information pertaining to me to furnish to the Federation Credentials Verification Service any such information, including documents, records regarding charges or complaints filed against me, formal or informal, pending or closed, or any other pertinent data and to permit the Federation Credentials Verification Service or any of its agents or representatives to inspect and make copies of such documents, records, and other information in connection with this application.

I hereby release, discharge and exonerate the Federation Credentials Verification Service, its agents or representatives and any person furnishing information, of any and all liability of every nature and kind arising out of investigation made by the Federation Credentials Verification Service. I authorize the Federation Credentials Verification Service to release information, material, documents, orders or the like relating to me or this application to any entity at my request.

Notary: Your seal (or stamp) must be partly upon the photo and partly upon the signature of the applicant.



Notary Seal: HANNAH STRUCKHOFF, Notary Public, State of Missouri, St. Louis City, Commission # 21989336, My Commission Expires 03-07-2025. Applicant's signature: FREEMAN. Applicant's Printed Last Name: FREEMAN. Applicant's Printed First Name, Middle Initial, and Suffix (e.g., Jr.): Emily. Date of Signature (must correspond to date of notarization): 4-4-2022.



State of Missouri, County of St. Louis City

I certify that on the date set forth below the individual named above did appear personally before me and that I did identify this applicant by: (a) comparing his/her physical appearance with the photograph on the identifying document presented by the applicant and with the photograph affixed hereto, and (b) comparing the applicant's signature made in my presence on this form with the signature on his/her identifying document. The statements on this document are subscribed and sworn to before me by the applicant on this 4 day of April, 2022.

Notary Public Signature: Hannah Struckhoff

My Notary Commission Expires: 3/7/2025

Please complete and mail this original document to the Federation of State Medical Boards at:

400 FULLER WISER ROAD | EULESS, TX 76039 | TEL (817) 868-5000

Biographic Information

Medical professional Name(s): **Freeman, Emily Ann**

Date of Birth: May 30, 1988

Place of Birth: Alton, Illinois, UNITED STATES

Contact Information

Home Address: 239 Crandon Drive
ST LOUIS, MO 63105
UNITED STATES

Mobile Phone: (618) 830-9589

Email: emil.freeman@gmail.com

Credentials Analysis Information for Identity

There is no Omission/Discrepancy/Miscellaneous information identified.



The Chronology of Activities is a comprehensive report of a medical professional's activities as reported to FCVS in the medical professional application.

Start Date	End Date	Activity Type	Location
08/06/2012	04/30/2016	Medical Education	Kansas City University of Medicine and Biosciences Kansas City Missouri UNITED STATES
07/01/2016	06/30/2020	Postgraduate Training	Akron General Medical Center/NEOMED Program Akron Ohio UNITED STATES
07/01/2020	06/30/2022	Postgraduate Training	Washington University/B-JH/SLCH Consortium Program Saint Louis Missouri UNITED STATES

End of Chronology of Activities report for: Freeman, Emily Ann



Medical Education

Medical School: Kansas City University of Medicine and Biosciences

Location: Kansas City, MO
UNITED STATES

Credentials Analysis Information for Medical Education

There is no Omission/Discrepancy/Miscellaneous information identified.



FEDERATION CREDENTIALS
VERIFICATION SERVICE



Institution Name: Kansas City University of Medicine and Biosciences

City: Kansas City

State/Province: Missouri

Country: UNITED STATES

Premedical Education:

Years of education required for admission to your medical school: 4

Credential/degree presented by the applicant for admission to your medical school: **Baccalaureate**

Enrollment and Participation:

Our records indicate that **Freeman, Emily Ann**
 attended our medical school for a total of **156** weeks of medical education on the following dates:
 From MM/DD/YYYY: **08/13/2012** To MM/DD/YYYY: **04/30/2016**
 This individual was awarded the degree of **Doctor of Osteopathic Medicine** on **05/07/2016**

DS
ET

Unusual circumstances

1. Do this individual's official records reflect (an) interruption(s) in his/her medical education? YES NO N/A

If YES, please select the reason(s) for, indicate the dates of the interruption(s) or extension(s) and check whether the interruption/extension was approved or unapproved.

			From MM/DD/YYYY:	To MM/DD/YYYY:
Personal/Family	Applicable	N/A	/ /	/ /
Academic remediation	Applicable	N/A	/ /	/ /
Health	Applicable	N/A	/ /	/ /
Financial	Applicable	N/A	/ /	/ /
Participation in joint degree program (e.g., MD/PhD)	Applicable	N/A	/ /	/ /
Other	Applicable	N/A	/ /	/ /

Other Explanation:

2. Do this individual's official records reflect that he/she was ever placed on academic or disciplinary probation during his/her medical education? YES NO N/A

If YES, please select the reason(s) for the probation and indicate the date(s) of placement on and removal from probation.

