



## LAWRENCE NEIL CHEUNG

License Number: ME111057

Profession Medical Doctor  
License Status Retired/  
Year Began Practicing 07/01/2005  
License Expiration 01/31/2024  
Date

## General Information

### Primary Practice Address

LAWRENCE NEIL CHEUNG  
2825 OAK LAWN AVENUE  
UNIT 192749  
DALLAS, TX 75219

### Medicaid

This practitioner does NOT participate in the Medicaid program.

### Staff Privileges

This practitioner currently holds staff privileges at the following hospital/medical/health institutions:

Institution Name	City	State
ADVOCATE GOOD SAMARITAN HOSPITAL	DOWNERS GROVE	ILLINOIS
ADVOCATE SHERMAN HOSPITAL	ELGIN	ILLINOIS
COLLETON MEDICAL CENTER	WALTERBORO	SOUTH CAROLINA
PIEDMONT ATHENS REGIONAL MEDICAL CENTER	ATHENS	GEORGIA
PIEDMONT CARTERSVILLE MEDICAL CENTER	CARTERSVILLE	GEORGIA
NORTHWESTERN MEDICINE HUNTLEY HOSPITAL	HUNTLEY	ILLINOIS
NORTHWESTERN MEDICINE MCHENRY HOSPITAL	HUNTLEY	ILLINOIS
NORTHWESTERN MEDICINE WOODSTOCK HOSPITAL	HUNTLEY	ILLINOIS
FRANKFORT REGIONAL MEDICAL CENTER	FRANKFORT	KENTUCKY
NORTHWESTERN MEDICINE DELNOR HOSPITAL	GENEVA	ILLINOIS
DOCTORS HOSPITAL OF AUGUSTA	AUGUSTA	GEORGIA
DOYLESTOWN HOSPITAL	DOYLESTOWN	PENNSYLVANIA
DUKE RALEIGH HOSPITAL	RALEIGH	NORTH CAROLINA
DUKE REGIONAL HOSPITAL	DURHAM	NORTH CAROLINA
PIEDMONT EASTSIDE MEDICAL CENTER	SNELLVILLE	GEORGIA
EDWARD HOSPITAL - MAIN CAMPUS	NAPERVILLE	ILLINOIS
ELMHURST HOSPITAL	ELMHURST	ILLINOIS
FIRSTHEALTH MONTGOMERY MEMORIAL HOSPITAL	TROY	NORTH CAROLINA
FIRSTHEALTH MOORE REGIONAL HOSPITAL	PINEHURST	NORTH CAROLINA
FREDERICK MEMORIAL HOSPITAL	FREDERICK	MARYLAND
FULTON COUNTY MEDICAL CENTER	MCCONNELLSBURG	PENNSYLVANIA
ADVENTHEALTH GORDON	CALHOUN	GEORGIA
JOHNSON MEMORIAL HOSPITAL	STAFFORD SPRINGS	CONNECTICUT

