

State Board of Medicine

Harrisburg, PA 17105-2649
P.O. Box 2649

30008-0167

Certification of Moral Character

To be completed by two physicians with a license without restriction in good standing in the United States or Canada.

Name of Applicant: Josephine Szelaz, M.D.

I hereby certify that I know the applicant to be of good moral character and to the best of my knowledge, he/she is not addicted to the intemperate use of alcohol or to the habitual use of a narcotic or other habit forming drug. I recommend the applicant for a license to practice medicine in the Commonwealth of Pennsylvania.

I have been personally acquainted with the applicant for 1 year(s) 0 month(s).

SIGNATURE Beth Miller Date 10/10/03

Print or type name as signed above: Beth Miller

State in which licensed: Pennsylvania License Number: 35746

Name of Applicant: Josephine Szelaz, M.D.

I hereby certify that I know the applicant to be of good moral character and to the best of my knowledge, he/she is not addicted to the intemperate use of alcohol or to the habitual use of a narcotic or other habit forming drug. I recommend the applicant for a license to practice medicine in the Commonwealth of Pennsylvania.

I have been personally acquainted with the applicant for 1 year(s) 0 month(s).

SIGNATURE Beth Miller Date 10/10/03

Print or type name as signed above: Beth Miller

State in which licensed: Pennsylvania License Number: 35746

Return Completed Form to Applicant

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Center for Medical Education
Kaiser Permanente Southern California
4730 Sunset Boulevard, 3rd Floor
Los Angeles, California 90027-6021
Telephone: (323) 783-4516
Fax: (323) 783-4771

August 28, 2002

Pennsylvania State Board of Medicine
124 Pine Street, 1st Floor
Harrisburg, PA 17101

Re: Joseph Seletz, M.D.

To whom it may concern:

It is our policy to keep only a limited database on residents once they have separated from this program. Therefore, not all of your questions may be answered in detail. I can confirm that this practitioner was a resident in good standing in the program of OB/GYN and satisfactorily completed the program as indicated below:

INTERNSHIP: 07/01/1977 - 06/30/1978

RESIDENCY: 07/01/1978 - 06/30/1981

FELLOWSHIP: N/A

Should you have further questions, please do not hesitate to contact me at (323) 783-4516.

Sincerely,

Steve Vilencia
Residency Coordinator



Verification Verification of 1994 Graduate

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University of California
San Francisco

230008 0167

Dennis Office
San Francisco General Hospital

ED DIRECT

October 2, 2002

Pennsylvania State Board of Medicine
124 Pine Street, 11th Floor
Harrisburg, PA 17101

RE: Josephia Seletz, MD
[REDACTED]

Dear Pennsylvania State Board of Medicine,

The office of the Associate Dean at San Francisco General Hospital verifys internships served at San Francisco General Hospital prior to 1980 when that internship program closed.

Regarding Dr. Josephia Seletz, we can find no record at this time of a rotating internship served by her in the late seventies.

Sincerely,

Bruce Taylor
Administrative Assistant

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SP-0411 (REV. 9/99)

State Board of Medicine
717-783-1400
717-787-2381

DIEGENE

SEP 24 2002

VERIFICATION OF MEDICAL EDUCATION
For Graduates of Accredited Medical Schools

SECTION I: To be completed by applicant

Name: Solek, M.D. Josephine
Last First Middle

Name of medical school: Temple University

Location: 3420 N. Broad St Philadelphia PA 19140

SUBMIT THIS VERIFICATION OF MEDICAL EDUCATION FORM TO YOUR MEDICAL SCHOOL AND REQUEST YOUR SCHOOL TO RETURN COMPLETED FORM DIRECTLY TO THE BOARD IN OFFICIAL SCHOOL ENVELOPE

SECTION II: To be completed by Dean or Registrar of medical school

Name of medical student: Josephine Solek

Date student began to attend this medical school: 09/19/71
Month/Day/Year

Date of graduation: 03/27/76
Month/Day/Year



I certify that all of the above information is correct.

Signature of
Dean or Registrar

Date: 08/03/2002

DIR. OF FACULTY AND STUDENT RECORDS

Upon completion, school must return this completed form directly to the Pennsylvania State Board of Medicine in official school envelope. DO NOT RETURN TO APPLICANT

Regular Mailing Address
State Board of Medicine
P.O. Box 2649
Harrisburg, PA 17105-2649
U.S.A.

