



61<sup>ST</sup> EDITION

# THE WASHINGTON PHYSICIANS DIRECTORY

1775 K St. NW, Suite 600, Washington, DC 20006

202-739-2440

Fax 202-739-2439

wpd@wpdnetwork.com

## M.D. / D.O. LISTING FORM

The **Washington Physicians Directory** is the only information source designed specifically for the health care community servicing the **entire** metropolitan Washington area. (Please take a moment to view our coverage area on the back of this form.) The *WPD* is trusted and used daily by thousands of your colleagues in the medical profession, yet there is **no charge** for your listing and you are not obligated to purchase a copy. Every year we will mail you, or your practice administrator if you belong to a group, a verification form so you may make corrections, additions, or deletions to your listing. You may send corrections at any time for inclusion in the OnLine edition, as that is updated throughout the year.

For your **FREE** listing, please complete this form and return it via e-mail or fax; or simply submit your listing online (wpdnetwork.com). Listings received by **March 15th** will be included in the upcoming **Washingtonian Top Doctors Survey**. **The WPD will be published October 2024...and in our On-Line edition is updated weekly.** (Please see reverse for additional information.)

### GENERAL INFORMATION

Name \_\_\_\_\_

Medical School \_\_\_\_\_ Year of Graduation \_\_\_\_\_

National Provider Identifier (NPI): \_\_\_\_\_

For information on the NPI visit [cms.hhs.gov](http://cms.hhs.gov) or [nppes.cms.hhs.gov](http://nppes.cms.hhs.gov) for an application.

\*License Number D.C. \_\_\_\_\_ Maryland \_\_\_\_\_ Virginia \_\_\_\_\_

### MEDICAL SPECIALTIES & CERTIFICATION INFORMATION

(Maximum of four)

**Please check if you are certified and note the organization.**

Primary Specialty \_\_\_\_\_

2nd Specialty \_\_\_\_\_

3rd Specialty \_\_\_\_\_

4th Specialty \_\_\_\_\_

### FOREIGN LANGUAGE SECTION

Please list the language(s) in which you are sufficiently fluent to deal with patients on a doctor/patient level or with the assistance of an interpreter. Check if you use an interpreter.

1. \_\_\_\_\_  3. \_\_\_\_\_

2. \_\_\_\_\_  4. \_\_\_\_\_

### HEARING IMPAIRED SECTION

I am able to treat patients on a doctor/patient level in American Sign Language (ASL)

Other sign language: \_\_\_\_\_

I use an interpreter in the office.

I have TDD equipment in the office. The phone number for TDD is \_\_\_\_\_

### GROUP PRACTICE SECTION

I am a full-time member of this group practice:

\_\_\_\_\_

### ADDRESS & PHONE NUMBER INFORMATION

(First address free, addl. addresses for a nominal fee) You may list two other numbers per address. Be certain to code them as follows:

A=answering service

B=pager/beeper

C=cell

E=emergency

F=fax

O=other office phone

P=physicians only

R=residence

S=schedule/procedure

T=text

V=voice mail

8=toll free

\$=billing

Primary Office Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 \_\_\_\_\_

Office Phone \_\_\_\_\_ Other #/Type \_\_\_\_\_ Other #/Type \_\_\_\_\_

E-mail Address \_\_\_\_\_

2nd Office Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 \_\_\_\_\_

Office Phone \_\_\_\_\_ Other #/Type \_\_\_\_\_ Other #/Type \_\_\_\_\_

3rd Office Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 \_\_\_\_\_

Office Phone \_\_\_\_\_ Other #/Type \_\_\_\_\_ Other #/Type \_\_\_\_\_

4th Office Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 \_\_\_\_\_

Office Phone \_\_\_\_\_ Other #/Type \_\_\_\_\_ Other #/Type \_\_\_\_\_

\*License number information is not published.

