## MEDICAL BOARD OF CALIFORNIA

LICENSING DETAILS FOR: G 59945

NAME: ROBERTS, JAMES LINCOLN

LICENSE TYPE: PHYSICIAN AND SURGEON G

**PRIMARY STATUS: LICENSE RENEWED & CURRENT** 

SCHOOL NAME: GEORGE WASHINGTON UNIVERSITY SCHOOL OF MEDICINE

**GRADUATION YEAR: 1984 ADDRESS OF RECORD** 3444 KEARNY VILLA RD SUITE 202

SAN DIEGO CA 92123-1959

SAN DIEGO COUNTY

**ISSUANCE DATE** 

APRIL 20, 1987

**EXPIRATION DATE** 

JUNE 30, 2022

**CURRENT DATE / TIME** 

JUNE 18, 2020 8:37:25 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.

ARE YOU RETIRED? NO

ACTIVITIES IN MEDICINE PATIENT CARE - 30-39 HOURS

TELEMEDICINE - 1-9 HOURS ADMINISTRATION - 1-9 HOURS

RESEARCH - NONE TEACHING - 1-9 HOURS

PATIENT CARE PRACTICE

**LOCATION** 

ZIP - 92123

**COUNTY - SAN DIEGO** 

PATIENT CARE SECONDARY

PRACTICE LOCATION

ZIP - 92118

**COUNTY - SAN DIEGO** 

TELEMEDICINE PRACTICE

**LOCATION** 

ZIP - 92123

**COUNTY - SAN DIEGO** 

TELEMEDICINE SECONDARY

PRACTICE LOCATION

NOT IDENTIFIED

**CURRENT TRAINING STATUS** 

NOT IN TRAINING

AREAS OF PRACTICE

UROLOGY - SECONDARY UROLOGY - PRIMARY

**BOARD CERTIFICATIONS** 

AMERICAN BOARD OF UROLOGY - UROLOGY

**POSTGRADUATE TRAINING** 

YEARS

NOT IDENTIFIED

**CULTURAL BACKGROUND** 

**DECLINED TO DISCLOSE** 

**FOREIGN LANGUAGE** 

**PROFICIENCY** 

**DECLINED TO DISCLOSE** 

**GENDER** 

MALE