			From MM/DD/YYYY:	To MM/DD/YYYY:
Academic Probation	Applicable	N/A	/ /	/ /
Probation for unprofessional conduct/behavior	Applicable	N/A	/ /	/ /
Probation for other reason	Applicable	N/A	/ /	/ /

Other Reason Explanation:

3. Do this individual's official records reflect that he/she was ever disciplined for unprofessional conduct/behavioral reasons by the medical school or parent university? YES NO N/A

If YES, please provide detailed information about the circumstances and outcome(s):

4. Do this individual's official records reflect that he/she was ever the subject of negative reports for behavioral reasons or an investigation by the medical school or parent university? YES NO N/A

If YES, please provide detailed information about the circumstances and outcome(s):

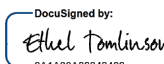
5. Do this individual's official records reflect that there were any limitations or special requirements imposed on the individual because of questions of academic incompetence, disciplinary problems, or any other reason? YES NO N/A

If YES, please provide detailed information about the nature of the limitations or special requirements:

6. Attach Transcript **7. Attach Diploma** **8. Do you have a Dean's Letter to Attach?** YES NO **9. Would you like to upload an additional attachment?** YES NO



Attestation of Person completing Verification of Medical Education document: I hereby attest that the information contained herein accurately reflects the training records of the above-named physician.

<p>ELECTRONIC SEAL VERIFIED</p>	<p>Name: Ethel Tomlinson</p> <p>Title: Enrollment and Academic Records Specialist 1</p> <p>Signature:  <small>DocuSigned by: Ethel Tomlinson BA1A80A89343469...</small></p> <p>Date of Signature: 4/12/2022</p> <p style="text-align: right;">Email: registrar@kansascity.edu</p>
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Name: Emily Ann Freeman

Matriculation Date: Aug 13, 2012

Degree/Date Granted: DO May 7, 2016

Program/Degree/Curriculum: Professional/Dr Osteopathic Med/Osteopathic Medicine

Honors:

Previous Institution: Montana State University-Bozeman, MS

Cumulative GPA: 2.934

Class Rank: 153 of 251

Course Id	Title	Grade	%	Credits	QPnts	
Fall Term 2012						
BCLS	Basic Life Support	S		0.00	0.000	
MED 101	Foundations of Med	B-		6.00	16.020	
MED 102	Musculoskeletal	B+		9.00	29.970	
MED 107	Cardiopulmonary I	B-		6.50	17.355	
OCS 101	Osteo Clin Skills 1	B		4.00	12.000	
	Attempt	Earned	Total	GPACrd	QPnts	GPA
Term	25.50	25.50	25.50	25.50	75.345	2.955
Cum	25.50	25.50	25.50	25.50	75.345	2.955
Spring Term 2013						
CUM Ex I	Cumulative Exam I	S		0.00	0.000	
MED 106	Gastrointestinal	B		7.00	21.000	
MED 108	Renal	B-		8.00	21.360	
MED 109	Cardiopulmonary II	B		5.00	15.000	
OCS 102	Osteo Clin Skills 2	B		3.00	9.000	
	Attempt	Earned	Total	GPACrd	QPnts	GPA
Term	23.00	23.00	23.00	23.00	66.360	2.885
Cum	48.50	48.50	48.50	48.50	141.705	2.922
Fall Term 2013						
IDIS 299	Behav Sci Resrch (E)	S		2.00	0.000	
MED 210	Skin, Blood & Lymph	B+		6.50	21.645	
MED 211	Neuroscience I	B-		7.00	18.690	
MED 212	Neuroscience II	B-		5.50	14.685	
OCS 201	Osteo Clin Skills 3	B-		3.00	8.010	
	Attempt	Earned	Total	GPACrd	QPnts	GPA
Term	24.00	24.00	24.00	22.00	63.030	2.865
Cum	72.50	72.50	72.50	70.50	204.735	2.904
Spring Term 2014						
IDIS 199	Behav Sci Resrch (E)	S		2.00	0.000	
MBIO 215	Clin Immun & Microb	S		0.50	0.000	
MED 202	Endocrine	B		6.50	19.500	
MED 203	Reproduction & Dev	B		10.00	30.000	
OCS 202	Osteopathic Clin IV	B+		2.50	8.325	
	Attempt	Earned	Total	GPACrd	QPnts	GPA
Term	21.50	21.50	21.50	19.00	57.825	3.043
Cum	94.00	94.00	94.00	89.50	262.560	2.934

