



**Department of Health**

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**Licensee Details**

Data current as of: April 14, 2019

**Name\Phone**

Jay Joel Kelinson

**Business Address**

Unknown NA 00000

**Number:**  
MD10336

**Profession:**  
MEDICINE

**Type:**  
MEDICINE AND SURGERY

**Obtained By Method:**  
Archive Record

**From State/Prov:**

**Issue Date:**  
9/6/1977

**Expiration Date:**

**Status:**  
Expired

**Temp. Issue Date:**

**Temp. Expire Date:**

**Specialty Information (as reported by Licensee)**

None

**Discipline Information from 1996 to Present - Please click item(s) below to view public orders.**

NONE