

☒ Detail Format ☐ List Format ☐ Grid Format

**Search Criterion: Last Name = CADWALLADER; Practice County = 0; Specialty = 0;**

**Name:** Kara L Cadwallader M.D.  
**Address:** 200 S. Meridian Street  
**Address 2:** Suite 400  
**City, State, Zip:** Indianapolis IN 46225-1076  
**Phone:** (206) 328-7722  
**License:** 52555  
**Status:** Active Physician  
**Expiration:** 2/28/2021 0:00:00  
**Practice County:** Out of State  
**\*Area of Practice:** Family Medicine  
**Type of Practice:** Administration  
**Year Licensed in KY:** 6/20/2019 0:00:00  
**Medical School:** University of California School of Medicine, San Francisco  
**Year Graduated:** 1995  
**Board Action:** None

\*The Board does not verify current specialties. For more information please see the American Board of Medical Specialties website at: <http://www.abms.org> to determine if the physician has earned a specialty certification from this private agency.

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