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200年 新 经门内的 MONAL HISTORY NOTE: If any of the following questions are answered 1953, and details must be furnished on separate sheet and attached. KDB 2380 YES I. Do you hold a license is any of the other healing art 2. Have you ever been called before any state board or second and the second se PRESENTE XXX XXX e interrogation concerning any violation of The Medical Practice Act 3. Have you ever been convicted of a felony or misd 4. Have you over been addicted to or treated for addiction to drugs? 5. Have you ever made an offer to compromise in connection with the Harrison Narcotic Law, or any marcotic law? 6. Have you ever recieved psychiatric treatment or received trestment for mental illness? 7. Have you ever eagaged in the excessive use of alcohol or received treatment for alcoholism? 8. Have you ever engaged in the practice of medicine in a state, district or territory wherein you did not hold a valid license? 9. Have you ever had an application for licensure refused or rejected by a licensing board? IMPORTANT: Any false or misleading information in, or in connection with, any application, may be cause for debarment on the ground of I . of good moral character. Under penalties of perjury. I declare and affirm that the statements made in the foregoing application, including accompanying statements and transcripts are true, complete and correct. duly sworn, says that I be is the person referred to in this application and 20000000 Compressed. P SIGNATURE OF APPLICANT being the same (Please use legal name) Subscribed and sworn to before me this Notary Public My Commission Expires July 7, 1982

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#### STATE OF ILLINOIS

## TALLA MINOLO DEPARTMENT OF REGISTRATION AND EDUCATION GARDIZON

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APR 2 1980 APPLIC	ATION FOR RI	C74/07		1.10	D SURGEON	PAST GRADILA
I hereby make application for exa provisions of an Act entitled: The	mination for a Ce	rtificate to p	practice Medi linois.	cine and Surg	ery in all their b	ranches, under the
Full name Lucy	ANN N	UNNA	LLY	200		
Permanent address_						
Place of birtl					POLICIA MARCINIA	
Are you a citizen of the United S NOTE: Naturalized citizens of the	tates? e United States s	nousa suomi	Certificates	of Naturalizat	ion.	
Please designate your Social Security	Number					
Please print your name exactly as which may be issued to you.		ear on any C	ertificate to	ALLY,	egistered Physicia M. D.	n and Surgeon
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Name and location of school atter	E.LAN	AN STAY	E UNIVE	6/10	riod of attendance	<b>.</b>
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I have credit for 180 guarding (No. of majors, semester hours, of from MICHIGAN STAT	EU	on the	the degreeday of _	MAK	CH A SC	19 75
I attended ALL	_ full courses of		EDUCATION ures as follow			
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I was granted the degree of Docto		or Country_	NORTH	CAROL	NA on the	13
day of MAY 19 70	2	27 260-CT-0011#1.77	d with this a	pplication is t	he genuine Diplor	ma of said institution.

# POSTGRADUATE HOSPITAL TRAINING AND PRACTICE (LIST CHRONOLOGICALLY)

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NP DESCRIPTION	NAME OF INSTITUTION	FROM TO	LOCATION	1000
POST GRADUATE SORUS	HOSP + CLINICS	6/25/19 6/25/	CHICAGO, ILL	14

#### THE FEDERATION OF STATE MEDICAL BOARDS OF THE UNITED STATES, INC. 2626-B WEST FREEWAY, FORT WORTH, TEXAS 76102

TO: ILLINOIS

SUBJECT: FLEX Examination Grades For:

NUNNALTY LUCY A



It is certified that the named physician took the Federation Licensing Examination on the date(s) entered below for the State Medical Licensing Board(s) listed and obtained the following grades.

EXAMINATION DATE ..... 06/79 FOR STATE ..... 134 STATE ID # 00083 BASIC SCIENCE Anatomy..... Biochemistry ..... Microbiology.... Pharmacology ..... BASIC SCIENCE AVERAGE ..... CLINICAL SCIENCE Medicine ..... Surgery..... Obstetrics ..... Public Health..... Pediatrics ..... Psychiatry .....

