3/6/2020 Details

# Licensee Details

Please see below for details for the licensee you selected.

Name: William L Lynn Designation: MD

Lic #:26148Profession:PhysicianSubtype:FullStatus:LapsedIssued:4/4/1984Expires:7/31/2011

**Specialties** 

Specialty/Subspecialty Certifying Board Primary Specialty?

Gynecology Y

**Disclaimer:** Please note that many valid certifying specialty boards do not participate in the American Board of Medical Specialties (1-866-ASK-ABMS or www.abms.org) and actual verification of a physician's board certification is best accomplished by contacting the

individual certifying specialty board.

#### **Practice Address**

Street Address: 219 Scott St.

PMB 284

**BEAUFORT SC 29902** 

Country: Beaufort
Country: United States

#### **Related Licenses**

Relationship/Name Dates License Details

#### **Public Documents**

No public documents to display

# **Physician Profile**

**Disclaimer:** This information has been provided by the physician and has not been verified by the Board. The Patient Right to Know Act requires physicians licensed to practice in the State of Georgia to provide certain information to the Board that is to be made available to the public. The Board relies upon information provided by the physicians to be true and correct, as required by statute. It is an act of unprofessional conduct for a licensee to provide erroneous information to the Board. The Board makes no warranty or guarantee concerning the accuracy or completeness of physician profiles.

For sections where there is no data, the Physician has not provided any information pertaining to that section.

Date of Profile Submission or Latest Update

#### **Initial Licensure**

Initial License State Initial License Issue Date Malpractice Coverage	SC	12/12/1980	
1.30-112	Initial License St		Malpractice Coverage

# **Practice Location History**

City State/Province	Country	From	То
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#### Medicaid/Medicare

Currently Accepting Medicaid Patients?	Currently Accepting Medicare Patients?
N	N

# **Medical Education and Training**

3/6/2020 Details

School Type	From	To	Graduated	School Name

#### **Graduate Medical Education**

Program Type/Specialty	GME/Hospital Name	From	То	City/State/Zip	Country	Graduated
		0=101110=0	20/20/40==			
		07/01/1972			US	
	Ob-Gyn residency	07/01/1972	06/30/1975	York NH	US	
	Family Practice residency	07/01/1970	06/30/1972	York PA	us	
	Family Practice residency	06/24/1970	06/30/1972	York PA	US	

**Current Hospital Privileges** 

Hospital Name	City/State/Zip

#### **Final Disciplinary Action**

Agency Name	Discipline Date	Violation Description	Action Type	Action Description

#### **Hospital Privilege Revocations**

Hospital Name Discipline Date Violation Description Action Type Action Description
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#### **Criminal Offenses**

Date of Offense	Jurisdiction	Description of Offense
Date of Offerise	ourisaliction	Description of Otherise

## **Medical Malpractice Judgment Arbitration Awards**

List of medical malpractice court judgment and/or arbitration awards against this physician entered on or after April 11, 2001 that was in excess of \$100,000 limited to the most recent 10 years.

Date Awarded Amount Awarded

**Disclaimer:** Settlement of a claim may occur for a variety of reasons which do not necessarily reflect negatively on the professional competence or conduct of the physician. A payment in settlement of a medical malpractice action or claim should not be construed as creating a presumption that medical malpractice has occurred.

### **Medical Malpractice Settlement Amounts**

- A. Minimum four (4) settlements (regardless of amount).
- B. Three (3) settlements with at least one (1) settlement over \$100,000.00.
- C. Any settlement in which at least one (1) payment is in excess of \$300,000.00.

Settlement Date Settlement Amount

**Disclaimer:** Settlement of a claim may occur for a variety of reasons which do not necessarily reflect negatively on the professional competence or conduct of the physician. A payment in settlement of a medical malpractice action or claim should not be construed as creating a presumption that medical malpractice has occurred.

#### List of physician's articles, journals, or publications limited to the most recent ten years

Date Publication Title	
------------------------	--

# List of professional organizations, community service organization memberships or activities

Organization	Tyroo	Description
Organization	Type	Describitori

# Awards

iwatus		
	Organization	Award/Honor

List of all languages excluding English used the by physician to communicate with patients and/or translation services available to their patients at the primary place of practice

Language

#### List of Appointments to Medical School Faculties (Not hospital affiliations or privileges)

3/6/2020 Details

School Position

**Physician's Comments**