

# Stephen L Gabriel ROTHMAN

License Number:	6314
License Type:	Medical Doctor
License Status:	Active
Initial License Date:	Sep-20-1991
Expiration Date:	Jun-30-2023
Public Address:	9233 W Pico Blvd #210
Public City:	Los Angeles
Public State:	California
Public ZIP Code:	90035
Public Country:	United States
Public Phone Number:	(310) 278-7643
Credential:	M.D.

## Specialties

Specialty
Radiology, Diagnostic
Neuroradiology

## Education History

Institution	Degree/Certificate	Date Enrolled	Date To
Albert Einstein Medical College / New York, NY	Medical Doctor Degree	N/A	Jun-02-1967

## Postgraduate Training

Institution	Program Type	Specialty Type	Start Date	End Date
Mt Sinai Medical Center / New York, NY	Internship	Internal Medicine	Jul-01-1967	Jun-30-1968
Yale University / New Haven, CT	Residency	Radiology	Jul-01-1968	Jun-30-1969
Yale University / New Haven, CT	Fellowship	Radiology	Oct-01-1971	Sep-30-1973

Board Actions

Summary	Attachments
None.	

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

Summary	Attachments
None.	

Malpractice Information

Summary	Attachments
None.	