LOUISIANA STATE BOARD OF MEDICAL EXAMINERS

630 Camp Street, New Orleans, LA 70130
General Correspondence Address: Post Office Box 30250, New Orleans, LA 70190-0250
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F XI		

IN THE MATTER OF:

SAMUEL WALTON PARRY, II, M.D. (Certificate No. 013154, M.D.)
Respondent

05-I-510

NOTICE OF SUMMARY SUSPENSION OF MEDICAL LICENSE

To: Samuel Walton Parry, II, M.D.
77 Lakewood Estates Drive
New Orleans, Louisiana 70131-8351

PLEASE TAKE NOTICE that the Louisiana State Board of Medical Examiners (the "Board"), pursuant to the authority vested in IT BY La. Rev. Stat. §37:1285(A), La. Rev. Stat. §49:961(C) and the Orders previously entered herein, has issued the accompanying Order of Summary Suspension of Medical License, suspending your license to practice medicine in the state of Louisiana. The Order, a certified copy of which is annexed hereto, is effective immediately.

New Orleans, Louisiana, this 23rd day of January 2006.

LOUISIANA STATE BOARD OF MEDICAL EXAMINERS

Kim Edward LeBlanc, M.D., Ph.D.

Interim Executive Director