CLINICAL SCIENCE AVERAGE ..... CLINICAL COMPETENCE AVERAGE ....

FLEX WEIGHTED AVERAGE .....

RECEIVED

MAR 2 4 1980

We have no unfavorable information regarding the above named physician.

> HAROLD E. JERVEY JR., M.D. EXECUTIVE DIRECTOR - SECRETARY

#### CERTIFICATION OF COLLEGE ATTENDANCE DELECT EL CEIVED. DHA EDUCATION 1995 HAR 21 AN 10: 55 March 17, 1980 TO THE DEPARTMENT OF REGISTRATION AND CROPCETTON, SPRINGFIELD, ILLINOIS: This is to certify that Lucy Ann Nunnally, M.D. was in regular attendance at the University of North Carolina at Chapel Hill Medical School 1st yr. from the 25 day of August 19.75 to the 19 day of May 19 76 2nd yr. from the 24 day of August 1976 to the 19 day of April 3rd yr. from the 16 day of May 19.77 to the 7 day of May 4th yr. from the 22 day of May 1978 to the 25 day of March to the day of The University of North Carolina School of Medicin from the \_\_\_\_day of\_\_\_ and was granted a Diploma as Doctor of Medicine State of North Carolina located at Chapel Hill , 19\_ 79 on the 13 day of May [Seal of College] UPON COMPLETION, PLEASE FORWARD THIS FORM DIRECTLY TO: MEDICAL SECTION DEPARTMENT OF REGISTRATION AND EDUCATION 000 EAST ADAMS STREET 320 W. Washington

SPRINGFIELD, ILLINOIS 62786

# THE UNIVERSITY OF NORTH CAROLINA SCHOOL OF MEDICINE CHAPEL HILL

Name Lucy Ann Nunnally	Social Security
GRADING SYSTEM: Honor	s, Pass, Fail NUNNAI
FIRST YEAR Dates: 25 August 1975 - 19 May 1976 Courses Cell Biology General Pathology Gross Anatomy H stology Immunology Introduction to Medicine Microbiology-Virology Neurobiology Neurobiology In accordance with the Family Educational Rights and Privacy Act of 1974, the information contained on this transcript shall not be released to any other party unless a written consent is obtained from the student.	SECOND YEAR Dates: 24 August 1976 - 19 April 1977 Courses Biochemical Topics in Clinical Medicine Cardiovascular-Respiratory System Endocrine System Gastrointestinal System Hematology Introduction to Psychiatry Medicine and Society Musculoskeletal System Pathophysiology Pharmacology Physical Diagnosis Radiobiology Reproductive Biology Skin and Connective Tissue Urinary System
Summary Grade: p	Summary Grade:P
CLINICAL CLERKSHIPS  Surgery & Life Support Skills  Medicine Obstetrics-Gynecology Psychiatry Pediatrics  Summary Grade:P	Dates  16 May 1977 - 14 August 1977  15 August 1977 - 6 November 1977  14 November 1977 - 26 December 1977  13 February 1978 - 26 March 1978  27 March 1978 - 7 May 1978
ELECTIVES MA 117 - Inter. Health Care Ob-Gyn 412 - AI Gynecological Oncology Medi/Peds 412 - Endocrinology Externship - Perinatology Anes 401 - AI Anesthesiology AHEC 406 - AI Medicine FM 410 - Family Medicine Proptship. Radi 401 - General Radiology  Summary Grade:  P	Dates  Spring 1977 22 May 1978 - 18 June 1978 19 June 1978 - 16 July 1978 28 August 1978 - 23 September 1978 6 November 1978 - 3 December 1978 1 January 1979 - 28 January 1979 29 January 1979 - 25 February 1979 26 February 1979 - 25 March 1979  M.D. Degree 13 May 1979  Date

MAR 17 1980

Date of Transcript

Registrar

Office of the Registrar East Lansing, Michigan, 48824.

