

Tucker Poling, Executive Director

Laura Kelly, Governor

You answered “yes” to question “a” in the attestation section of your license renewal. This question asks if in the past twelve months you have been a defendant or have continued to be a defendant, or any judgment, award or settlement has been paid on your behalf resulting from a professional liability claim/lawsuit. **All items should be answered completely. Attach copies of any/or all supporting documentation with your response.** Please provide the board with the following information:

1. Name
2. License number
3. Date of occurrence
4. Names of the claimant(s), and all defendant(s) against whom the claim is made.

5. If the incident occurred within an institution, the name of that institution.

6. Name, address, and telephone number of the attorney who represented you or your insurance company.

7. If a settlement, judgment, or award was paid on your behalf, list the amount paid. If the case is still pending, state that.

8. If a lawsuit was instituted, provide the case caption, court case number, and name and location of the court where the case was filed.

Case caption:

Court case number:

Court name/County and State:

9. A summary of the occurrence, including a description for the claimant's alleged principle injury, and the alleged deviations from the standard of care.

Please provide this information to the Board within 14 days. Submit this form via USPS to the address below, fax to 785-368-7103, or email to KSBHA_RenewalCoordinator@ks.gov. If you have questions regarding this form, you can call 785-368-8209.

Mail completed form to:
Kansas Board of Healing Arts
Attn: Renewal Coordinator
800 SW Jackson, Lower Level-Suite A
Topeka, KS 66612