3/5/2018 Details

# State of Indiana

# **Demographic Information**

Name: Sarah Julia Turner

#### **Address Information**

Line 1: St. Joseph Medical Group, INC

Line 2: 2622 Lake Ave.

City/State/Zip: Fort Wayne IN 46805

County: Allen

### **License Information**

Lic #: 01072924B Profession: Medical Licensing Board Type: CSR-Physician Secondary:

**Status:** Active Issued: 7/10/2013 **Expiration:** 10/31/2019

Method: Application

#### **Discipline Information**

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#### **Related Licenses**

Lic #: 01072924A Name: Turner, Sarah Julia

License Type: Physician License Status: Active Relationship: Same Licensee

## **License CSR Information**

Drug Schedule 1: Drug Schedule 2: Yes Drug Schedule 2n: Yes

Drug Schedule 3: Yes

Drug Schedule 3: Yes

Drug Schedule 4: Yes

Drug Schedule 5: Yes

#### **Documents**

No Public Documents Available