

PHYSICIAN LAYOUT

DataLayout Field #	Abbreviation	Column Description	Length	Starting Position	Ending Position
1	ID	UNIQUE ID NUMBER	7	1	7
2	LIC	PHYSICIAN LICENSE NUMBER	9	8	16
3	FIL	FILLER	5	17	21
4	LN	LAST NAME	25	22	46
5	FN	FIRST NAME	22	47	68
6	SUF	SUFFIX	3	69	71
7	MA1	MAILING ADDRESS LINE 1	30	72	101
8	MA2	MAILING ADDRESS LINE 2	30	102	131
9	MC	MAILING ADDRESS CITY	20	132	151
10	MS	MAILING ADDRESS STATE	2	152	153
11	MZIP	MAILING ADDRESS ZIP CODE	10	154	163
12	PA1	PRACTICE ADDRESS LINE 1	30	164	193
13	PA2	PRACTICE ADDRESS LINE 2	30	194	223
14	PC	PRACTICE ADDRESS CITY	20	224	243
15	PS	PRACTICE ADDRESS STATE	2	244	245
16	PZIP	PRACTICE ADDRESS ZIP CODE	10	246	255
17	YOB	YEAR OF BIRTH (YYYY)	8	256	263
18	POB	BIRTHPLACE	30	264	293
19	SPEC1	PRIMARY SPECIALTY	30	294	323
20	SPEC2	SECONDARY SPECIALTY	30	324	353
21	SCH	MEDICAL SCHOOL	67	354	420
22	GYR	MEDICAL SCHOOL GRAD YEAR (YYYY)	4	421	424
23	DEG	MEDICAL SCHOOL DEGREE	2	425	426
24	LID	LICENSE ISSUANCE DATE (MMDDYYYY)	8	427	434
25	MOL	METHOD OF LICENSURE CODE	1	435	435
26	REC	RECIPROCITY STATE/COUNTRY	30	436	465
27	LED	LICENSE EXPIRATION DATE (MMDDYYYY)	8	466	473
28	PTC	PRACTICE TYPE CODE	2	474	475
29	PSC	PRACTICE SETTING CODE	2	476	477
30	PMC	PRACTICE TIME CODE	2	478	479
31	RSC	REGISTRATION STATUS CODE	3	480	482
32	RSD	REGISTRATION STATUS DATE (MMDDYYYY)	8	483	490
33	CNTY	COUNTY NAME	13	491	503
34	GEN	GENDER CODE	1	504	504
35	RAC	RACE CODE	3	505	507
36	HIS	HISPANIC ORIGIN	1	508	508

Total Length of Record

508

Element:	REGISTRATION STATUS CODE
Code	Description
AC	ACTIVE
ACN	ACTIVE NOT PRACTICING
AE	LICENSE ISSUED DUE TO ADMIN ERROR
ALR	ADMINISTRATIVE-LICENSE RESCINDED
AM	ADMINISTRATIVE MEDICINE ONLY
BC	BAD CREDIT
CC	CONSIDERED CANCELED
CN	CANCELLED NON PAYMENT
CNB	CANCELLED NON PAYMENT BY BOARD
CNS	CANCELLED-SUPERSEDED BY NEW LICENSE
CP	COMPLETE, PENDING REINSTATEMENT
CR	CANCELLED BY REQUEST
CRB	CANCELLED BY REQUEST BY BOARD
CTL	CME TEMPORARY LICENSE
DC	DECEASED
DQ	DELINQUENT NON PAYMENT
IA	INACTIVE PRELIM TO BECOMING CR
LD	LOAN DEFAULT
LI	LICENSE ISSUED
LS	LICENSE SUPERCEDED-OTHER LICENSE ISSUED
NA	NOT ACTIVE
NR	NON STANDARD RETIRED AFFIDAVIT
PPD	PAYMENT PROCESSING DELAY
PR	APPLIED FOR RELICENSURE
SBA	SUSPENED BY THE BOARD-ACTIVE
TI	TEXAS LICENSE ISSUED
TR	TEXAS RETIRED
TRE	TEXAS RETIRED - EMERITUS
UTP	INACTIVE-UNABLE TO PRACTICE
VC	VOLUNTARY CHARITY CARE ONLY

Element:	PRACTICE SETTING CODE
Code	Description:
0	DID NOT ANSWER
1	MILITARY
2	VA
3	PHS
4	HMO
5	HOSPITAL BASED
6	SOLO
7	PARTNERSHIP/GROUP
8	OTHER
9	RESEARCH
10	MEDICAL SCHOOL FACULTY
11	DIRECT MEDICAL CARE
12	NOT APPLICABLE

Element:	GENDER CODE
Code	Description
M	MALE
F	FEMALE

Element:	METHOD OF LICENSURE
Code	Description
E	EXAM
R	RECIPROCITY
L	LICENSURE
C	COMPACT

Element:	PRACTICE TIME CODE
Code	Description:
0	DID NOT ANSWER
1	40+ HOURS PER WEEK
2	20-39 HOURS PER WEEK
3	11-19 HOURS PER WEEK
4	1-10 HOURS PER WEEK
5	NOT APPLICABLE

Element:	PRACTICE TYPE CODE
Code	Description:
0	DID NOT ANSWER
1	DIRECT PATIENT CARE
2	MEDICAL TEACHING OR MEDICAL SCHOOL FACILITY
3	ADMINISTRATIVE MEDICINE
4	RESEARCH
5	NOT IN PRACTICE
6	RESIDENT/FELLOW

Element:	RACE CODE
Code	Description
ASN	ASIAN
BLK	BLACK OR AFRICAN AMERICAN
HAW	HAWAIIAN OR OTHER PACIFIC ISLANDER
IND	AMERICAN INDIAN OR ALASKA NATIVE
OTH	OTHER
WHT	WHITE

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