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Transcript Issued

Horace C. King, Registrar

## **Key To Transcript**

# bilishings from University one founded in 1855 as the Agricultural College of the Stoke of Medium. The more was changed in 1861 to State Agricultural College, a 1980 to Michigan Agricultural College, in 1925 to Michigan State College of Agriculture and Applied Science, in 1925 to Michigan State College of Agriculture and Applied Science, in 1925 to Michigan State University of Agriculture and Applied Science, and in 1984 to Michigan State University. The University of May State Indiana College of the State C

#### ACCREDITATION

Michigue State Universities is member of the Association of American Universities, the National Association of State Universities and Land Great Colleges, the American Cosnell on Education, and is accredited by the North Control Association of Colleges and Secondary Schools, and the National Council for Accreditation of Yeacher Education. Individual colleges and achools are recognized by the various pro-linational accrediting agencies in their respective fields.

#### COURSE NUMBERING SYSTEM

001-099 Non-Credit Courses and Institute of Agricultural

Technology Courses
100-299 Undergraduate Courses
100-299 Undergraduate Courses
100-299 Advanced Undergraduate Course
500 — prior to 1960 were graduate courses
500-499 Cerduate Professional Courses
800-899 Cerduate Courses
900-999 Advanced Graduate Courses

ACC ADN A E AES AET AFR AGC A H L MS ANP ANS ANT P ARB

BES BUM BIO

MLF

BOT BPY B S BSV CAC CAS C E C J

CEM

CHE CHS C L CLA CMS C M COM

CON

Civil Engineering Criminal Justice

Community Health Sci
 Community Medicine
 Communication
 Computer Science
 Communication Skills
 Communication Skills

Criminal Justice
Chemical Engineering
Chinese
Comparative Literature
Classical Studies
Community Health Science

Crop Science Crop & Soil Sciences (Fall 1976 and after)

#### GRADE-POINT AVERAGES

Grade points for each course are determined by multiplying the numerical grade by the number of credits for the course. Credits and grade-points for courses in which P. I. N. DF or CR-NC have been received on not affect the grade point surgae. Credits certed in-clude those earned, falled, and X-conditioned on the numerical

system. To compute the M.S.U. constitutive grade-point average, divide the total points average of M.S.U. for all terms by the total credits carried at M.S.U. for all terms.

A grade-point average of 2.00 is required for graduation from the University for the bachelon's degree: a 3.00 for graduate degrees.

#### 

Michigan State University employs these systems of grading: a numerical system, a supplemental credit so credit system; and a limited pass no grade system.

The Numerical System. Effective Winter 1972, the numerical system consists of the following scale: 4.0-1.5-1.0-2.5-2.0-1.5-1.0-0.0

Credit is awarded for the following minimum levels:

1.0 for undergraduate students.

2.0 for graduate students.

The Coulds No Coulds Systems In the credit to credit system the following symbols are used.

CR-Credit—means that could a gradual and represents a level of performance equivalent to or above the graduation. Thus, undergraduates means perform at or above the 2.0 level before credit is granted, graduate students must perform at or above the 2.0 level.

NC No Credit—means that performance was below the grade-point series are equived. See graduation, 1.2, below 2.0 for undergraduates, below 3.0 for graduates to the 3.0 for graduates to the 3.0 for graduates.

The Price-No Greeks Systems. This system is used only in courses, specifically appeared for the Umperality Committee on Carriculants.

#### OTHER SYMBOLS USED: " Fort

N. No Grade—on credit granted—ind

officially deepped the course after the middle of the term and was doing passing work, or
 did not earn & P grade in a course approved for grading on a P N hasts.

I No-indicates that the student did not complete the required work within the time finite for a course in which as I was given on the CR-NC or P-N grading system.

