



ARKANSAS STATE MEDICAL BOARD

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Detailed License Verification

Queried on: Wednesday, December 16, 2020 at: 9:32 AM

General Information

Name: Lee Philip Shulman, M.D.
Specialty: Obstetrics & Gynecology

Address Information

Mailing Address: 820 South Wood Street
Address 2: Department Of OB/GYN (MC 808)
City/State/Zip: Chicago, IL 60612
Phone: (312) 996-7430
Fax: (312) 996-4238

License Information

License Number: E-1484
Original Issue Date: 9/12/1997
Expiration Date: 10/31/1999
License Status: Inactive
License Category: Expired

Board History

Appearance: Yes
Reason: Licensure
Date of Action: 8/29/1997

Minutes:

SHULMAN, Lee Philip, M.D., appeared requesting a permanent license. After discussion and upon a motion by Dr. W. Douglas, seconded by Dr. J. Zini, the committee recommended to present to the Board for licensure. On September 12, 1997 the Board voted unanimously to grant Dr. Shulman's request.