



State of Delaware

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Licensee Information

Full Name: Arturo A Apolinario

License Information

License No:	C1-0004087	Profession:	Medical Practice	License Type:	Physician M.D.
License Status:	Deceased	Issue Date:	6/1/1993	Expiration Date:	3/31/2011

Address Information

This information is from the address supplied by the licensee. For most license types, licensees may choose a residence, business or other mailing address.

City: Wilmington **State:** DE **Zipcode:** 19802 **Country:** United States

Discipline Information

Profession:	Medical Practice	Disciplinary Action:	Temporary Suspension	Start:	3/5/2011	End:	6/2/2013
License Number:	C1-0004087						

Public Documents

If disciplinary information appears above but no documents are listed below, the Division of Professional Regulation has not yet added the documents to the webpage. To request the documents, submit a *Request for Public Records* form.

[Disciplinary Order 2011](#)

[Disciplinary Order 2014](#)