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Website Verification**

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**Name:** MERRI B MORRIS    **Profession:** [MD](#)    **Office Phone:**  
**Basis:** [83](#)    **School:** [AZ](#)    **Graduation:** 05/15/1982  
**License No:** 23158    **Date Issued:** 08/06/2002    **Expiration:** 06/30/2017  
**Specialty:** [OBG\\*](#)  
**Rx#:**    **Rx Issue Date:**

**Primary Source Verification of Graduation Certified**

**Hospital Affiliation (s):** None

**Credential Status:** Lapsed

No disciplinary action taken by the Board. This certifies that the above licensee was in good standing at the time of expiration of the license.

**Board Public Action History:**[View Orders](#)[View Other License for this Person](#)[No Orders Found](#)**License History:**

Temporary License Number: 0T7387

Temporary License Issue Date: 05/03/2002

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