Institution Name	City	State
GRANVILLE MEDICAL CENTER	OXFORD	NORTH CAROLINA
JOHNSTON HEALTH	SMITHFIELD	NORTH CAROLINA
NORTHWESTERN MEDICINE KISHWAUKEE HOSPITAL	WARRENVILLE	ILLINOIS
MARSHALL MEDICAL CENTER SOUTH	BOAZ	ALABAMA
MERCY FITZGERALD HOSPITAL	DARBY	PENNSYLVANIA
NAZARETH HOSPITAL	PHILADELPHIA	PENNSYLVANIA
MERCY PHILADELPHIA HOSPITAL	PHILADELPHIA	PENNSYLVANIA
MERITUS MEDICAL CENTER	HAGERSTOWN	MARYLAND
ADVENTHEALTH MURRAY	CHATSWORTH	GEORGIA
NASH GENERAL HOSPITAL	ROCKY MOUNT	NORTH CAROLINA
ST. FRANCIS HOSPITAL AND MEDICAL CENTER	HARTFORD	CONNECTICUT
PIEDMONT FAYETTE HOSPITAL	FAYETTEVILLE	GEORGIA
PIEDMONT MOUNTAINSIDE HOSPITAL	JASPER	GEORGIA
PIEDMONT ROCKDALE	CONYERS	GEORGIA
PIEDMONT NEWNAN HOSPITAL	NEWNAN	GEORGIA
PIEDMONT NEWTON HOSPITAL	COVINGTON	GEORGIA
PIEDMONT WALTON HOSPITAL	MONROE	GEORGIA
RUSH COPLEY MEDICAL CENTER	AURORA	ILLINOIS
ST. FRANCIS HEALTHCARE	WILMINGTON	DELAWARE
STANFORD HEALTH CARE MAIN CAMPUS	STANFORD	CALIFORNIA
SAMPSON REGIONAL MEDICAL CENTER	CLINTON	NORTH CAROLINA
JOHNS HOPKINS SIBLEY MEMORIAL HOSPITAL	WASHINGTON	DISTRICT OF COLUMBIA
JOHNS HOPKINS SUBURBAN HOSPITAL	BETHESDA	MARYLAND
UNIVERSITY HOSPITAL	AUGUSTA	GEORGIA
UNIVERSITY MCDUFFIE	THOMSON	GEORGIA
NORTHWESTERN MEDICINE VALLEY WEST HOSPITAL	WARRENVILLE	ILLINOIS
WENTWORTH-DOUGLASS HOSPITAL	DOVER	NEW HAMPSHIRE
WAKE FOREST BAPTIST HEALTH - WILKES MEDICAL CENTER	NORTH WILKESBORO	NORTH CAROLINA
STANFORD HEALTH SYSTEM - VALLEYCARE - PLEASANTON	PLEASANTON	CALIFORNIA
TRIDENT MEDICAL CENTER	CHARLESTON	SOUTH CAROLINA
UK HEALTHCARE ALBERT B. CHANDLER HOSPITAL	LEXINGTON	KENTUCKY

## Email Address

Please contact at: [lawrence.cheung@visionradiology.com](mailto:lawrence.cheung@visionradiology.com)

## Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
ALABAMA	MEDICAL
CALIFORNIA	MEDICAL
DISTRICT OF COLUMBIA	MEDICAL
DELAWARE	MEDICAL
FLORIDA	MEDICAL
GEORGIA	MEDICAL
ILLINOIS	MEDICAL
MARYLAND	MEDICAL
NORTH CAROLINA	MEDICAL
NEW HAMPSHIRE	MEDICAL

State	Profession
PENNSYLVANIA	MEDICAL
MISSOURI	MEDICAL
SOUTH CAROLINA	MEDICAL
CONNECTICUT	MEDICAL
KENTUCKY	MEDICAL

## Florida Birth-Related Neurological Injury Compensation Association

If you are a Florida Allopathic (MD) or Osteopathic (DO) Physician, you are required to provide proof of payment of the Florida Birth-Related Neurological Injury Compensation Association (NICA) assessment as required by section 766.314, Florida Statutes. Payment of the initial and annual assessment are required of all Florida Allopathic and Osteopathic Physicians who do not qualify for an exemption as set forth in section 766.314(4)(b)4, Florida Statutes.

This practitioner has not indicated whether he/she has submitted payment of the assessment.