Courier Delivery Address
State Board of Medicine
124 Blue Street, 1st Floor
Harrisburg, PA 17101
U.S.A.

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1974-1975

F.P.

1975-1976

130008-0137

INTERNAL MEDICINE	P	OBSTETRICS/GYNECOLOGY	P
OBSTETRICS/GYNECOLOGY	HP	OBSTETRICS/GYNECOLOGY	P
PEDIATRICS	P	PEDIATRICS	P
PSYCHIATRY	H	PSYCHIATRY	P
SURGERY	HP	ELECTIVE #1: Accident Division	P
INTERDISCIPLINARY COURSES	HP	ELECTIVE #2: Gynecologic Oncology	H
CARDIOVASCULAR	Cr	ELECTIVE #3: Anesthesiology	P
GASTROINTESTINAL	GT		
MUSCULOSKELETAL	Cr	Dog Surgery	GT
NEUROSENSORY SCIENCE	Cr		
PULMONARY	Cr		
RETICULOENDOTHELIAL	Cr		
Senior Electives			
Radiology	HP	HAS COMPLETED ALL	
Metabolism	HP	REQUIREMENTS FOR A	
		DOCTOR OF MEDICINE DEGREE	

TEMPLE UNIVERSITY SCHOOL OF MEDICINE

PHILADELPHIA, PA. 19140

OFFICE OF THE DEAN

THIRD YEAR 1974-1975

FOURTH YEAR 1975-1976

INTERNAL MEDICINE	P	ELECTIVE #1: Otorhinolaryngology	HP
OBSTETRICS/GYNECOLOGY	HP	ELECTIVE #2: Neurology	P
PEDIATRICS	P	ELECTIVE #3: Pulmonary	P
PSYCHIATRY	H		
SURGERY	HP		
INTERDISCIPLINARY COURSES	HP	ELECTIVE #4: Gynecologic Oncology	H
CARDIOVASCULAR	Cr	ELECTIVE #5: Anesthesiology	P
GASTROINTESTINAL	GT		
MUSCULOSKELETAL	Cr		
NEUROSENSORY SCIENCE	Cr		
PULMONARY	Cr		
RETICULOENDOTHELIAL	Cr		
Senior Electives			
Radiology	HP		
Metabolism	HP		

M.D. AWARDED ON MAY 27, 1976

INTERNSHIP: SAN FRANCISCO GEN. HOSP.
SAN FRANCISCO, CAL

S. S. S. / Josephine Mae

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NATIONAL BOARD OF MEDICAL EXAMINERS® (NBME®)
DRAFT RECORD OF CERTIFICATION 13108-0474

This document was prepared by
National Board of Medical Examiners® (NBME®)
1750 Market Street, Philadelphia, PA 19104-3190 Tel: (215) 590-9550

Recipient: Pennsylvania State Board of Medicine
PO Box 2619
Harrisburg, PA 17105-2619

RECEIVED DIRECT

Date: 09/04/2002

Examinee: Josephine Nez Selez

Examinee ID: 171-793-7

NBME Certification Date: 07/01/1977

Date of Birth: [REDACTED]

Certificate #: 171-203

I, the physician named above, successfully completed the examination, education and training requirements for certification by the NBME as of the certification date shown above. This record shows only passing scores for each NBME Part examination reported on this document. If applicable, results for all USMLE Steps taken by this examinee (and for which scores have been reported to date) are also shown.

NBME PART I

Test Date	Pass/Fail	Score Scale	Total	Individual Subject Scores							
			Score	(Min Pass)	Anal	Phys	Bio	Path	Micro	Phar	Behav
06/11/1974	Pass	Three-Digit	500	(380)	605	530	450	415	475	455	475
		Two-Digit	80	(75)	87	83	83	75	79	78	70

NBME PART II

Test Date	Pass/Fail	Score Scale	Total	Individual Subject Scores							
			Score	(Min Pass)	Med	Surg	Ob/Gyn	Prev	Res	Psych	
09/23/1975	Pass	Three-Digit	465	(290)	415	445	565	500	375	480	
		Two-Digit	80	(75)	78	70	585	85	76	81	

NBME PART III

Test Date	Pass/Fail	Score Scale	Total	Individual Subject Scores							
			Score	(Min Pass)	Med	Surg	Ob/Gyn	Prev	Res	Psych	
03/09/1977	Pass	Three-Digit	440	(290)	410	440	565	500	375	480	
		Two-Digit	70	(75)	78	70	585	85	76	81	

033008167

130008 0367

Josephine Inez Seletz M.D.

