he information provided in OIG settlement data entries for Civil Monetary Penalties (CMPs) is variable in detail. A omprehensive list of all physician settlement entries from the OIG is provided below. Specific identifiers, including hysician and hospital name, have been removed, but are available online.	
Settlement Date	Settlement description
04-15-2014	[Physician name redacted], Iowa, agreed to pay \$35,000 to resolve his liability for CMPs unde the patient dumping statute. OIG alleged that [physician name redacted], the on- call surgeon at [hospital name redacted] refused to examine or treat a patient who had an emergency medical condition that required surgery.
12-20-2011	[Physician name redacted], Tennessee, agreed to pay \$35,000 to resolve its liability for CMPs under the patient dumping statute. The OIG alleged that [physician name redacted], while on call at [hospital name redacted], refused to accept an appropriate transfer of an individual with an unstable emergency medical condition who required the specialized capabilities that were available at [hospital name redacted]. The patient was transferred to another facility and died shortly thereafter.
02-25-2009	An Illinois physician agreed to pay \$35,000 to resolve his liability for CMPs under the patient dumping statute. The OIG alleged that the on-call physician failed to respond to a request to come to the emergency department to treat a patient that presented with an open leg fracture. The patient was transferred to another facility and underwent emergency surgery.
02-17-2006	A Texas physician agreed to pay \$15,000 to resolve his liability for CMPs under the patient dumping statute. The OIG alleged that the on-call physician failed to respond to a request to come to the emergency department to treat a pregnant female who presented to the labor and delivery department with symptoms of preeclampsia and pulmonary edema. The patient was transferred to another facility that had an obstetrician on-site.
06-23-2004	A Louisiana physician agreed to pay \$10,000 to resolve his liability for CMPs under the patier dumping statute. The OIG alleged that the physician failed to provide an appropriate medical screening exam and stabilizing treatment to a pregnant 17-year-old female who presented to the hospital's emergency department with complaints of perineal numbness and vaginal bleeding. The physician refused to treat her due to his erroneous belief that he could not do so absent parental consent.
04-07-2003	A Virginia obstetrician agreed to pay \$15,000 to resolve his liability for CMPs under the patien dumping statute for an incident at [hospital name redacted]. The OIG alleged that the obstetrician failed to provide an appropriate medical screening examination, stabilizing treatment, or an appropriate transfer for a pregnant woman in labor. The OIG further alleged that the obstetrician failed to observe the patient's labor for an adequate period of time and that he failed to take into account the patient's history of genital herpes and precipitous delivery. The OIG alleged that the patient was discharged and sent in a private vehicle to another hospital approximately an hour away and the patient delivered her baby en route in the vehicle.
03-03-2003	A California surgeon agreed to pay \$50,000 to resolve his liability for CMPs under the patient dumping statute for an incident at [hospital name redacted]. The OIG alleged that while on cal the surgeon refused to come to the emergency room to treat a patient with mental disabilities who presented to the hospital suffering severe abdominal distress and shortness of breath. The OIG further alleged that the surgeon made derogatory comments related to the patient's mental condition when he was contacted and asked to come to the emergency room. By the time the or call surgeon arrived at the facility, after being called at least three times and more than one how after initially being contacted, the patient had died.
05-09-2002	A Missouri ophthalmologist paid \$10,000 to resolve his liability for CMPs under the patient dumping statute. The OIG alleged that while on call, the physician did not come in to the hospital emergency department to evaluate and treat a patient that needed his services.