# Willie James PARKER

License Number: 19578

**License Type:** Medical Doctor

License Status: Active

Initial License Date: Jan-28-2020

**Expiration Date:** Jun-30-2023

Public Address: 1670 East Flamingo Rd, Suite C

2565362231

Public City:Las VegasPublic State:Nevada

Public ZIP Code: 89119

Public Country: United States

Credential: M.D.

#### **Specialties**

**Public Phone Number:** 

Specialty
Obstetrics / Gynecology

### **Education History**

Institution	Degree/Certificate	Date Enrolled	Date To
University of Iowa COM / Iowa City, IA	Medical Doctor Degree	N/A	May-04-1990

### **Postgraduate Training**

Institution	Program Type	Specialty Type	Start Date	End Date
University of Cincinnati Med Ctr / Cincinnati, OH	Residency	Obstetrics/Gynecology	Jul-01-1990	Jun-30-1994

#### **Board Actions**

Summary		Attachments
None.	Powered by Thentia Cloud (https://www.thentia.com)	

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

Sum	mary	Attachments
None	•	

## **Malpractice Information**

Summary	Attachments
None.	