

FAIRFAX CANCER CENTER - ONE-TIME QUERY RESPONSE

A. SUBJECT IDENTIFICATION INFORMATION (Recipients should verify that subject identified is, in fact, the subject of interest.)

Organization Name:	FAIRFAX CANCER CENTER		
Organization Type:	MEDICAL GROUP/PRACTICE (365)		
Work Address:	111 MAIN STREET, FAIRFAX, VA 22033-1234		
Social Security Number:	***-**-0012	ITIN:	921000012
DEA:	123	Medicare:	123
FEIN:	123456789	NPI:	123
License:	123VA, VA		

B. QUERY INFORMATION

Statutes Queried: Section 1921 (NPDB), Section 1128E (HIPDB)

Query Type: This is a One-Time query response. Your organization will only receive future reports on this practitioner if another query is submitted.

Authorized Submitter: TEST SUBMITTER, SUBMITTER, (703) 555-1212

C. SUMMARY OF REPORTS ON FILE WITH THE DATA BANK AS OF 10/04/2012

The following report types have been searched:

State Licensure Action(s):	No Reports	DEA/Federal Licensure Action(s):	No Reports
Exclusion or Debarment Action(s):	No Reports	Judgment or Conviction Report(s):	No Reports
Government Administrative Action(s):	No Reports	Accreditation Action(s):	No Reports
Health Plan Action(s):	No Reports		

----- **No Reports Found** -----