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## **License Details**

The Department of Consumer Affairs encourages you to verify the license statuses of any licensees that may appear in a 'Related License' section below. You can verify these licensees by selecting 'New Search' and conducting a new search using the 'Search by Personal or Business Name' option. Please note that the 'Related License' section will only appear below if this license is related to another license. Not all licensees have a related license.

If the License Details below include 'Date of Graduation', the month and date of graduation may not be available. In this instance it will be displayed as '01/01/YYYY' where YYYY represents the year of graduation. Please note that not all license types disclose 'Date of Graduation' on the License Details screen.

Press "Previous Record" to display the previous license.

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Press "Search Results" to return to the Search Results list.

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License Number: 93140 Current Date: 08/24/2017 05:32 PM

Name: WALLACE, ROBIN REED License Type: Physician and Surgeon A License Status: License Renewed & Current

Fee Exemption: Retired **Expiration Date:** 02/28/2019

School Name: NC001 - UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL

Date of Graduation: 05/09/2004 **Original Issuance Date:** 10/21/2005

Addresses

Address of Record (Required) Address # 115-137

5706 E MOCKINGBIRD LANE

DALLAS, TX DALLAS 75206 United State

**Survey Information** 

The following information is self-reported by the licensee and has not been verified by the Board.

Are you retired?

Administration - 1-9 Hours Activities in Medicine

Other - None

Patient Care - 20-29 Hours

Research - None Teaching - 1-9 Hours Telemedicine - None

Patient Care Practice Location Zip: 75243 County: Not identified Patient Care Secondary Practice Location

Telemedicine Practice Location Not identified Not identified Telemedicine Secondary Practice Location Not in Training **Current Training Status** 

Areas of Practice Family Medicine - Primary

Other - Not Listed - Secondary

**Board Certifications** American Board of Family Medicine - Family Medicine BreEZe - State of California Page 2 of 2

Survey Information The following information is self-reported by the licensee and has not been verified by the Board. Postgraduate Training Years 5 Years Cultural Background **Declined to Disclose** Foreign Language Proficiency Spanish Female Gender **Public Record Actions Administrative Disciplinary Actions** None found **Court Order** None found None found Misdemeanor Conviction Probationary License Felony Conviction None found None found Malpractice Judgment None found Hospital Disciplinary Action License Issued with Public Letter of Reprimand (Non-Disciplinary) None found None found Administrative Citation Issued
Administrative Action Taken by Other State or Federal Government None found None found Arbitration Award None found **Malpractice Settlements** None found **Previous Record** Next Record Search Results **New Search Criteria** New Search Print Back to Top | Conditions of Use | Privacy Policy | Accessibility Copyright © 2013 State of California