Course Id	Title	Grade	%	Credits	QPnts	
Fall Term 2014						
IMED 301	Internal Medicine I	HP		4.00	0.000	
OBYG 301	OB/GYN	H		4.00	0.000	
PEDS 301	Pediatrics	HP		4.00	0.000	
PSYC 301	Psychiatry	H		4.00	0.000	
SURG 301	Surgery I	P		4.00	0.000	
	Attempt	Earned	Total	GPACrd	QPnts	GPA
Term	20.00	20.00	20.00	0.00	0.000	0.000
Cum	114.00	114.00	114.00	89.50	262.560	2.934
Spring Term 2015						
FMED 301	Family Medicine I	P		4.00	0.000	
FMED 302	Family Medicine II	P		4.00	0.000	
IMED 302	Internal Medicine II	HP		4.00	0.000	
OBYG 406	General OB/GYN	P		4.00	0.000	
SURG 302	Surgery II	P		4.00	0.000	
	Attempt	Earned	Total	GPACrd	QPnts	GPA
Term	20.00	20.00	20.00	0.00	0.000	0.000
Cum	134.00	134.00	134.00	89.50	262.560	2.934
Fall Term 2015						
CLMD 406	Clinical Mgmt Review	P		4.00	0.000	
EMED 401	Emergency Med	P		4.00	0.000	
OBYG 403	Gen Gynecology (E)	P		4.00	0.000	
OBYG 405	General Obstetrics	P		4.00	0.000	
OBYG 406	General OB/GYN	P		4.00	0.000	
OBYG 406s	General OB/GYN (S)	P		4.00	0.000	
OBYG 406s	General OB/GYN (S)	P		4.00	0.000	
	Attempt	Earned	Total	GPACrd	QPnts	GPA
Term	28.00	28.00	28.00	0.00	0.000	0.000
Cum	162.00	162.00	162.00	89.50	262.560	2.934
Spring Term 2016						
CLMD 407	Clin Mgmt Review II	P		4.00	0.000	
IMED 406	Cardiology (E)	P		4.00	0.000	
OBYG 406	General OB/GYN	P		4.00	0.000	
SURG 409	Plastic Surgery (E)	P		4.00	0.000	
	Attempt	Earned	Total	GPACrd	QPnts	GPA
Term	16.00	16.00	16.00	0.00	0.000	0.000
Cum	178.00	178.00	178.00	89.50	262.560	2.934

End of Transcript

**ELECTRONIC
 SEAL
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IN ACCORDANCE WITH THE FAMILY EDUCATIONAL RIGHTS
 AND PRIVACY ACT OF 1974, AS AMENDED, TRANSCRIPTS
 MAY NOT BE RELEASED TO A THIRD PARTY WITHOUT THE
 WRITTEN CONSENT OF THE STUDENT

Name: Ms. Emily Ann Freeman

Matriculation Date: Jan 16, 2013

Degree/Date Granted: MA May 7, 2016

Program/Degree/Curriculum: Bioethics Dual DO/Master of Arts/Bioethics

Honors:

Previous Institution: Montana State University-Bozeman, MS

Cumulative GPA: 3.847

Class Rank: 5 of 9

Course Id	Title	Grade	%	Credits	QPnts		
Fall Term 2012							
IDIS 110	Ethics for Phys (E)	S		1.00	0.000		
	Attempt	Earned	Total	GPACrd	QPnts	GPA	
Term	1.00	1.00	1.00	0.00	0.000	0.000	
Cum	1.00	1.00	1.00	0.00	0.000	0.000	
Spring Term 2013							
BETH 506	Expl Found of Bioeth	A		2.00	8.000		
	Attempt	Earned	Total	GPACrd	QPnts	GPA	
Term	2.00	2.00	2.00	2.00	8.000	4.000	
Cum	3.00	3.00	3.00	2.00	8.000	4.000	
Summer Term 2013							
BETH 501	Hist & Meth in Ethic	B		3.00	9.000		
BETH 503	Religion & Bioethics	A		3.00	12.000		
	Attempt	Earned	Total	GPACrd	QPnts	GPA	
Term	6.00	6.00	6.00	6.00	21.000	3.500	
Cum	9.00	9.00	9.00	8.00	29.000	3.625	
Spring Term 2014							
BETH 519	Film&Creative Imagin	A		3.00	12.000		
	Attempt	Earned	Total	GPACrd	QPnts	GPA	
Term	3.00	3.00	3.00	3.00	12.000	4.000	
Cum	12.00	12.00	12.00	11.00	41.000	3.727	
Summer Term 2014							
BETH 504	Diversity & Bioethic	A		3.00	12.000		
BETH 505	Bioethics & Pub Pol	A		3.00	12.000		
BETH 516	Pediatric Ethics (E)	A		3.00	12.000		
	Attempt	Earned	Total	GPACrd	QPnts	GPA	
Term	9.00	9.00	9.00	9.00	36.000	4.000	
Cum	21.00	21.00	21.00	20.00	77.000	3.850	

Course Id	Title	Grade	%	Credits	QPnts		
Fall Term 2014							
BETH 515	Bioethics & Law (E)	A-		3.00	11.010		
	Attempt	Earned	Total	GPACrd	QPnts	GPA	
Term	3.00	3.00	3.00	3.00	11.010	3.670	
Cum	24.00	24.00	24.00	23.00	88.010	3.827	
Spring Term 2015							
BETH 507	Clinical Dilemmas	A		3.00	12.000		
	Attempt	Earned	Total	GPACrd	QPnts	GPA	
Term	3.00	3.00	3.00	3.00	12.000	4.000	
Cum	27.00	27.00	27.00	26.00	100.010	3.847	
Spring Term 2016							
BETH 550	Bioeth Final Project	P		3.00	0.000		
	Attempt	Earned	Total	GPACrd	QPnts	GPA	
Term	3.00	3.00	3.00	0.00	0.000	0.000	
Cum	30.00	30.00	30.00	26.00	100.010	3.847	
End of Transcript							

Kansas City University of Medicine and Biosciences

BE IT KNOWN THAT

Emily Ann Freeman

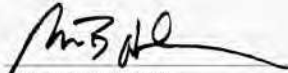
HAVING SUCCESSFULLY COMPLETED ALL STUDIES
AND REQUIREMENTS OF THE COLLEGE OF OSTEOPATHIC MEDICINE
AND HAVING BEEN SO RECOMMENDED BY THE FACULTY
IS HEREBY AWARDED THE DEGREE OF

Doctor of Osteopathic Medicine

CONFERRED WITH ALL THE RIGHTS AND PRIVILEGES PERTAINING THERETO.

