## MEDICAL BOARD OF CALIFORNIA

LICENSING DETAILS FOR: A 35921

NAME: SINGH, CHATOOR BISAL

LICENSE TYPE: PHYSICIAN AND SURGEON A **PRIMARY STATUS: LICENSE CANCELED** 

**ISSUANCE DATE SEPTEMBER 29, 1980** 

**EXPIRATION DATE** 

N/A

**CURRENT DATE / TIME** 

MARCH 13, 2020 10:23:36 AM

LICENSE HAS BEEN VOLUNTARILY CANCELED, OR THE LICENSE HAS BEEN EXPIRED FOR AT LEAST FIVE YEARS AND HAS NOT BEEN RENEWED. NO PRACTICE IS PERMITTED.

SCHOOL NAME: UNIVERSITY OF THE WEST INDIES FACULTY OF MEDICAL SCIENCES **GRADUATION YEAR: 1973** ADDRESS OF RECORD 2230 N E 62ND COURT FORT LAUDERDALE FL 33308 **BROWARD COUNTY** 

## 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.

**ARE YOU RETIRED? NOT IDENTIFIED** 

**ACTIVITIES IN MEDICINE** NO ACTIVITIES IDENTIFIED

PATIENT CARE PRACTICE LOCATION **NOT IDENTIFIED** PATIENT CARE SECONDARY PRACTICE NOT IDENTIFIED

**LOCATION** 

TELEMEDICINE PRACTICE LOCATION **NOT IDENTIFIED TELEMEDICINE SECONDARY NOT IDENTIFIED** 

PRACTICE LOCATION

**CURRENT TRAINING STATUS NOT IDENTIFIED** 

**AREAS OF PRACTICE** NO AREAS OF PRACTICE IDENTIFIED **BOARD CERTIFICATIONS**NO BOARD CERTIFICATIONS IDENTIFIED

POSTGRADUATE TRAINING YEARS NOT IDENTIFIED

CULTURAL BACKGROUND DECLINED TO DISCLOSE

FOREIGN LANGUAGE PROFICIENCY DECLINED TO DISCLOSE

GENDER DECLINED TO DISCLOSE