

**Clients Credentialing Enforcement Boards A/R Maintenance**

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**Search by Individual Results**

View, add, edit, and delete a person's contact information by browsing to the desired tab.

[Summary](#) [Name](#) [Relationships](#) [Address](#) [Phone/Fax](#) [Email/Web](#) [Protection](#) [Skills](#)

**Name:** [Redacted] **Gender:** female  [Redacted] [Redacted]

**Current Address**

ADDRESS DIVISION: CREDENTIALING  
ADDRESS TYPE: MAILING

KATHRYN EGGLESTON  
[Redacted]

**Applications**

[Add New Application](#)

**No applications found.**

**Credentials**

[Add An Old Credential](#)

<u>Credential Number</u>	<u>Granted</u>	<u>Renewal By</u>	<u>Status</u>
39038-20	07/25/1997	10/31/2015	ACTIVE

**Total Credentials : 1**

**Orders (ICE)**

**No orders found.**

**Intake Cases (ICE)**

**No cases found.**

**Respondent Report**

[View Consolidated Case Notes Summary](#)

Credential Holder

Enter renewal information and click Save.

Credential Xref Insurance Firearms Details Letters Holds History Notes Cred: 1 of 1

Renew Hot Print Renewal Letter Wall Cert Labels Hot Print DRN Renewal Notice Expanded Details Save

Credential: 39038-20 (Medicine and Surgery) Renewal: 2013
Name: Eccleston, Kathryn Status: REGULAR - CURRENT(ACTIVE)
Granted: 07/25/1997 Renew By: 10/31/2015 OtherDate First Fee: 10/03/2013

Detail Payments/Refunds

Table with 6 columns: Batch Date, Code, Batch Type, Batch#, Batch Location, Amt. Paid. Row 1: 10/03/2013, P, E, 0, 386, 141

Requirements

Add Requirement Confirm Requirements

Table with 6 columns: Code, Complied, Complied Date, Printed, Comments, Actions. Rows for FEE, CLS, SIG with dates and comments.

License Type:

REGULAR

Status:

ACTIVE

Show SSN

View/Edit Continuing Education

Specialty Code:

(41) FAMILY PRACTICE

--Select One--

Working State:

--Select--

Residency:

--Select--

Name and Address Change

Click on expand/collapse to view/hide information.

More Details:

Click on expand/collapse to view/hide information.

Credential Initial:

Credentialing Method Group: EXAM (Exam)

PDMP Status:

**Credential Holder**

Enter renewal information and click Save.

Credential Xref Insurance Firearms Details Letters Holds **History** Notes Cred: 1 of 1 > >>

**Name:** Eggleston, Kathryn  
**Profession:** Medicine and Surgery  
**Credential #:**39038-20

**Renewal Due:** 10/31/2015

[Add History](#) | [View Online Activity](#)

**History**

<u>Date</u>	<u>History Type</u>	<u>History</u>	<u>Actions</u>
10/07/2013	RenewedAuto	Cred Holder Renewed - Auto Event	
10/19/2011	RenewedAuto	Cred Holder Renewed - Auto Event	
02/22/2011	Endorsement Sent	Endorsement Sent by Rnl111. SD	
09/22/2009	RenewedAuto	From fee rec. year=2009 date printed=09/22/2009	
09/02/2009	StandardRequirementAdded	Standard Requirement Added: CLS	
09/02/2009	StandardRequirementAdded	Standard Requirement Added: FEE	
09/02/2009	StandardRequirementAdded	Standard Requirement Added: SIG	
10/11/2007	BlueLicensePrinted		
10/03/2007	BlueLicensePrinted		
09/30/2007	RenewedAuto	From fee rec. year=2007 date printed=09/30/2007	
09/07/2007	StandardRequirementAdded	Standard Requirement Added: FEE	
09/07/2007	StandardRequirementAdded	Standard Requirement Added: SIG	
10/05/2005	RenewedAuto	From fee rec. year=2005 date printed=10/05/2005	
10/06/2003	Endorsement Sent	Endorsement Sent by PPL. ND	
10/02/2003	RenewedAuto	From fee rec. year=2003 date printed=10/02/2003	
12/16/2002	Endorsement Sent	Endorsement Sent by GL2. AK	
10/26/2001	RenewedAuto	From fee rec. year=2001 date printed=10/26/2001	
11/01/1999	RenewedAuto	From fee rec. year=1999 date printed=11/01/1999	
11/25/1997	RenewedAuto	From fee rec. year=1997 date printed=11/25/1997	
05/13/1997	Exam	USMLE STEP 3 - 085	
05/18/1996	GraduatedFrom	MED COL OF WI-MILWAUKEE	

**Exam History**

There are no query results.