[REDACTED]

Los Angeles, CA 90034

- 09/72 - 05/76 *Medical School*
Temple University College of Medicine
3400 N Broad Street
Philadelphia PA 19140
- 05/76 - 06/76 *Preparing and waiting for Internship to begin*
Relocating to California
- 07/76 - 06/77 *Rotating Internship*
San Francisco General Hospital
1001 Potrero Ave.
San Francisco, CA 94110
- 07/77 - 06/81 *OB/GYN Residency*
Kaiser Permanente
1900 Sundy Blvd.
Los Angeles, CA 90027
- 07/81 - 07/83 *Attending OB/GYN*
Kaiser Permanente
13622 Canaria Street
Panorama City, CA 91402
- 08/83 - Present *Private Practice*
Cedars Sinai Medical Center
10150 National Blvd.
Los Angeles, CA 90034

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STATE AND CONSUMER SERVICES AGENCY

GRAY DAVIS Governor

Consumer
Affairs

MEDICAL BOARD OF CALIFORNIA

LICENSING PROGRAM
1426 HOWE AVE SUITE 50
SACRAMENTO CA 95825-3236
TELEPHONE (916) 263-2382
FAX (916) 263-2944

www.medbd.ca.gov



August 29, 2002

PENNSYLVANIA STATE BOARD OF MEDICINE
124 PINE ST.
HARRISBURG PA 17101-1208

To Whom It May Concern:

In response to your inquiry a standard search of available records in this office has been performed. The following indicates the results of that search:

Physician: JOSEPHINA INEZ SELETZ
License No.: G 35414
Issued: August 29, 1977
Exam Type: A written examination
Expiration Date: September 30, 2004
Status: Renewed/current

If a discipline status is listed, you may obtain information concerning this action by contacting the Board's Enforcement Program, Central File Room, 1426 Howe Avenue, Sacramento, CA 95825-3236 or by faxing your request to the Central File Room at (916) 263-2420.

Linda James
Linda James

Chief, Division of Licensing

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National Practitioner Data Bank
Healthcare Integrity and Protection Data Bank
P.O. Box 10832
Chantilly, VA 20153-0832

DCN: 55000002682556
Process Date: 08/14/2008 016
Page: 1 of 1

www.hipdb-hipdb.com

To: BERNARD JOSEPH ALINEZ
DTG:
[REDACTED]

INVESTIGATIVE REPORT DATE: 07/08/07

From: The National Practitioner Data Bank

Re: Response to Your Request for Information Disclosure (Self-Query)

The enclosed information is released by the National Practitioner Data Bank (NPDB) for restricted use under the provisions of Title IV of Public Law 99-660, the Health Care Quality Improvement Act of 1986, as amended.

Title IV established the NPDB as an information clearinghouse to collect and release certain information related to malpractice payment history and professional competence or conduct of physicians, dentists, and other licensed health care practitioners. Regulations governing the NPDB are codified at 45 CFR part 60. Responsibility for operating the NPDB resides with the Secretary of the U.S. Department of Health and Human Services (HHS).

Reports from the NPDB contain limited summary information and should be used in conjunction with information from other sources in granting clinical privileges or in making employment affiliation or licensure decisions. The result of a single incident (e.g., a suspension of clinical privileges and an adverse licensure action), the NPDB is a tracking system, and a report may be included for a variety of reasons that do not necessarily reflect adversely on the professional competence or conduct of the subject named in the report.

All information received from the NPDB is considered confidential and must be used solely for the purpose for which it was disclosed. ANY PERSON WHO VIOLATES THE CONFIDENTIALITY PROVISIONS AS SPECIFIED IN TITLE IV OF PUBLIC LAW 99-660, AS AMENDED, IS SUBJECT TO A CIVIL MONEY PENALTY OF UP TO \$10,000 FOR EACH VIOLATION. Subjects of reports who obtain information about themselves from the NPDB are permitted to share that information with anyone they choose.

If you require additional assistance, visit the NPDB-HIPDB web site (www.hipdb-hipdb.com) or contact the NPDB-HIPDB Customer Service Center at 1-800-787-6732 (TDD: 1-709-802-9395). Information Specialists are available to speak with you weekdays from 8:30 a.m. to 6:00 p.m. (3:30 p.m. on Fridays); Eastern Time. The NPDB-HIPDB Customer Service Center is closed on all Federal holidays.