# **Alison Denice LUTZ**

License Number: 22117

**License Type:** Medical Doctor

License Status: Active

Initial License Date: Apr-03-2022

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

**Public Address:** 5915 Tyrone Road

Public City:RenoPublic State:NevadaPublic ZIP Code:89502

Public Country:United StatesPublic Phone Number:(775) 827-0616

Credential: M.D.

### **Specialties**

Specialty	
Obstetrics/Gynecology	

### **Education History**

Institution	Degree/Certificate	Date Enrolled	Date To
Tulane University School of Medicine	Medical Doctor Degree	N/A	May-14-2016

### **Postgraduate Training**

Institution	Program Type	Specialty Type	Start Date	End Date
University of Vermont Medical Center Program	Residency	Obstetrics/Gynecology	Jul-01-2016	Jun-30-2020
University of Michigan Health System Program	Fellowship	Obstetrics/Gynecology	Jul-01-2020	Jun-30-2022

#### **Board Actions**

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Summary	Attachments
None.	

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

Summary	Attachments
None.	

## **Malpractice Information**

Summary	Attachments
None.	