12/9/23. 6:17 PM Details

# Licensee Details

Please see below for details for the licensee you selected.

Name: Douglas Alan Karpen Designation: DO

Lic #: 17461 Profession: Physician Subtype: Full

**Specialties** 

Specialty/Subspecialty Certifying Board Primary Specialty?

Gynecology Y

**Disclaimer:** Please note that many valid certifying specialty boards do not participate in the American Board of Medical Specialties (1-866-ASK-ABMS or www.abms.org) and actual verification of a physician's board certification is best accomplished by contacting the individual certifying specialty board.

#### **Practice Address**

Street Address: Po Box 150607

LUFKIN TX 75915--0607

County: Angelina
Country: United States

**Related Licenses** 

Relationship/Name Dates License Details

**Public Documents** 

No public documents to display

# **Physician Profile**

**Disclaimer:** This information has been provided by the physician and has not been verified by the Board. The Patient Right to Know Act requires physicians licensed to practice in the State of Georgia to provide certain information to the Board that is to be made available to the public. The Board relies upon information provided by the physicians to be true and correct, as required by statute. It is an act of unprofessional conduct for a licensee to provide erroneous information to the Board. The Board makes no warranty or guarantee concerning the accuracy or completeness of physician profiles.

For sections where there is no data, the Physician has not provided any information pertaining to that section.

**Date of Profile Submission or Latest Update** 

Final Disciplinary Action

Agency Name Discipline Date Violation Description Action Type Action Description

**Initial Licensure** 

Initial License State Initial License Issue Date Malpractice Coverage

**Practice Location History** 

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City State/Province Country From To

# Medicaid/Medicare

**Currently Accepting Medicaid Patients?** 

**Currently Accepting Medicare Patients?** 

# **Medical Education and Training**

# **Education/Certifications**

School Type From To Graduated School Name

#### **Graduate Medical Education**

Program Type/Specialty GME/Hospital Name From To City/State/Zip Country Graduated

#### **Current Hospital Privileges**

Hospital Name City/State/Zip

# **Hospital Privilege Revocations**

Hospital Name Discipline Date Violation Description Action Type Action Description

#### **Criminal Offenses**

Date of Offense Jurisdiction Description of Offense

#### **Medical Malpractice Judgment Arbitration Awards**

List of medical malpractice court judgment and/or arbitration awards against this physician entered on or after April 11, 2001 that was in excess of \$100,000 limited to the most recent 10 years.

Date Awarded Amount Awarded

**Disclaimer:** Settlement of a claim may occur for a variety of reasons which do not necessarily reflect negatively on the professional competence or conduct of the physician. A payment in settlement of a medical malpractice action or claim should not be construed as creating a presumption that medical malpractice has occurred.

# **Medical Malpractice Settlement Amounts**

- A. Minimum four (4) settlements (regardless of amount).
- B. Three (3) settlements with at least one (1) settlement over \$100,000.00.
- C. Any settlement in which at least one (1) payment is in excess of \$300,000.00.

Settlement Date Settlement Amount

**Disclaimer:** Settlement of a claim may occur for a variety of reasons which do not necessarily reflect negatively on the professional competence or conduct of the physician. A payment in settlement of a medical malpractice action or claim should not be construed as creating a presumption that medical malpractice has occurred.

### List of physician's articles, journals, or publications limited to the most recent ten years

Date Publication Title

# List of professional organizations, community service organization memberships or activities

Organization Type Description

#### **Awards**

Organization Award/Honor

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List of all languages excluding English used the by physician to communicate with patients and/or translation services available to their patients at the primary place of practice Language List of Appointments to Medical School Faculties (Not hospital affiliations or privileges) School Position **Physician's Comments**