

# MEDICAL BOARD OF CALIFORNIA

## LICENSING DETAILS FOR: G 87542

**NAME:** HERTZ, MICHAEL ISRAEL  
**LICENSE TYPE:** PHYSICIAN AND SURGEON G  
**PRIMARY STATUS:** LICENSE RENEWED & CURRENT  
**SCHOOL NAME:** WAYNE STATE UNIVERSITY SCHOOL OF MEDICINE  
**GRADUATION YEAR:** 1976  
**ADDRESS OF RECORD**  
3917 CRYSTAL DR  
BEULAH MI 49617  
BENZIE COUNTY

**ISSUANCE DATE**

JULY 29, 2005

**EXPIRATION DATE**

OCTOBER 31, 2020

**CURRENT DATE / TIME**FEBRUARY 22, 2020  
4:54:08 AM

## PUBLIC RECORD ACTIONS

- › ADMINISTRATIVE DISCIPLINARY ACTIONS (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › COURT ORDER (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › MISDEMEANOR CONVICTION (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › PROBATIONARY LICENSE (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › FELONY CONVICTION (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › MALPRACTICE JUDGMENT (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › HOSPITAL DISCIPLINARY ACTION (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › LICENSE ISSUED WITH PUBLIC LETTER OF REPRIMAND (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › ADMINISTRATIVE CITATION ISSUED (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › ADMINISTRATIVE ACTION TAKEN BY OTHER STATE OR FEDERAL GOVERNMENT (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › ARBITRATION AWARD (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › MALPRACTICE SETTLEMENTS (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)

## PUBLIC DOCUMENTS

> DOCUMENTS (NO RECORDS)

## SURVEY INFORMATION

THE FOLLOWING INFORMATION IS SELF-REPORTED BY THE LICENSEE AND HAS NOT BEEN VERIFIED BY THE BOARD.

<b>ARE YOU RETIRED?</b>	NO
<b>ACTIVITIES IN MEDICINE</b>	ADMINISTRATION - NONE RESEARCH - 1-9 HOURS TEACHING - 1-9 HOURS TELEMEDICINE - NONE PATIENT CARE - 20-29 HOURS OTHER - NONE
<b>PATIENT CARE PRACTICE LOCATION</b>	ZIP - 48075 COUNTY - NOT IDENTIFIED
<b>PATIENT CARE SECONDARY PRACTICE LOCATION</b>	NOT IDENTIFIED
<b>TELEMEDICINE PRACTICE LOCATION</b>	NOT IDENTIFIED
<b>TELEMEDICINE SECONDARY PRACTICE LOCATION</b>	NOT IDENTIFIED
<b>CURRENT TRAINING STATUS</b>	NOT IN TRAINING
<b>AREAS OF PRACTICE</b>	OBSTETRICS AND GYNECOLOGY - PRIMARY OBSTETRICS AND GYNECOLOGY - SECONDARY
<b>BOARD CERTIFICATIONS</b>	AMERICAN BOARD OF OBSTETRICS AND GYNECOLOGY - OBSTETRICS AND GYNECOLOGY
<b>POSTGRADUATE TRAINING YEARS</b>	NOT IDENTIFIED
<b>CULTURAL BACKGROUND</b>	DECLINED TO DISCLOSE
<b>FOREIGN LANGUAGE PROFICIENCY</b>	DECLINED TO DISCLOSE
<b>GENDER</b>	DECLINED TO DISCLOSE

