

MEDICAL BOARD OF CALIFORNIA

LICENSING DETAILS FOR: A 74735

NAME: NAIM, ARJANG
LICENSE TYPE: PHYSICIAN AND SURGEON A
PRIMARY STATUS: LICENSE RENEWED & CURRENT
SECONDARY STATUS: PROBATION COMPLETED
SCHOOL NAME: MOUNT SINAI SCHOOL OF MEDICINE OF NEW YORK UNIVERSITY
GRADUATION YEAR: 1997
ADDRESS OF RECORD
STE A
326 N VERMONT AVE
LOS ANGELES CA 90004
LOS ANGELES COUNTY

ISSUANCE DATE

MAY 31, 2001

EXPIRATION DATE

JANUARY 31, 2025

CURRENT DATE / TIME

JANUARY 10, 2024
7:20:35 AM

PUBLIC RECORD ACTIONS

› ADMINISTRATIVE DISCIPLINARY ACTIONS (1)

DISCLAIMER: The Medical Board's public disclosure screens are updated periodically as new information becomes available. Please contact the Central File Room at (916) 263-2525 or at 2005 Evergreen Street, Suite 1200, Sacramento, CA 95815, to obtain a copy of public documents at a minimal charge.

- **CASE NUMBER:** 8002016021723
- **DESCRIPTION:** PROBATION COMPLETED.
- **EFFECTIVE DATE:** NOVEMBER 9, 2022

- › COURT ORDER (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › MISDEMEANOR CONVICTION (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › PROBATIONARY LICENSE (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › FELONY CONVICTION (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › MALPRACTICE JUDGMENT (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › HOSPITAL DISCIPLINARY ACTION (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › LICENSE ISSUED WITH PUBLIC LETTER OF REPRIMAND (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › ADMINISTRATIVE CITATION ISSUED (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › ADMINISTRATIVE ACTION TAKEN BY OTHER STATE OR FEDERAL GOVERNMENT (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › ARBITRATION AWARD (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- › MALPRACTICE SETTLEMENTS (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)

PUBLIC DOCUMENTS

› DECISION (1)

DOCUMENT: DECISION **DATE:** NOVEMBER 9, 2018 **PAGES:** 32

SURVEY INFORMATION

THE FOLLOWING INFORMATION IS SELF-REPORTED BY THE LICENSEE AND HAS NOT BEEN VERIFIED BY THE BOARD.

CURRENT TRAINING STATUS	NOT IN TRAINING
POSTGRADUATE TRAINING YEARS	8
PRIMARY AREA OF PRACTICE	OBSTETRICS AND GYNECOLOGY
SECONDARY AREA OF PRACTICE	NOT APPLICABLE
ABMS CERTIFICATIONS	AMERICAN BOARD OF OBSTETRICS AND GYNECOLOGY - OBSTETRICS AND GYNECOLOGY
ARE YOU RETIRED?	NO
PRACTICE ACTIVITIES	DIRECT PATIENT CARE (INCLUDING TELEHEALTH) - 30-39 HOURS PERCENTAGE (%) OF PATIENT CARE HOURS SPENT ON TELEHEALTH - 5 TRAINING - NONE RESEARCH - NONE ADMINISTRATION - 1-9 HOURS OTHER - NONE
PRIMARY PRACTICE LOCATION	ZIP - 90004 UNITED STATES PRIMARY PRACTICE LOCATION
SECONDARY PRACTICE LOCATION	ZIP - 90048 UNITED STATES SECONDARY PRACTICE LOCATION
ARE YOU HISPANIC, LATINO/A, OR OF SPANISH ORIGIN?	DECLINE TO STATE
RACE	DECLINE TO STATE
LANGUAGE FLUENCY	ENGLISH PERSIAN (FARSI) SPANISH
GENDER IDENTITY	MALE