[Print History](#)

**Credential Holder**

Enter renewal information and click Save.

Credential Xref Insurance Firearms **Details** Letters Holds History Notes Cred: 1 of 1 

**Name:** Eggleston, Kathryn

**Renewal Due:** 10/31/2015

**Profession:** Medicine and Surgery

**Credential #:**39038-20

[Add Payment/Refund](#)

**Payments/Refunds**

<u>Year</u>	<u>Batch Date</u>	<u>Code</u>	<u>Batch Type</u>	<u>Batch#</u>	<u>Batch Location</u>	<u>Amt. Paid</u>	<u>Actions</u>
2013	10/03/2013	P	E	0	386	141	
2011	10/17/2011	P	E	0	361	141	
2009	09/22/2009	P	E	0	320	141	
2007	09/30/2007	P	E	0	376	106	
2005	10/03/2005	P	B	78	1122	106	
2003	09/30/2003	P	B	16	510	106	
2001	10/24/2001	P	B	68	48	106	
1999	10/28/1999	P	B	72	1	110	
1997	11/21/1997	P	B	3	2	135	

2013

**Online Activity**

View credential holder renewal log, Activity information (online login info), Continuing education log

**Credential:** 39038-20 (Medicine and Surgery)

**Renewal:** 2013

**Name:** Eggleston, Kathryn

**Status:** REGULAR - CURRENT(ACTIVE)

**Granted:** 07/25/1997 **Renew By:** 10/31/2015

**First Fee:** 10/03/2013

**Online Renewal Log**

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Renewal Year: 2013

**Log**

Time	Step #	Step Title	Message
10/3/2013 2:52:47 PM	1	Update Contact Info	Step completed, advancing to next step in renewal process...
10/3/2013 2:52:55 PM	2	Affidavit of Credential Holder	Step completed, advancing to next step in renewal process... <a href="#">Survey</a> <a href="#">Answers</a>
10/3/2013 2:53:03 PM	3	Certification Of Legal Status	Step completed, advancing to next step in renewal process... <a href="#">Survey</a> <a href="#">Answers</a>
10/3/2013 2:54:08 PM	4	PDMP Question Introduction	Step completed, advancing to next step in renewal process... <a href="#">Survey</a> <a href="#">Answers</a>
10/3/2013 2:54:23 PM	5	Have you submitted an application for an exemption	Step completed, advancing to next step in renewal process... <a href="#">Survey</a> <a href="#">Answers</a>
10/3/2013 2:54:33 PM	11	Verify Professional Specialties	Step completed, advancing to next step in renewal process...
10/3/2013 2:55:01 PM	12	Continuing Education Audit	Step completed, advancing to next step in renewal process...
10/3/2013 2:55:59 PM	13	Continuing Education Requirement	Step completed, advancing to next step in renewal process... <a href="#">Survey</a> <a href="#">Answers</a>
10/3/2013 2:56:08 PM	14	Expert Witness Participation	Step completed, advancing to next step in renewal process... <a href="#">Survey</a> <a href="#">Answers</a>
10/3/2013 2:56:28 PM	15	List Opt-Out	Step completed, advancing to next step in renewal process... <a href="#">Survey</a> <a href="#">Answers</a>
10/3/2013 3:00:59 PM	16	Pay Renewal Fee	Step completed, advancing to next step in renewal process...

**Continuing Education Log**

No Continuing Education log information recorded for this renewal year

**Online Activity**

View credential holder renewal log, Activity information (online login info), Continuing education log

**Credential:** 39038-20 (Medicine and Surgery)

**Renewal:** 2013

**Name:** Eggfeston, Kathryn

**Status:** REGULAR - CURRENT(ACTIVE)

**Granted:** 07/25/1997 **Renew By:** 10/31/2015

**First Fee:** 10/03/2013

**Online Renewal Log**

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**Answers**

I declare that I am the person referred to on this application and that all answers set forth are each and all strictly true in every respect. I understand that failure to provide requested information, making any materially false statement and/or giving any materially false information in connection with my application for a credential or for renewal or reinstatement of a credential may result in credential application processing delays; denial, revocation, suspension or limitation of my credential; or any combination thereof; or such other penalties as may be provided by law. I further understand that if I am issued a credential, or renewal or reinstatement thereof, failure to comply with the statutes and/or administrative code provisions of the licensing authority will be cause for disciplinary action.