IN WITNESS THEREOF, WE THE TRUSTEES AND OFFICERS
OF THE UNIVERSITY HAVE AFFIXED OUR SEAL AND SIGNATURES.

GIVEN AT KANSAS CITY, MISSOURI,
THIS SEVENTH DAY OF MAY IN THE YEAR TWO THOUSAND SIXTEEN.



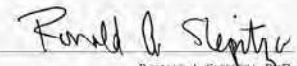
MARG B. HAHN, DO, FAOCA
President and Chief Executive Officer



BRUCE D. DURBIN, DO, JD, FCLM, FACOI
Executive Vice President, Academic Affairs,
Provost and Dean, College of Osteopathic Medicine



MARSHALL D. WALKER, DO
Chairman, Board of Trustees



RONALD A. SLEZYNA, PhD
Secretary, Board of Trustees

**ELECTRONIC
SEAL
VERIFIED**



September 1, 2015

Medical Student Performance Evaluation
Ms. Emily A. Freeman

Identifying Information

Ms. Emily Ann Freeman is a fourth-year student in good standing at Kansas City University of Medicine and Biosciences College of Osteopathic Medicine in Kansas City, Missouri. Her cumulative GPA is 2.934. Her COMLEX 1 score is 515. Her COMLEX Level 2 (CE), Cognitive Evaluation score is 533. She successfully passed the COMLEX Level 2, (PE) Performance Evaluation exam.

She matriculated to KCU in August 13, 2012 and her anticipated date of graduation is May, 2016.

Prior to matriculating to KCU, she received a Bachelor of Science from Montana State University-Bozeman and a Master of Science from Montana State University-Bozeman.

Description of Curriculum

The KCU curriculum consists of a systems based approach during the first and second year of medical school by incorporating the principles of systems based learning, interdisciplinary team based learning, and patient based concepts in health and disease.

KCU medical students have completed a comprehensive study of all systems by the end of the second year. This course of study includes clinical encounters, patient simulation, and the use of high fidelity simulators as part of their clinical training. Years III and IV are the clinical years where students rotate and learn on the wards, in clinics, and in medical offices. Elective opportunities provide time for student growth, exploration, and research.

Research, Awards, and Honors

Richard R. Suminski, Jason A. Wasserman, Carlene A. Mayfield, Emily Freeman, Rachel Brandl. Bicycling Policy is indirectly associated with Overweight/Obesity. American Journal of Preventive Medicine. 2014; 47(6): 715-721.

KCU Clinical Honors Scholarship, 2015

Honors in Obstetrics and Gynecology and Psychiatry Rotations

Academic Progress

Preceptor summary comments regarding performance on clinical clerkships are included below. Clinical clerkships are reported in chronological order.

Early Clinical Experience — Pass

Student doctor Freeman achieved the appropriate fund of knowledge for the level of her training.

Pediatrics (Core) — High Pass

Medical student Freeman successfully met all the course requirements.

Obstetrics/Gynecology (Core) — Honors

Emily is a super student. She is knowledgeable, friendly, good sense of humor and great with patients and staff. She is going to be a top physician in her field. I would strongly encourage any residency program to select her.

Psychiatry (Core) — Honors

Ms. Freeman met all the challenges presented during this rotation.

Surgery I (Core) — Pass

Outstanding student.

Internal Medicine I (Core) — High Pass

Emily is very dedicated. Hard working. On time. Professional. A joy to work with.

Surgery II (Core) — Pass

Successfully achieved core requirements.

Obstetrics/Gynecology (Elec) — Pass

Emily displayed a good understanding of basic obstetrics issues and was able to critically solve problems in more complicated cases. She expressed a desire to learn about the complicated issues she faced while on rotation.

Emily has a fantastic bedside manner and is professional in her behavior in the labor suite. She was a pleasure to have on rotation and very easy to teach.

Family Medicine I (Core) — Pass

Emily is a spectacular medical student that was greatly accepted in our community. She did a wonderful job and took on the EHR with ease. She impressed me and my patients. The patients adored seeing her and I feel her passion for medicine is advanced.

In short "Wow!!!!"

Emily is one of the absolute best students that I have ever worked with! She is very motivated to learn, very compassionate and a very quick learner. She understands to take care of the entire patient and not just focus on 1 specific problem. Her notes are fantastic! She is a true pleasure to work with and will be an outstanding physician!

Family Medicine II (Core) — Pass

Student doctor Freeman demonstrated appropriate skills for where she is in her education.

Internal Medicine II (Core) — High Pass

Strong basic science background and differential diagnosis. Interacted well with staff and other students. Great at planning patient care and well received by patients.

