

## DeShawn LaKisha TAYLOR

**License Number:** 14659  
**License Type:** Medical Doctor  
**License Status:** Expired  
**Initial License Date:** Jan-23-2013  
**Expiration Date:** Jun-30-2017  
**Public Address:** 455 W. 5th Street  
**Public City:** Reno  
**Public State:** Nevada  
**Public ZIP Code:** 89503  
**Public Country:** United States  
**Public Phone Number:** 7753218701

### Specialties

Specialty
Obstetrics / Gynecology

### Education History

Institution	Degree/Certificate	Date Enrolled	Date To
Univ of Calif David Geffen SOM / Los Angeles, CA	Medical Doctor Degree	N/A	Jun-01-2001

### Postgraduate Training

Institution	Program Type	Specialty Type	Start Date	End Date
Martin Luther King Jr Drew Med Ctr / Los Angeles, CA	Internship	Obstetrics/Gynecology	Jul-01-2001	Jun-30-2002
Martin Luther King Jr Drew Med Ctr / Los Angeles, CA	Residency	Obstetrics/Gynecology	Jul-01-2002	Jun-30-2005
LAC / USC Medical Center / Los Angeles, CA	Fellowship	Family Medicine	Jul-01-2005	Jun-30-2007

### Board Actions

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Summary	Attachments
None.	

**Current Employment Status / Conditions / Restrictions on License / Prior Malpractice Claims**

Summary	Attachments
None.	