**Online Activity**

View credential holder renewal log, Activity information (online login info), Continuing education log

**Credential:** 39038-20 (Medicine and Surgery)

**Renewal:** 2013

**Name:** Eccleston, Kathryn

**Status:** REGULAR - CURRENT(ACTIVE)

**Granted:** 07/25/1997 **Renew By:** 10/31/2015

**First Fee:** 10/03/2013

**Online Renewal Log**

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**Answers**

I declare under penalty of law that I am: (check one)

a citizen or national of the United States, or

a qualified alien or nonimmigrant lawfully present in the United States who is eligible to receive this professional license or credential as defined in the Personal Responsibility and Work Opportunities Reconciliation Act of 1996, as codified in 8 U.S.C. §1601 et. seq. (PRWORA). For questions concerning PRWORA status, please contact the U.S. Citizenship and Immigration Services in the Department of Homeland Security at 1-800-375-5283 or online at <http://www.uscis.gov>.

**Online Activity**  
View credential holder renewal log, Activity information (online login info), Continuing education log

<b>Credential:</b> 39038-20 (Medicine and Surgery)	<b>Renewal:</b> 2013
<b>Name:</b> <u>Eggleston, Kathryn</u>	<b>Status:</b> REGULAR - CURRENT(ACTIVE)
<b>Granted:</b> <u>07/25/1997</u> <b>Renew By:</b> <u>10/31/2015</u>	<b>First Fee:</b> <u>10/03/2013</u>

**Online Renewal Log**

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**Answers**

Responding to prompts on this page is OPTIONAL

You may skip all questions related to the PDMP and still renew you license.

On January 1, 2013, Chapter Phar 18 of the Wisconsin Administrative Code created the Wisconsin Prescription Drug Monitoring Program (PDMP). The law requires licensees who dispense monitored prescription drugs to patients in Wisconsin to collect and submit data to the PDMP database.

**NOTE:**

"Dispense" means to deliver a prescribed monitored prescription drug to a patient by or pursuant to the prescription order of a practitioner, including the compounding, packaging or labeling necessary to prepare the prescribed drug or device for delivery. However, a licensee does not dispense a monitored prescription drug if he or she administers it directly to a patient or if he or she merely writes a prescription to be filled elsewhere.

"Monitored prescription drugs" are:

- State Controlled Substances in Schedule II, III, IV or V that require a prescription order to be lawfully dispensed
- Federally Controlled Substances in Schedule II, III, IV or V that require a prescription order to be lawfully dispensed
- Tramadol, a drug identified by the PER as having a substantial potential for abuse

- Continue
- Skip PDMP Questions



**Online Activity**

View credential holder renewal log, Activity Information (online login info), Continuing education log

**Credential:** 39038-20 (Medicine and Surgery)

**Renewal:** 2013

**Name:** Eggleston, Kathryn

**Status:** REGULAR - CURRENT(ACTIVE)

**Granted:** 07/25/1997 **Renew By:** 10/31/2015

**First Fee:** 10/03/2013

**Online Renewal Log**

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**Answers**

Responding to prompts on this page is OPTIONAL

You may skip all questions related to the PDMP and still renew you license.

Licensees who are authorized to dispense monitored perception drugs but NEVER dispense them DO NOT have to file anything with the PDMP. However, you may have submltted or wan to submit a form to give to the Department notice that you do not dispense monitored perception drupg and have to data to submit to the PDMP.

Have you submitted an application for an exemption from the data collection and submission requirements of the PDMP?

Yes

No

Skip PDMP Questions

**Online Activity**

View credential holder renewal log, Activity information (online login info), Continuing education log

**Credential:** 39038-20 (Medicine and Surgery)

**Renewal:** 2013

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**Granted:** 07/25/1997 **Renew By:** 10/31/2015

**First Fee:** 10/03/2013

**Online Renewal Log**

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**Answers**



I have or will have completed \*30 hours of AMA or AOA Category I continuing education beginning January 1, 2012 and ending December 31, 2013, and I have or will have evidence of this which I will furnish to the Medical Examining Board upon request.

\* Three months of approved post-graduate training is equivalent to 30 hours of Category I credits.

**Online Activity**

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**Credential:** 39038-20 (Medicine and Surgery)

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**Granted:** 07/25/1997 **Renew By:** 10/31/2015

**First Fee:** 10/03/2013

**Online Renewal Log**

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**Answers**

Please check here if you are willing to serve as an expert witness in disciplinary proceedings.

**Online Activity**

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**Renewal:** 2013

**Name:** Eggleston, Kathryn

**Status:** REGULAR - CURRENT(ACTIVE)

**Granted:** 07/25/1997 **Renew By:** 10/31/2015

**First Fee:** 10/03/2013

**Online Renewal Log**

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**Answers**

Per Wis. Stat. § 440.14, if you are an individual or a sole proprietor, you may declare that your street address and/or PO Box # not be disclosed on any list of ten or more credential holders that the department furnishes to another person. Please check the box below to make this declaration.

Please do not disclose my street address and/or PO Box # on lists