SERVICES TASKS ACCOUNTING

Person | Facility
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Name / License Type	Address	Subtype	License Number	Hold/Alert	Issue Date	Expiration Date	License Sta
MEDICINE AND SURGERY	VA 22206		MD042996		05/15/2015	12/31/2022	Active
MEDICAL TRAINING LICENSE I(A)	MedStar Washington Hospital Center Unknown NA 00000		MTL001099		11/07/2012	07/31/2015	Expired
POSTGRADUATE PHYSICIAN TRAINEE	Washington Hospital Center Washington DC 20010		202579		06/15/2011	06/30/2012	Expired

All Licenses held by - Maloy, Kathryn S.

License Type	Address	Sub Type	License Number	Hold/Alert	Status
POSTGRADUATE PHYSICIAN TRAINEE	Washington Hospital Center Washington DC 20010		202579		Expired
MEDICAL TRAINING LICENSE I(A)	MedStar Washington Hospital Center Unknown NA 00000		MTL001099		Expired
MEDICINE AND SURGERY	Inova Medical Group Arlington VA 22206		MD042996		Active
CONTROLLED SUBSTANCE	Kaiser Map MG Washington DC 20002	Practitioner - Physician	CS1500091		Expired

Archive | Reinstate | Complaints

Person Details

First Name: Kathryn
Middle Name: S.
Last Name: Maloy
Suffix:
Date of Birth: [redacted]
Place Of Birth:
Gender: F
SSN: [redacted]
Address Line 1: [redacted]
Address Line 2:
Address Line 3:
Address Line 4: [redacted]
Date Deceased:
Registration Code: 52121163

License Details

License Number: MTL001099
License Type: MEDICAL TRAINING LICENSE I(A)
Renewal Id:
Profession: MEDICINE
Sub Type:
Date This Status: 11/13/2015
Status: Expired
Effective Date: 08/01/2014
Reason Changed: Terminated
Expiration Date: 07/31/2015
Issue Date: 11/07/2012
from Country:
State/Prov:
Application Recd Date:
Obtained By: Application
Reinstatement App Recd Date:
Date Last Renewal: 05/29/2014
Disciplinary Limit Flag: N
Last Reprint Date:
Applicant Number: 227395

Post-Graduate Training Information Details

Training Institution	Post-Graduate Year
No Data	

Alias Details

Last Name	Date Changed	Alias Type Label
Whorf	12/17/2012	Legal Name Change
Whorf	07/24/2012	Data Correction

Practice Information Details

In Active Practice Now?:
Practice In DC:
Active Practice in DC:
Hours per week?:

License Bond Details

No Data

Employers for License Details

No Data

Employment Details

No Data

Specialties Details

Authority Code Label	Is Primary	Issue Date	Expiration Date
No Data			

Education Details

School Name	School Type	Date Graduated	Degree Certificate
The George Washington University	Medical School	05/15/2011	Medical
Bates College	College / University	05/01/2004	BS

CE Credits By Cycle

Current cycle	0.00	Not checked
Other old cycles	0.00	Not checked

Requirements

Name	Status	Date
No Data		

Schedules Details

No Data

Prerequisites Details

Name	License Type	License Number	Status

Criminal Background Check Details

FBI Result	FBI Result Date	State Result	State Result Date
Negative	07/10/2012	Negative	07/25/2012