



Practitioner Profile

Printer Friendly Version

VIRGIL CAYTON REID III

License Number: ME128995

Profession

Medical Doctor

License Status

CLEAR/ACTIVE

Year Began Practicing

01/01/1996

License Expiration Date

01/31/2018

General Information	Education & Training	Academic Appointments	Specialty Certification	Financial Responsibility	Proceedings & Actions
Optional Information	License Information				

The practitioner has not verified the information contained in this profile.

Primary Practice Address

VIRGIL CAYTON REID III
 736 CENTRAL AVENUE
 SARASOTA, FL 34236-4042
 UNITED STATES

Medicaid

The practitioner did not indicate if he/she participates in the Medicaid program.

Staff Privileges

This practitioner currently holds staff privileges at the following hospital/medical/health institutions:

Institution Name	City	State
OUT OF STATE	CHICAGO	ILLINOIS

Email Address



Contact at: reid.gil@gmail.com

Department of Health State Licenses



This practitioner has indicated the following additional state licensure:

State	Profession
ILLINOIS	MEDICAL DOCTOR
INDIANA	MEDICAL DOCTOR
MICHIGAN	MEDICAL DOCTOR

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