

**Person** | **Facility**

First Name: iris | Last Name: dominy | Profession: ---

License Number: | SSN: | License Type: ---

Address Line1: | Address Line2: | Address Line3: |

City: | State: --- | Zip Code: |

Phone Number: | License Status: <All Status>

[Clear](#)

Search Results | Page 1 of 1

Name / License Type	Address	Subtype	License Number	Hold/Alert	Issue Date	Expiration Date	License
DOMINY, IRIS E.  <b>MEDICINE AND SURGERY</b>	10215 FERNWOOD RD #101 BETHESDA MD 20817		MD17982		07/21/1989	04/01/1997	Expri

[Archive](#) | [Reinstate](#) | [Complaints](#)

**Person**

First Name: IRIS  
 Middle Name: E.  
 Last Name: DOMINY  
 Suffix:  
 Date of Birth:  
 Place Of Birth:  
 Gender:  
 SSN:

**License**

License Number: MD17982  
 License Type: MEDICINE AND SURGERY  
 Renewal Id:  
 Profession: MEDICINE  
 Sub Type:  
 Date This Status: 04/01/1997

Address Line 1  
 Address Line 2:  
 Address Line 3:  
 Address Line 4:  
 Date Deceased:  
 Registration Code: 34735723

Status: Expired  
 Effective Date: 07/21/1989  
 Reason Changed:  
 Expiration Date: 04/01/1997  
 Issue Date: 07/21/1989  
 from Country:  
 State/Prov: DC  
 Application Recd Date:  
 Obtained By: National Examination (English)  
 Reinstatement App Recd Date:  
 Date Last Renewal: 04/01/1997  
 Disciplinary Limit Flag: N  
 Last Reprint Date:

**Facility**

Full Name: IRIS E. DOMINY  
 PersonId: 90700  
 Owner/Manager:  
 Address Line1  
 Address Line2:  
 Address Line3:  
 Address Line4:

**Practice Information** [Details](#)

In Active  
 Practice Now?:  
 Practice In DC:  
 Active Practice in DC: Hours per week?:

**Alias**

Last Name	Date Changed	Alias Type Label
No Data		

**Employers for License**

No Data

**License Bond**

No Data

**Specialties**

Authority Code Label	Is Primary	Issue Date	Expiration Date
No Data			

Employment
No Data

Education
No Data

School Name	School Type	Date Graduated	Degree Certificate
No Data	No Data	No Data	No Data

CE Credits By Cycle
No Data

Requirements		
Name	Status	Date
No Data	No Data	No Data

Prerequisites
No Data

Name	License Type	License Number	Status
No Data	No Data	No Data	No Data

Schedules
No Data

Inspection
No Data

CBC Override	Details
Date to Override:	Comments:
No Data	No Data

Exam
No Data

Exam Date	Exam State	Exam Type Label	Exam Score
No Data	No Data	No Data	No Data

Initial/Renewal Question Answers
No Data

Group Name	Group Response
No Data	No Data

Person Photo ID
There is no Photo Id document

Criminal Background Check				Details	▲
FBI Result	FBI Result Date	State Result	State Result Date		
No Data					

Person Or Facility Document				▲
Date Uploaded	Description	Category	Amendments	
No Data				

Summary				
Name	Address	License Type	License Number	License Status
IRIS E. DOMINY	10215 FERNWOOD RD #101 BETHESDA MD 20817	MEDICINE AND SURGERY	MD17982	Expired

License Summary							
Profession	License Type	License Number	Status	from Country	State/Prov	Obtained By	Issue Date
MEDICINE	MEDICINE AND SURGERY	MD17982	Expired		DC	National Examination (English)	07/21/1989

Remarks List		
Date Last updated	Remarks	Updated By
03/28/2003 10:05:45 AM	9/26/06 - verif sent to Virginia Bd...LR Jul 21, 1997 1997 - Expired License in LICSWEEP 1997 - Expired License in LICSWEEP	

Edit Remark
<div style="border: 1px solid gray; padding: 5px;"> <p>9/26/06 - verif sent to Virginia Bd...LR</p> <p>Jul 21, 1997 1997 - Expired License in LICSWEEP 1997 - Expired License in LICSWEEP</p> </div>
<div style="display: flex; justify-content: space-between; align-items: center;"> <span>Save</span> <span>Clear</span> </div>

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