DF/N--indicates that the student did not complete the required work within the tiere approved for a course in which a DF was given. V-visitor—used in credit courses for students enrolled on a non-

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In Justin Morril Course, that grades I've Noning to applemented by a "male of Compression composed of each matter, written that stoceast, the stoceast, the stoceast, the stoceast, the stoceast, the control of the course of the

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X-condition—applies to both the numerical and CR-NC systems. (Discontinued and of 1%9 Summer Term),

ADMINISTRAÇÃO COM CONTRACTOR DE LA CONTRACTOR DEL CONTRACTOR DE LA CONTRAC

I incomplete applies to the numerical, CR NC and P N system DF-deferred-applies to the numerical, the CR-NC and P.N

#### GRADING SYSTEMS

Fall 1958 to Winter 1972
The grades of 4.5 and 0.5 were included in the numerical system of grading. The 4.5 was awarded only for exceptionally high performance.

#### Prior to Fall 1968

for to Fall 1998

A excellent, B-good, C fair, D-poor, F failure, P-pass-given only in certain credit courses which have been approved for grading on a pass-fall basis.

#### GRADE-POINT SYSTEMS

Fall 1968 to Winter 1972

Grades of 4.5 were
only up to a point
average reaches 4.00
cumulative grade-poin

Fall 1950 to Fall 1968

Pour points for each credit graded A; I for B; I for C; I for D; 0 for F and X. No points are given for grades P; I. N. V and DF.

Three points for each could prove A 1 for \$11 to C 0 for D and 1 for \$2 and X.

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(Prior to Pall 1966)	UMS — Urban and Metropolicae
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(1959 and after) in Agriculture and 

direct 17/80 THE UNIVERSITY OF CHICAGO HOSPITALS AND CLINICS 950 EAST SOTH STREET CHICAGO · ILLINOIS 60637 947-July 3, 1980 Department of Registration and Education Meidcal Section 320 W. Washington Street Springfield, Illinois 62786 TO WHOM IT MAY CONCERN: This is to certify that Dr. L. Ann Nunnally satisfactorily completed one year of post graduate training in the Department of Obstetric and Gynecology at the University of Chicago Hospitals and Clinics from June 25, 1979 through June 24, 1980. Sincerely. Zephree McClinton Housestaff Coordinator ALBERT MERRITY BILLINGS HOSPITAL . PHILIP D. ARMOUR CLINICAL RESEARCH BUILDING Bobs Roberts Memorial Hospital for Children . Chicago Lying-in Hospital COUNTRY HOME FOR CONVALESCENT CRIPPLED CHILDREN . NATHAN GOLDSLATT MEMORIAL HOSPITAL GOLDBLATT PAVILION . GERTRUDE DUNN HICKS MEMORIAL HOSPITAL . HOME FOR DESTITUTE CEITFLED CHILDREN NANCY ADELE McElwee Memorial Hospital . Franklin McLean Memorial Research Institute CLARISSA C. PECK PAVILION OF THE CHICAGO HOME FOR INCURABLES . CRARLES GILMAN SMITH HOSPITAL SILVAIN AND ARIA WYLER CHILDREN'S HOSPITAL . SURGERY/BRAIN RESEARCH INSTITUTE

Î RECOI	MMENDATION	
	Date 3/4	19 80
This certifies that I am personally acquain	nted with ALLY MD	
that I know hER to be of good moral and	d professional character and entir	
I hereby recommend hER to the Departmen		to be licensed to practice
RECEIVE	D _	
RECE 1981	5841 Maryland A	venue ddras
Endorser is a Graduate of NEDYARU	P. O. Address Chicago	year 1959
Illinois License No 36-52440	Date issued March 1	

## RECOMMENDATION

*			Date 3/	5/	19.80
This certifies	that I am person		with  ALLY M	, ,	
that I know h				ter and entirely wor	thy of confidence
I hereby recon	mend hER to th	e Department o	f Paristation and	d Education to be	
		CEIVED MPR2 1980			
	R.	APR TICHL SE	·' <u>·</u>		
Endorser is a	Graduate of	and U	P. O. Address	in the year_/	ш. 1958
	No_36-46	249.	_Date issued	17 August	1977