Summary

Emily Freeman is a fourth-year medical student in good standing at Kansas City University of Medicine and Biosciences, College of Osteopathic Medicine. She matriculated into the College of Medicine in 2012 and will graduate in May 2016. She also is enrolled in College of Bioethics and will receive a Master of Arts as well as the Doctorate of Osteopathic Medicine (DO) degree.

She completed the first two years of medical school with a grade point average of 2.93. She did well on National Board Medical Examination (NBME) tests earning HONORS in obstetrics and gynecology as well as

psychiatry. She received High pass evaluations in the areas of pediatrics and internal medicine. She obtained a Clinical Class Rank of 51 out of 242 students overall during the third year. She passed all of the COMLEX tests (I, 2CE and PE).

Medical student Freeman did well while rotating on clinical clerkships. The preceptor in OB/GYN stated that she displayed a good understanding of basic obstetrical issues and was able to critically solve problems in complicated cases. She had excellent bedside manners and was very professional. Family medicine doctors stated that she did a wonderful job while on the service. Internal medicine attending physician stated she was dedicated, professional and a hard worker. Surgical preceptors commented that she was an outstanding student.

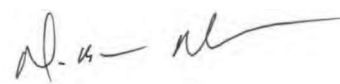
She is the recipient of KCU Clinical Scholarship in 2015. She served as a Teaching Assistant in the Department of Pharmacology in 2013. She gained leadership experience in serving as President of Medical Students for Choice, KCU Chapter and Program Coordinator for Medical Student for a Day. She participated in Score 1 for Health providing children's health screenings. She served on campus, community and civic projects while attending medical school, including teaching sexual education at Kansas City area high schools. She is a member of the Obstetrics and Gynecology Club, Missouri Osteopathic Student Association and the American College of Osteopathic and Gynecologists.

After reviewing Emily Freemans overall academic and clinical performances, I believe she is a very good candidate for your post graduate obstetrical training program. She has all the markings of becoming a very fine physician. She is strongly interested in the totality of women's care and eager to enter an OB/GYN residency. She has the passion, dedication, and drive that is necessary in order to pursue the rigors of your training program. I feel that she will be an asset to your program and will become a fine Obstetrician /Gynecologist.

Sincerely,



Gary Michael Johnston, D.O.
Vice Dean



Bruce Dubin, D.O., J.D.
Provost and Dean



Medical School

Medical Professional Name: Freeman, Emily Ann

Kansas City University of Medicine and Biosciences

Unusual Circumstances**Did you have any interruption(s) or extension(s) in your medical education?** No**Were you ever placed on probation?** No**Were you ever disciplined or placed under investigation?** No**Were any negative reports for behavioral reasons ever filed by instructors?** No**Were any limitations or special requirements imposed on you because of academic performance, incompetence, disciplinary problems or for any other reason?** No

End of Applicant Reported Unusual Circumstances report for: Freeman, Emily Ann

Postgraduate Training

Accreditation ID: 2203811224**Institution:** Akron General Medical Center/NEOMED ProgramLocation: Akron, OH
UNITED STATES**Accreditation ID:** 2362822001**Institution:** Washington University/B-JH/SLCH Consortium ProgramLocation: Saint Louis, MO
UNITED STATES

Credentials Analysis Information for Postgraduate Training

There is no Omission/Discrepancy/Miscellaneous information identified.

FCVSFEDERATION CREDENTIALS
VERIFICATION SERVICE**fsmb**

Verification of Postgraduate Medical Education

Accreditation Code: 2203811224**Institution Name:** Akron General Medical Center/NEOMED Program**Affiliated University:** Akron General Medical Center**City:** Akron**State:** Ohio**Country:** United States**Verification For:** Emily Ann Freeman**Date of Birth:** 05/30/1988**Program Participation:**

PGY: 1	Accredited By: ACGME	Status: Complete
Specialty: Obstetrics & Gynecology		
From: 07/01/2016	To: 06/30/2017	Program Type: Residency

PGY: 2	Accredited By: ACGME	Status: Complete
Specialty: Obstetrics & Gynecology		
From: 07/01/2017	To: 06/30/2018	Program Type: Residency

PGY: 3	Accredited By: ACGME	Status: Complete
Specialty: Obstetrics & Gynecology		
From: 07/01/2018	To: 06/30/2019	Program Type: Residency

PGY: 4	Accredited By: ACGME	Status: Complete
Specialty: obstetrics & Gynecology		
From: 07/01/2019	To: 06/30/2020	Program Type: Residency

PGY:	Accredited By:	Status:
Specialty:		
From:	To:	Program Type:

PGY:	Accredited By:	Status:
Specialty:		
From:	To:	Program Type:

FID: 300389681

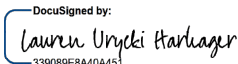
PGY:	Accredited By:	Status:
Specialty:		
From:	To:	Program Type:

To report additional training, include training as an attachment at the end of page 2.