## Education and Training

### Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
HARVARD MEDICAL SCHOOL	MD	7/1/2000 - 6/9/2005	06/09/2005

### Other Health Related Degrees

This practitioner has completed the following other health related degrees:

School/University	City	State/Country	Dates Attended From	Dates Attended To	Degree Title
YALE UNIVERSITY	NEW HAVEN	CONNECTICUT	08/01/1996	05/01/2000	BACHELOR OF ARTS

### Professional and Postgraduate Training

This practitioner has completed the following graduate medical education:

Program Name	Program Type	Specialty Area	Other Specialty Area	City	State or Country	Dates Attended From	Dates Attended To
CHRISTIANA CARE HEALTH SYSTEM	INTERNSHIP	TY - TRANSITIONAL YEAR		NEWARK	DELAWARE	07/01/2005	06/30/2006
STANFORD HOSPITAL AND CLINICS	RESIDENCY	DR - DIAGNOSTIC RADIOLOGY		STANFORD	CALIFORNIA	07/01/2006	06/30/2010
STANFORD HOSPITAL AND CLINICS	FELLOWSHIP	OTHER	BODY IMAGING	STANFORD	CALIFORNIA	07/01/2010	06/30/2011

## Academic Appointments

### Graduate Medical Education

This practitioner has had the responsibility for graduate medical education within the last 10 years.

### Academic Appointments

This practitioner does not currently hold faculty appointments at any medical/health related institutions of higher learning.

## Specialty Certification

## Specialty Certification

This practitioner holds the following certifications from specialty boards recognized by the Florida board which regulates the profession for which he/she is licensed:

Specialty Board	Certification	Date Certified
AMERICAN BOARD OF RADIOLOGY	DR - DIAGNOSTIC RADIOLOGY	06/30/2010

## Financial Responsibility

### Financial Responsibility

I do not have hospital staff privileges and I have obtained and maintain professional liability coverage in an amount not less than \$100,000 per claim, with a minimum annual aggregate of not less than \$300,000 from an authorized insurer as defined under s. 624.09, F. S., from a surplus lines insurer as defined under s. 626.914(2).

## Proceedings and Actions

### Proceedings & Actions

#### Criminal Offenses

The criminal history information, if any exists, may be incomplete; federal criminal history information is not available to the public. Information is verified by the Department at the time of initial licensure and renewal.

This practitioner has indicated that he/she has no criminal offenses required to be published on this profile.

#### Medicaid Sanctions and Terminations

This practitioner has not been sanctioned or terminated for cause from the Medicaid program.

#### Final Disciplinary Actions Reported by the Department of Health within the last 10 years:

The information below is self reported by the practitioner.

#### Final disciplinary action taken by a specialty board within the last 10 years:

This practitioner has indicated that he/she has \*NOT\* had any final disciplinary action taken against him/her within the last 10 years by a specialty board.

#### Final disciplinary action taken by a licensing agency within the last 10 years:

This practitioner has indicated that he/she has \*NOT\* had any final disciplinary action taken against him/her within the last 10 years by a licensing agency.

#### Disciplinary action taken by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center within the last 10 years:

This practitioner has indicated that he/she has \*NOT\* had any final disciplinary action taken against him/her within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center.

The following discipline has been reported as required under 456.041(5), F.S. within the previous 10 years.

#### Resignation from or non-renewal of medical staff membership or the restriction or revocation of staff privileges within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center in lieu of or in settlement of a pending disciplinary case related to competence or character.

This practitioner has indicated that he/she has \*NEVER\* been asked to or allowed to resign from or had any medical staff privileges restricted or revoked within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center.

#### Liability Claims Exceeding \$100,000.00 Within last 10 years.

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

Additional claims information may have been reported to the Department of Financial Services. To check their web site, please click [here](#).

There have not been any reported liability actions, which are required to be reported under section 456.049, F. S., within the previous

10 years.

## Optional Information

### Committees/Memberships

This practitioner has not indicated any committees on which they serve for any health entity with which they are affiliated.

### Professional or Community Service Awards

This practitioner has not provided any professional or community service activities, honors, or awards.

### Publications

This practitioner has not provided any publications that he/she authored in peer-reviewed medical literature within the last ten years.

### Professional Web Page

This practitioner has not provided any professional web page information.

### Languages Other Than English

This practitioner has not indicated that any languages other than English are used to communicate with patients, or that any translation service is available for patients, at his/her primary place of practice.

### Other Affiliations

This practitioner has not provided any national, state, local, county, or professional affiliations.

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