	This is to certify that I, RICHARD I LANGE THE EQUICATION personally
	acquainted with Lucy ANN NuNHOLAW 16 M 9, Who is applying
	for licensure to practice medicine in all of its branches Clauthe State of
	NUNNALLY, who graduated from U. H. NORTH CAROLINA
	and was issued the degree and diploma of Doctor of Medicine on the 17 day of MAY, 19 79; and that Dr. NUNNALLY
	is of good moral character and professional background. I further endorse
	Dr. NUNNALLY 's application for a license to
	practice medicine in all of its branches in the State of Illinois, attest that the hereto attached photograph is a true likeness of Dr. NUNNALLY
	and that I personally viewed the original medical diploma of this applicant.
	Signed
	RICHARD IRWIN LOWENSONN, M.D. PRINTED NAME
	State of Illinois Medical Certificate No
	036-0058597 PRINT NUMBER
	in the County of Cash
200	M Tul 8
	Subscribe Pard storm to before me this 12 day of Jay of 1900
	My Commission
	NOTARY PUBLIC 7-7-82
	expires:

	This is to certify that I, Frank & Real M.O. am personally
	acquainted with LUCY ANN NUNNAILY MD, who is applying
	acquainted with Life / // // // // // // // // // // // //
	for licensure to practice medicine in all of its branches in the State of
	Illinois; that I hereby attest to the educational background of Dr.
	NUNNALLY , who graduated from U. of NORTH CAROLINA
	and was issued the degree and diploma of Doctor of Medicine on the 17th day of
	MAY, 1979; and that Dr. NUNNAIIY
	is of good moral character and professional background. I further endorse
	Dr. NUNNAILY 's application for a license to
	practice medicine in all of its branches in the State of Illinois, attest that the
	hereto attached photograph is a true likeness of Dr. NUNNAIIY
	and that I personally viewed the original medical diploma of this applicant.
	Signed
	FRANK R REALE MI
	State of Illinois Medical Certificate No.
	00036-047717
	PAINT NOIDER
	in the County of
100	11 - 1.1.
	Subscribed and sworn to before, me this A day of July , 19 00
	My Commission
	NOTARY HUBLIC 7-7-82
	expires:

# The University of all That

To all to whom these Gree Be it kno

Lucy Ann

having completed the studies and fulfil the dec

## Doctor of

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In mitness inherent, the Seal of of duly authorized officers
Given at Chapel Hill, in the State of May in the year of Our Lord ni and of this University the one hund

Chairmen of the Mound of Contentions

President The University of North Consists



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# Medicine

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the University and the signatures are affixed to this diploma.

Anrih Carolina, this thursenth day refeel hundred and seventy-nine ed and ninetictly.

Chairman of the Round of Countries

Oliv Boningrathy of North Carolina at Chaptel Hill

Chandlar

Who Haitnersith of North Carriers at Chapel Still

Bow

02930

55 East Jackson Boulevard Chicago, Illinois 60604 (312) 793-8544



320 West Washington Springfield, Illinois 62785 (217) 785-0800

# DEPARTMENT OF REGISTRATION AND EDUCATION GARY L. CLAYTON ACTING DIRECTOR

IN REPLY REFER TO:

Medical Section Springfield Office

August 28, 1980

Lucy Ann Nunnally, M.D.

Dear Dr. Nunnally:

Your Illinois physician and surgeon certificate will be issued as soon as office routine permits and will bear license number 36-60801.

You may use this as your authority to practice as a licensed physician and surgeon until such time as your certificate is issued and mailed.

The Illinois Controlled Substances Act (Illinois Revised Statutes 1975, Chapter 56½ - Section 1100 to 1603) requires that every person who manufactures, distributes or dispenses any controlled substances within this State must annually obtain a registration issued by this Department. Enclosed please find a letter of explanation and an application for controlled substances registration.

If you require further information, you may write or call this Department.

Very truly yours.

Susan G. Meek
Acting Chief of
Licensing and Testing

SGM: t/64

Enclosures

SEAL