Unusual Circumstances

- | | | | | |
|---|-----|----|-------------------------------------|---------------|
| 1. Did this individual ever take a leave of absence from his/her training? | Yes | No | <input checked="" type="checkbox"/> | Not Available |
| 2. Was this individual ever placed on probation? | Yes | No | <input checked="" type="checkbox"/> | Not Available |
| 3. Was this individual ever disciplined or placed under investigation? | Yes | No | <input checked="" type="checkbox"/> | Not Available |
| 4. Were any negative reports for behavioral reasons ever filed by instructors? | Yes | No | <input checked="" type="checkbox"/> | Not Available |
| 5. Were any limitations or special requirements placed upon this individual because of academic incompetence, disciplinary problems, or any other reason? | Yes | No | <input checked="" type="checkbox"/> | Not Available |

Attestation of Person completing Verification of Postgraduate Training document (Program Director): I hereby attest that the information contained herein accurately reflects the training records of the above-named physician.

ELECTRONIC SEAL VERIFIED	Name: Lauren Urycki Harhager	
	Title: Program Coordinator	Degree: None
	Signature: 	
	Date of Signature: 4/12/2022	

Would you like to upload an additional attachment (e.g. Rotation Schedule)? Yes No

If reporting additional years in the attachment, include PGY year, specialty, start date, end date, status and program type.



Graduate Medical Education

Medical Professional Name: Freeman, Emily Ann
 Accreditation ID: 2203811224
 Institution: Akron General Medical Center/NEOMED Program
 Specialty: Obstetrics & Gynecology

Unusual Circumstances

Training Period: 7/1/2016 - 6/30/2020 Residency

Did you have any interruption(s) or extension(s) in your medical education? No
Were you ever placed on probation? No
Were you ever disciplined or placed under investigation? No
Were any negative reports for behavioral reasons ever filed by instructors? No
Were any limitations or special requirements imposed on you because of academic performance, incompetence, disciplinary problems or for any other reason? No

End of Applicant Reported Unusual Circumstances report for: Freeman, Emily Ann



Cleveland Clinic
Akron General

This is to certify that

Emily Ann Freeman, D.O.

has served as a Resident in Obstetrics & Gynecology
at Akron General Medical Center from 7/1/2016-6/30/2020
and that she has satisfactorily and faithfully performed her duties in
conformity with the rules of the Hospital

In Witness whereof we have affixed our signatures
this thirtieth day of June 2020



DEPARTMENT CHAIRMAN



CHAIRMAN OF MEDICAL EDUCATION



PROGRAM DIRECTOR



PRESIDENT



CHAIRMAN, BOARD OF TRUSTEES

FCVSFEDERATION CREDENTIALS
VERIFICATION SERVICE**fsmb****Verification of Postgraduate Medical Education****Accreditation Code:** 2362822001**Institution Name:** Washington University/B-JH/SLCH Consortium Program**Affiliated University:** Washington University/B-JH/SLCH Consortium**City:** Saint Louis**State:** Missouri**Country:** United States**Verification For:** Emily Ann Freeman**Date of Birth:** 05/30/1988**Program Participation:**

PGY: 1 Accredited By: ACGME Status: Complete

Specialty: Obstetrics & Gynecology/Complex Family Planning

From: 07/01/2020 To: 06/30/2021 Program Type: Fellowship

PGY: 2 Accredited By: ACGME Status: In Progress

Specialty: Obstetrics & Gynecology/Complex Family Planning

From: 07/01/2021 To: 06/30/2022 Program Type: Fellowship

PGY: Accredited By: Status:

Specialty:

From: To: Program Type:

PGY: Accredited By: Status:

Specialty:

From: To: Program Type:

PGY: Accredited By: Status:

Specialty:

From: To: Program Type:

PGY: Accredited By: Status:

Specialty:

From: To: Program Type:

FID: 300389681

PGY:	Accredited By:	Status:
Specialty:		
From:	To:	Program Type:

To report additional training, include training as an attachment at the end of page 2.

Unusual Circumstances

- | | | | | |
|---|-----|----|-------------------------------------|---------------|
| 1. Did this individual ever take a leave of absence from his/her training? | Yes | No | <input checked="" type="checkbox"/> | Not Available |
| 2. Was this individual ever placed on probation? | Yes | No | <input checked="" type="checkbox"/> | Not Available |
| 3. Was this individual ever disciplined or placed under investigation? | Yes | No | <input checked="" type="checkbox"/> | Not Available |
| 4. Were any negative reports for behavioral reasons ever filed by instructors? | Yes | No | <input checked="" type="checkbox"/> | Not Available |
| 5. Were any limitations or special requirements placed upon this individual because of academic incompetence, disciplinary problems, or any other reason? | Yes | No | <input checked="" type="checkbox"/> | Not Available |

Attestation of Person completing Verification of Postgraduate Training document (Program Director): I hereby attest that the information contained herein accurately reflects the training records of the above-named physician.

ELECTRONIC SEAL VERIFIED	Name: Tessa Madden	
	Title: Program Director	Degree: MD
	Signature: 	
	Date of Signature: 4/12/2022	

Would you like to upload an additional attachment (e.g. Rotation Schedule)? Yes No

If reporting additional years in the attachment, include PGY year, specialty, start date, end date, status and program type.



