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Identification Information [back		ck]
Name	Dr. ERLINDA E UY CHAND Birth Date: 3/1939 Birth Place: BATANGAS Birth Country:	
Practice	208 West Grayling Drive Fairlawn, OH 44333 United States of America	
Residence	FAIRLAWN, OH 44333 County: Summit	
Professional Education	School: 748050-Faculty of Medicine And Surgery, University of Santo Graduated: 00/00/63	

License and Registration Information						
Credential	License Type	Initial Licensure Date	Expiration Date	Status		
35.032759	Doctor of Medicine	09/02/1970	04/01/2015	ACTIVE		
Specialties						
000TETD100 1 0V41E001 00V						

## **OBSTETRICS & GYNECOLOGY**

Specialty listings are voluntarily provided by the physician. They are not verified by the State Medical Board and do not confirm that the physician is Board certified by a professional specialty organization. To find out if a physician is certified by a specialty board, you should contact that board. Information and links to specialty boards can be found by clicking this green box.

## **Formal Action Information**

No formal action exists.

The above is an accurate representation of information currently maintained by the State Medical Board of Ohio as of 11/12/2013. The JCAHO and the NCQA have informed the Board that they consider this on-line license status information as fulfilling the primary source requirement for verification of licensure in compliance with their respective credentialing standards. This information is otherwise provided as a public service and no user may claim detrimental reliance thereon.

The State Medical Board utilizes the Federation Credentials Verification Service (FCVS) as an agent and partner in licensing physicians in Ohio. Physicians initially licensed in Ohio after February 1st, 1997 have had their medical education, post-graduate training and examination history primary source verified by FCVS. Therefore, the use of this website for documentation of primary source verification (PSV) of education and training meets current NCQA guidelines for those licensed after February 1, 1997. This statement, affirming that primary source verification of medical education and post-graduate training has been performed as part of the licensure process, should be printed out and retained in your files. Prior to February 1, 1997, the State Medical Board prime source verified the post-graduate training and examination history.