

04/16/2011

INDIANA PROFESSIONAL LICENSING AGENCY

Internet Renewal Questions

Name: Stutsman, John William

LICENSE#: 01041899A

Care Of:

Address: 720 Eskenazi Ave; FOB 3rd Floor - I

City/St/Zip: Indianapolis, IN 46202

Birth Date 02/07/1965

Date/Time

Completed: 4/22/2011 3:34:07PM

- 1.) Since you last renewed, has any professional license, certificate, registration, or permit you hold or have held been disciplined or are formal charges pending in any state? N
  
- 2.) Since you last renewed, have you been denied a license, certificate, registration, or permit in any state? N
  
- 3.) Since you last renewed, have you been convicted of or pled guilty to a violation of a federal or state law or are criminal charges pending? N
  
- 4.) Since you last renewed, have you had a malpractice judgment against you or settled any malpractice action? N
  
- 5.) Since you last renewed, have you been denied staff membership or privileges in any hospital or health care facility or have staff membership or privileges been revoked, suspended, or subject to any restriction, probation, or other type of discipline - or have you resigned in lieu of discipline or termination? N
  
- 6.) Since you last renewed, have you been excluded from being a Medicare or Medicaid provider? N
  
- 7.) Since you last renewed, have you surrendered your DEA registration at any time or had any limitations or discipline placed on your DEA registration? N

**Person Info****Name:**John William Stutsman**Address Info****Street  
Address:**200 S.  
Meridian St.,  
Ste. 400**Fax:**3176374343**City:**Indianapolis**State:**IN**Zipcode:**46225**Country:**United States**County:**Marion**Email:****Phone:****Survey Response Summary**

Question	Answer
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**Question Response Summary**

Question	Answer
1.) Since you last renewed, has any professional license, certificate, registration, or permit you hold or have held been disciplined or are formal charges pending in any state?	N
2.) Since you last renewed, have you been denied a license, certificate, registration, or permit in any state?	N
3.) Since you last renewed, have you ever been arrested or convicted for a crime that has not been expunged by an Indiana court?	N
4.) Since you last renewed, have you had a malpractice judgment against you or settled any malpractice action?	N
5.) Since you last renewed, have you been denied staff membership or privileges in any hospital or health care facility or have staff membership or privileges been revoked, suspended, or subject to any restriction, probation, or other type of discipline - or have you resigned in lieu of discipline or termination?	N
6.) Since you last renewed, have you been excluded from being a Medicare or Medicaid provider?	N
7.) Since you last renewed, have you surrendered your DEA registration at any time or had any limitations or discipline placed on your DEA registration?	N

**Person Info****Name:**John William Stutsman**Address Info****Street  
Address:****Email:****Fax:****Phone:****City:****State:****Zipcode:****Country:**United States**County:****Survey Response Summary  
Question Response Summary**

Question	Answer
1.) Since you last renewed, has there been an occasion where you have not maintained effective controls against diversion of controlled substances into other than legitimate medical, scientific, or industrial channels?	N
2.) Since you last renewed, has there been an occasion where you have not been in complete compliance with all state and local laws pertaining to controlled substances?	N
3.) Since you last renewed, have you been convicted, pled guilty, or pled nolo contendere, under any federal or state laws relating to any controlled substances that has not been expunged under IC 35-38-9?	N
4.) Since you last renewed, have you had any action, discipline, revocation, or surrender of your Drug Enforcement Registration or entered into any settlement or Memorandum of Understanding with respect to said registration?	N
5.) Since you last renewed, have you had any action, discipline, revocation, or surrender of any professional license in any jurisdiction related to controlled substances?	N

**Person Info****Name:**John William Stutsman**Address Info****Street  
Address:**720 Eskenazi  
Ave; FOB 3rd  
Floor - Dept.  
OB/GYN**Fax:**3176374343**City:**Indianapolis**State:**IN**Zipcode:**46202**Country:**United States**County:**Marion**Email:****Phone:****Survey Response Summary**

Question	Answer
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7.) Since you last renewed, have you surrendered your DEA registration at any time or had any limitations or discipline placed on your DEA registration?	N