Graduate Medical Education

Medical Professional Name: Freeman, Emily Ann
 Accreditation ID: 2362822001
 Institution: Washington University/B-JH/SLCH Consortium Program
 Specialty: Obstetrics & Gynecology/Complex Family Planning

Unusual Circumstances

Training Period: 7/1/2020 - 6/30/2022 Fellowship

Did you have any interruption(s) or extension(s) in your medical education? No
Were you ever placed on probation? No
Were you ever disciplined or placed under investigation? No
Were any negative reports for behavioral reasons ever filed by instructors? No
Were any limitations or special requirements imposed on you because of academic performance, incompetence, disciplinary problems or for any other reason? No

End of Applicant Reported Unusual Circumstances report for: Freeman, Emily Ann

Licensure / Examinations

Exam: USMLE

Exam: NBOME - Complex
Level 1

Exam: NBOME - Complex
Level 2 CE

Exam: NBOME - Complex
Level 2 PE

Exam: NBOME - Complex
Level 3

Credential Analysis Information for Licensure / Examinations

There is no Omission/Discrepancy/Miscellaneous information identified.



United States Medical Licensing Examination® (USMLE®) Certified Transcript of Scores

This document was prepared by
Federation of State Medical Boards of the United States, Inc. (FSMB)
400 Fuller Wisser Road, Euless, TX 76039-3856 - Telephone (817) 868-4000

Date: 05/10/2022

Federation Credentials Verification Service

ATTN: FCVS

FCVSIID: 694505

Examinee: Freeman, Emily Ann

Examinee ID: 4-119-840-9

Alt Name(s):

Date of Birth: 05/30/1988

Results for Steps taken by this examinee (and for which results have been reported to date) are shown below. For Steps that span more than one day, the test date reflects the day on which the examination began. Pass/fail outcomes are based upon the minimum passing level in place at the time of test administration and are not altered by subsequent revisions to the minimum passing level. Effective April 1, 2013, two-digit scores will no longer be reported. Test results reported as passing represent an exam score of 75 or higher on a two-digit scale. Step 1 examinations taken on or after January 26, 2022 are reported as pass/fail, with no numeric score; Step 1 examinations taken before January 26, 2022 will continue to be reported with a 3-digit score.

End of Exam History

NOTE: The USMLE Step 2 CS examination was last administered March 16, 2020. Examinees with a failing outcome may not have had an opportunity to retest. The USMLE defines successful completion of its examination sequence as passing Step 1, Step 2 CK, and Step 3.

NOTE: A search of the Physician Data Center of the Federation of State Medical Boards (FSMB) reveals no reported information on this examinee.



United States Medical Licensing Examination® (USMLE®) Certified Transcript of Scores

This document was prepared by
Federation of State Medical Boards of the United States, Inc. (FSMB)
400 Fuller Wisser Road, Euless, TX 76039-3856 - Telephone (817) 868-4000

Examinee: Freeman, Emily Ann

Examinee ID: 4-119-840-9

Date of Birth: 05/30/1988

INTERPRETATION OF RESULTS

USMLE transcripts include a complete examination history. On those Step examinations for which numeric scores are reported, a three-digit scale is used. Most scores fall between 140 and 260 on this scale. The recommended minimum passing score is shown on the front of the transcript next to the examinee's score for each administration along with a pass/fail outcome. Test results reported as passing represent an exam score of 75 or higher on a two-digit scoring scale. The level of proficiency required to meet the recommended minimum passing level for each USMLE Step is reviewed periodically and is subject to change. Such changes do not alter pass/fail outcomes from prior test administrations.

For examinations with reported scores, the Standard Error of Measurement (SEM) provides an index of the variation that would be expected to occur if an examinee were tested repeatedly using different sets of items covering similar content. The SEM is usually in the range of 4 to 8 points.

STEP 1 AND STEP 2 CLINICAL SKILLS (CS)

Step 1 examinations taken on or after January 26, 2022 are reported as pass/fail, with no numeric score; Step 1 examinations taken before January 26, 2022 will continue to be reported with a 3-digit score. All Step 2 CS results are reported as pass or fail, with no numeric score. Test results reported as passing represent an exam score of 75 or higher on a two-digit scale.

ANNOTATIONS APPEARING UNDER "COMMENTS"

Circumstances in connection with an administration shown on this transcript may result in one or more annotations listed next to the score. A description of each Comment is provided below:

Indeterminate - Results are at or above the passing level but cannot be certified as representing a valid measure of the examinee's knowledge or competence as sampled by the examination. No score is reported. Information regarding the nature of the indeterminate score is available. If such information is not enclosed with this transcript, it may be obtained by contacting the organization from which you received the transcript or the USMLE Secretariat, 3750 Market Street, Philadelphia, PA 19104, telephone (215) 590-9700.

Incomplete - The examinee sat for some, but not all, of the scheduled examination. No score is reported.

Irregular Behavior - The Committee for Individualized Review determined that the examinee engaged in irregular behavior. Examples of irregular behavior are described in the current edition of the USMLE Bulletin of Information. Information regarding the nature of the irregular behavior and the determination of the Committee is available. If such information is not enclosed with this transcript, it may be obtained by contacting the organization from which you received the transcript or the USMLE Secretariat, 3750 Market Street, Philadelphia, PA 19104, telephone (215) 590-9700.

