

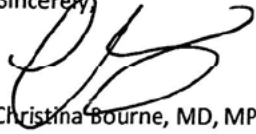
- 11 Yes No Has any professional association imposed any disciplinary action against you?
12. **CONFIDENTIAL** Within the past 2 years, have you used any alcohol, narcotic, barbiturate, or other drug affecting the central nervous system, or other drug which may cause physical or psychological dependence, either to which you were addicted or upon which you were dependent?
13. Within the past 2 years, have you been diagnosed or treated for any physical, emotional or mental illness or disease, including drug addiction or alcohol dependency, which limited your ability to practice the healing arts with reasonable skill and safety?
14. Within the past 2 years, have you used controlled substances, which were obtained illegally or which were not obtained pursuant to a valid prescription order or which were not taken following the directions of a licensed health care provider?
15. Have you ever practiced your profession while any physical or mental disability, loss of motor skill or use of drugs or alcohol, impaired your ability to practice with reasonable safety?
- 16 Do you presently have any physical or mental problems or disabilities which could affect your ability to competently practice your profession?
17. Yes No Have you ever been denied a Drug Enforcement Administration (DEA) or state bureau of narcotics or controlled substance registration certificate or been called before or warned by any such agency or other lawful authority concerned with controlled substances?
18. Yes No Have you ever surrendered your state or federal controlled substances registration or had it revoked, suspended, or restricted in any way?
19. Yes No Have you ever been notified of any charges or complaints filed against you by any licensing or disciplinary agency?
20. Yes No Have you ever been arrested? Do not include minor traffic or parking violations or citations except those related to a DUI, DWI or a similar charge. You must include all arrests including those that have been set aside, dismissed or expunged or where a stay of execution has been issued.
- 21 Yes No Have you ever been charged with a crime, indicted, convicted of a crime, imprisoned, or placed on probation (a crime includes both Class A misdemeanors and felonies)? You must include all convictions including those that have been set aside, dismissed or expunged or where a stay of execution has been issued.
22. Yes No Have you ever been court-martialed or discharged dishonorably from the armed services?
23. Yes No Have you ever been a defendant in a legal action involving professional liability (malpractice), or had a professional liability claim paid in your behalf, or paid such claim yourself?
24. Yes No Have you ever been denied provider participation in any State Medicaid or Federal Medicare Programs or in a private insurance company?
25. Yes No Have you ever been terminated, sanctioned, penalized, or had to repay money to any State Medicaid or Federal Medicaid Programs or private insurance company?

RECEIVED
MAR 27 2018
KANSAS

In regards to the Kansas State Board of Healing Arts Q21

CONFIDENTIAL

Sincerely,

A handwritten signature in black ink, appearing to be 'CB', written over the word 'Sincerely,'.

Christina Bourne, MD, MPH

5/6/19