

MEDICAL BOARD OF CALIFORNIA

LICENSING DETAILS FOR: G 39852

NAME: ROBINSON, SUSAN CELINA
LICENSE TYPE: PHYSICIAN AND SURGEON G
PRIMARY STATUS: LICENSE RENEWED & CURRENT
SCHOOL NAME: UNIVERSITY OF CALIFORNIA, SAN DIEGO SCHOOL OF MEDICINE
GRADUATION YEAR: 1978
ADDRESS OF RECORD
2471 CIELO VISTA RD
PASO ROBLES CA 93446-5213
SAN LUIS OBISPO COUNTY

ISSUANCE DATE

JULY 2, 1979

EXPIRATION DATE

MARCH 31, 2021

CURRENT DATE / TIMEMARCH 16, 2020
2:28:43 PM

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.

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| ARE YOU RETIRED? | YES |
| ACTIVITIES IN MEDICINE | ADMINISTRATION - NONE OTHER - NONE PATIENT CARE - NONE RESEARCH - NONE TELEMEDICINE - NONE TEACHING - NONE |
| PATIENT CARE PRACTICE LOCATION | ZIP - 93447 COUNTY - SAN LUIS OBISPO |
| PATIENT CARE SECONDARY PRACTICE LOCATION | NOT IDENTIFIED |
| TELEMEDICINE PRACTICE LOCATION | NOT IDENTIFIED |
| TELEMEDICINE SECONDARY PRACTICE LOCATION | NOT IDENTIFIED |
| CURRENT TRAINING STATUS | NOT IN TRAINING |
| AREAS OF PRACTICE | OBSTETRICS AND GYNECOLOGY - PRIMARY |
| BOARD CERTIFICATIONS | AMERICAN BOARD OF OBSTETRICS AND GYNECOLOGY - OBSTETRICS AND GYNECOLOGY |
| POSTGRADUATE TRAINING YEARS | 6 YEARS |
| CULTURAL BACKGROUND | DECLINED TO DISCLOSE |
| FOREIGN LANGUAGE PROFICIENCY | DECLINED TO DISCLOSE |
| GENDER | DECLINED TO DISCLOSE |