**PLEASE SEE REVERSE FOR COVERAGE AREA AND SAMPLE LISTINGS.**

# Over 14,170 of Your Colleagues Are Listed!

Please include your **FREE Professional Listing**.  
There is no obligation to buy anything, now or ever.

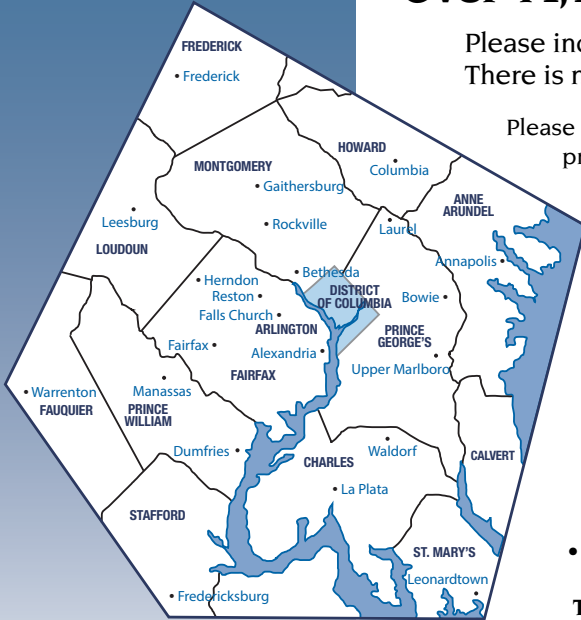
Please note our coverage area. If you practice in this area, either in private practice or full-time staff at a hospital, clinic or HMO, your colleagues need your **FREE** professional listing included.

## ONE CONVENIENT DIRECTORY

**Put's M.D.'s & D.O.'s, Hospitals, and Over 60 Additional Health Care Disciplines at Your Fingertips.** From beginning to end you'll find:

- **Key to Specialties by Name and by Code** – 200 presently included
- **Hospitals** – 70 included with up to 10 direct-dial numbers for key departments
- **Group & Descriptive Title Practices** – over 1,800 with index to individual listings
- **Referral Services, HMO's/PPO's, Medical Societies, Area Health Resources, Community Health Agencies and Health Related Toll-Free Numbers** – your guide to local and national services

- **Professional Services Guide** – hundreds of listings, from billing & insurance to laboratories to radiology to travel medicine
- **M.D.'s & D.O.'s** – main section alphabetical, with additional sections broken down by Specialty, Foreign Language, and Hearing Impaired Services
- **Health Professionals** – more than 60 disciplines, from acupuncturists to physical therapists to wellness specialists



## M.D./D.O. LISTING GUIDE

<sup>1</sup> **Smith, John H.** [<sup>1</sup>9027379049] <sup>4</sup><52597> <sup>6</sup>FM\* <sup>7</sup>IM† <sup>8</sup>  
<sup>2</sup> — Univ. of MD 2019 <sup>3</sup>  
<sup>9</sup> — johnsmith@doctorjohnsmith.com  
 1525 University Blvd. #10, Silver Spring MD  
 20904-4015 (301) 555-1325 (301) 555-2210<sup>5</sup>  
 5530 Wisconsin Ave. #330, Chevy Chase MD 20815  
<sup>10</sup> — doctorjohnsmith.com

- 1 NPI - National Provider Identifier.
- 2 Medical school.
- 3 Year of graduation from medical school.
- 4 Group & Descriptive Title Practices Reference Number
- 5 M.D.'s & D.O.'s may include one free address in their personal listings. May purchase additional addresses for a nominal fee.
- 6 M.D.'s & D.O.'s may include up to four medical specialties in their personal listings.
- 7 An asterisk (\*) to the right of a specialty indicates the physician has received a general certificate or sub-specialty certificate from an examining board of ABMS.
- 8 An "†" to the right of a specialty indicates the physician has received a general certificate or sub-specialty certificate from an organization or an examining board not affiliated with the ABMS, i.e. American Psychoanalytic Association etc.