December 9, 2014

Boise, Idaho 83704 (208) 327-7000 FAX (208) 327-7005 E-Mail info@bom.idaho.gov

1755 Westgate Dr. Ste 140

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# **CERTIFICATION**

To whom it may concern

This is to certify that a search of the available records of the Idaho State Board of Medicine indicates the following:

# HEATHER ELLEN QUINN, MD

LICENSE NUMBER:
LICENSE TYPE:
DATE ISSUED:
LICENSE STATUS:
LAST ACTION:
MEDICAL SCHOOL:

PHYSICIAN AND SURGEON DECEMBER 3, 2004 CURRENT

RENEWED UNIV OF CA, SAN DIEGO, SCH OF MED, LA JOLLA

DISCIPLINARY ACTION: EXPIRE DATE:

CA 92093 NONE JUNE 30, 2015

OTHER LICENSES:

If other information is needed, please contact the individual or the agency or institution which generated the information.

If disciplinary action is indicated details will be made available by photocopy from the public file upon written request.

Ву:			
Title:			



# STATE OF IDAHO - PATIENT FREEDOM OF INFORMATION ACT

#### Search Options

Search By City
Search By Zip Code
Search By Profession
Search By Specialty
Search By Health Care Provider

#### **Additional Links**

IDACare Home Page Other Options

Contact IDACare System Administrator

#### Search Details

The information contained in the provider profile has been self-reported under oath by the provider. The regulatory boards shall not be liable for the correctness or completeness of the information contained in the provider profiles. The profile information has not been verified by the Boards of Chiropractic Physicians, Dentistry, Medicine, Nursing, Optometry, Podiatry, Psychology Examiners, or IDACARE.

Profession / License No. PHYSICIAN M-9177

Name Heather Quinn MD

Response Received

#### A. EDUCATION

Names and addresses of medical/professional schools or other institutions of higher learning that provider attended, including any graduate education and dates of graduation.

School Name	Address	City, State, Zip	Graduation Date
UNIVERSITY OF	9500	LA	6/97
CALIFORNIA, SAN	GILMAN	JOLLA,	
DIEGO	DR	CA	

## **B. SPECIALTY CERTIFICATIONS**

Specialty certifications recognized by the Idaho Board.

FAMILY PRACTICE

## D. LOCATION & PRACTICE HISTORY

Location and type of practice for the most recent 10 years.

Facility Name	City, State, Zip	Type of Practice	Beginning & Ending Date
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## E. PRIMARY ADMITTING HOSPITAL

The hospital(s) that serve(s) as the primary admitting facility with clinical privileges in good standing.

Facility Name	Address	City, State, Zip	Status of Clinical Privileges
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#### F. MEDICAID/MEDICARE

Disclosure of whether provider participates in Medicaid and Medicare programs (but not necessarily accepting new patients), or whether provider has ever been barred from participation in either program.

Medicaid Yes Participation?

Barred From No Medicaid?

Medicare Yes Participation?

Barred From No Medicare?

### **G. TRANSLATING SERVICES**

Translating services that may be available at provider's practice location.

Language: N/A

### H. CRIMINAL HISTORY

Description of any criminal convictions for felonies or other crimes of moral turpitude against provider within the most recent 10 years. For purposes of this subsection, a provider shall be deemed convicted of a crime if provider pled guilty or were found or adjudged guilty by a court of competent jurisdiction.

Conviction description, Charge and Date N/A

# I. BOARD DISCIPLINARY HISTORY

Description of any final disciplinary actions, including but not limited to revocation or suspension of license, taken against provider by any board from any state within the most recent 10 years.

Disciplinary Action, State, Charge and Date  $\ensuremath{\mathsf{N}/\mathsf{A}}$ 

### J. OTHER DISCIPLINARY HISTORY

Description of any revocation or involuntary restriction of provider's hospital privileges, or a reduction in provider's credentialing for more than 180 days, from any state, for reasons related to provider's competence or character, that have been taken by a hospital's governing body or any other official of a hospital against provider after procedural due process has been afforded; or your resignation from or non-renewal of a medical staff membership, or the restriction of provider's privileges at a hospital taken in lieu of or in settlement of a pending disciplinary case related to your competence or character in that hospital, within the most recent 10 years that are considered to be public in accordance with provisions of the public records law.

Privilege Sanction, Hospital, Reason and Date N/A

## K. PROFESSIONAL LIABILITY INSURANCE

Disclosure whether provider carries professional liability insurance, and if provider has ever been denied professional liability insurance.

Insurance Carried? Yes Insurance Denied? No

### L. MALPRACTICE HISTORY

Disclosure of all malpractice court judgments and all malpractice arbitration awards against provider in which a payment was awarded to a complaining party during the most recent 10 years. Disclosure of pending malpractice claims may not be listed.

Judgment, Award and Date N/A

#### M. SETTLEMENT HISTORY

Disclosure of all settlements of professional malpractice claims against provider within the most recent 5 years of continuous practice (see Footnote).

Settlement Amount and Date N/A

### N. PROFESSIONAL OWNERSHIP

Percentage of ownership interest provider has in other health facilities, laboratories, equipment or therapy, except for ownership interest in the primary practice business, to which provider's patients are, have been, or may be referred.

### Facility name and percentage N/A

### Footnote - Settlement History

- (i) Provider need only disclose malpractice settlements if there have been 5 or more settlements in the most recent 5 years of continuous practice, of \$50,000, or more, per settlement, or if there has been more than 10 settlements within the most recent 5 years of continuous practice of any dollar amount;
- (ii) Settlements that result solely in an adjustment to the fee charged for Provider's services shall not be disclosed pursuant to this chapter;
- (iii) Settlement of a claim may occur for a variety of reasons which do not necessarily reflect negatively on the professional competence or conduct of a provider. A payment in settlement of a malpractice action or claim should not be construed as creating presumption that malpractice has occurred. Malpractice histories tend to vary by specialty. Some specialties are more likely than others to be the subject of litigation.
- (iv) Nothing herein shall be construed to limit or prevent the board from providing further explanatory information regarding settlements;