SB202 LAYOUT

DataLayout Field	Abbreviation	Column Description
1	ID	ID NUMBER
2	LIC	LICENSE NUMBER
3	ACT	ACTIVE LICENSE - CURRENTLY LICENSED
4	LN	LAST NAME
5	FN	FIRST NAME
6	MN	MIDDLE NAME
7	SUF	SUFFIX
8	MA1	MAILING ADDRESS LINE 1
9	MA2	MAILING ADDRESS LINE 2
10	MC	MAILING ADDRESS CITY
11	MS	MAILING ADDRESS STATE
12	MZIP	MAILING ADDRESS ZIP CODE
13	PA1	PRACTICE ADDRESS LINE 1
14	PA2	PRACTICE ADDRESS LINE 2
15	PC	PRACTICE ADDRESS CITY
16	PS	PRACTICE ADDRESS STATE
17	PZIP	PRACTICE ADDRESS ZIP CODE
18	PPC	COUNTY FOR PRIMARY PRACTICE ZIP CODE
19	YOB	YEAR OF BIRTH (YYYY)
20	POB	BIRTHPLACE
21	SCH	SCHOOL
22	SCHCITY	SCHOOL CITY
23	SCHST	SCHOOL STATE
24	SCHCNTRY	SCHOOL COUNTRY
25	GYR	GRADUATION YEAR
26	DEG	DEGREE
27	MOL	METHOD OF LICENSURE
28	LID	LICENSE ISSUANCE DATE
29	REC	RECIPROCITY STATE/COUNTRY
30	LED	LICENSE EXPIRATION DATE
31	RS	REGISTRATION STATUS
32	RSD	REGISTRATION STATUS DATE
33	DS	DISCIPLINARY STATUS
34	DSD	DISCIPLINARY STATUS DATE
35	SPEC1	SPECIALTY 1
36	SPEC2	SPECIALTY 2
37	SPEC3	SPECIALTY 3
38	SPEC4	SPECIALTY 4
39	SPEC5	SPECIALTY 5
40	SPEC6	SPECIALTY 6
41	PPT	PRIMARY PRACTICE TYPE
42	PPS	PRIMARY PRACTICE SETTING
44	GEN	GENDER
45	RA	RACE
46	HIS	HISPANIC ORIGIN

Disclaimer

DISCLAIMER

Please note our data field definitions change occasionally. Remember to update your translations tables as needed to match the database layout you receive as failing to do so may result in incorrect data translation. Errors which result from the failure to properly translate the enclosed data, therefore, are the sole responsibility of the customer. The Texas Medical Board is not responsible for any translation errors which may occur and makes no warranties either expressed or implied, as to the data.