Score Not Available - The score is not available. Further review and/or analysis may be pending, or it may have been determined that the score cannot be reported.

ANNOTATIONS APPEARING AS "NOTE"

Circumstances not in connection with an administration shown on this transcript may result in one or more annotations and an explanation or instructions to contact the appropriate individual or organization. The Note will appear at the end of the document.

PHYSICIAN DATA CENTER INFORMATION APPEARING AS "NOTE"

The Physician Data Center of the Federation of State Medical Boards (FSMB) contains actions reported to the FSMB by U.S. licensing and disciplinary boards, the U.S. Department of Health and Human Services, government regulatory entities and international licensing authorities. To be included in the Physician Data Center, an action must be a matter of public record or be legally releasable to state medical boards or other entities with recognized authority to review physician credentials. Certain actions reported to and released by the Physician Data Center are not disciplinary or otherwise prejudicial in nature. Such actions are reported to ensure that records are complete and to assist in preventing misrepresentation or the use of lost or stolen credentials by unauthorized persons. Once reported to the FSMB, an action becomes part of the permanent record of the individual physician, and the existence of such an action may be indicated on the USMLE transcript by a Note.

03/2015

This document was printed from a secure website and accurately reflects score information maintained by the FSMB.



COMPREHENSIVE OSTEOPATHIC MEDICAL LICENSING EXAMINATION - USA

Official Transcript

Federation Credentials Verification Svcs
 Federation Place
 400 Fuller Wiser Rd., Ste. 300
 Euless, TX 76039-3855

Examinee: Freeman, Emily Ann
NBOME ID: 414549

Date of Birth: 05/30/1988

EXAMINATION	DATE COMPLETED	PASS / FAIL	3 - DIGIT STANDARD MINIMUM		2 - DIGIT STANDARD MINIMUM		NOTE
			SCORE	PASSING	SCORE	PASSING	
Level 1							
	12-Jun-2014	Pass	515	400	--		
Level 2 Cognitive Evaluation (CE)							
	30-Jun-2015	Pass	533	400	--		
Level 2 Performance Evaluation (PE)							
	04-Jun-2015	Pass	Not Applicable		Not Applicable		
Level 3							
	05-Oct-2017	Pass	440	350	--		

The National Board of Osteopathic Medical Examiners, Inc., does hereby certify the above to be a true report of the examinee.

Date Prepared: April 14, 2022

1158470011440845

-- please see reverse for information and description of notes -- v3.0

National Board of Osteopathic Medical Examiners, Inc.
 8765 West Higgins Road Suite 200 Chicago IL 60631-4174
 Phone: 866/479-6828 Fax: 773/714-0606

300 389 681

PRACTITIONER PROFILE

Prepared for: FCVS SMB Profiles As of Date:5/10/2022

PRACTITIONER INFORMATION

Name: Freeman, Emily Ann
 DOB: 5/30/1988
 Medical School: Kansas City University of Medicine and Biosciences
 Kansas City, Missouri, UNITED STATES
 Year of Grad: 2016
 Degree Type: DO
 NPI: 1750735056

BOARD ACTIONS

To date, there have been no actions reported to the FSMB

NATIONAL PROVIDER IDENTIFIER (NPI)

NPI	NPI Type	Deactivation Date	Reactivation Date	Last Reported
1750735056	Individual			04/19/2022

LICENSE HISTORY

Jurisdiction	License Number	Issue Date	Expiration Date	Last Updated
ILLINOIS	036152218	03/18/2020	07/31/2023	04/22/2022
		FSMB License Status: Active		
MISSOURI	2020009021	03/12/2020	01/31/2023	05/04/2022
		FSMB License Status: Active		
OHIO	58.007673	10/03/2016	06/30/2021	05/06/2022
		FSMB License Status: Inactive		

PRACTITIONER PROFILE

Prepared for: FCVS SMB Profiles As of Date:5/10/2022
Practitioner Name: Freeman, Emily Ann

ACTIVE US DRUG ENFORCEMENT ADMINISTRATION (DEA)

DEA Number	Schedule	Address	Expiration Date	Last Reported
FF9223013	22N 33N 4 5	SHILOH,IL 62269	09/30/2022	01/05/2022
FF9216917	22N 33N 4 5	SAINT LOUIS,MO 63108	09/30/2022	01/05/2022

PRACTITIONER PROFILE

Prepared for: FCVS SMB Profiles As of Date:5/10/2022
Practitioner Name: Freeman, Emily Ann

ABMS® CERTIFICATION HISTORY

No ABMS Certifications found.

AOA® CERTIFICATION HISTORY

No AOA Certifications found.

PLEASE NOTE: For more information regarding the above data, please contact the reporting board or reporting agency. The information contained in this report was supplied by the respective state medical boards and other reporting agencies. The Federation makes no representations or warranties, either express or implied, as to the accuracy, completeness or timeliness of such information and assumes no responsibility for any errors or omissions contained therein. Additionally, the information provided in this profile may not be distributed, modified or reproduced in whole or in part without the prior written consent of the Federation of State Medical Boards.