

## Licensee Information

### Gurvinder Singh Deol - MD

**License #:** 200400487      **License Status:** Active      **Public Action:** No  
**Issue Date:** 11/29/2007      **Renewal Date:** 08/08/2026

#### Active Supervisees

Name	Type	Status	Approved
Parsons, Rebecca Lynn	Physician Assistant	Active	09/16/2024
Taylor, Jacob Michael	Physician Assistant	Active	04/06/2020

#### North Carolina Hospital Admitting Privileges

Location
WakeMed
WakeMed Cary Hospital
Western Wake

#### Out of State Active/Inactive Licenses

State
Illinois
Pennsylvania
South Carolina

#### Out of Country Active/Inactive Licenses

Country
None Reported

#### Address

Wake Orthopaedics  
 3009 New Bern Ave  
 Raleigh, NC 27610  
[919-232-5020](tel:919-232-5020)  
[wakeortho.com](http://wakeortho.com)

#### Information

**Days patients are seen at this practice:**  
 Mon-Fri

**Participates in Medicare:**  
 Yes

**Practice philosophy:**

I treat all disorders of the cervical, thoracic, and lumbar spine, including adult and pediatric spinal deformity. I have a special interest in the cervical spine and complex cervical reconstruction. I am also trained in minimally invasive surgery and motion-sparing procedures such as disc replacement. Additionally I have extensive expertise in the area of workers' compensation as it pertains to spinal injuries.

**Non-English languages in which office is able to provide clinical services (e.g. Hindi, Spanish):**

Spanish

**Non-English languages in which practitioner is able to provide clinical services (e.g. Hindi, Spanish):**

Hindi, Punjabi

**Accepting new Medicare patients:**

Yes

**Participates in Medicaid:**

Yes

**Accepting new Medicaid patients:**

Yes

**Uses electronic medical records:**

No

**Medical School**

School	Graduation
University of North Carolina at Chapel Hill School of Medicine	1996

**Post Graduate Training**

"Last Year" does not necessarily mean that the licensee completed his/her training program. (In NC, a physician can be licensed without completing such a program.)

Institution	Specialty	State, Country	Training Program	Last Year
Rush University Medical Center	Other - Spine Surgery	IL, US	Fellowship	2003
Penn State College of Medicine	Other - Orthopaedic Surgery	PA, US	Residency	2002
Penn State College of Medicine	General Surgery	PA, US	Internship	1997

**Current Board Certification and Year of Certification/Recertification**

Physicians should not list non-ABMS or non-AOA specialty boards unless the board meets the criteria set forth in the NC Medical Board's Advertising and Publicity Position Statement.

Primary/Subspecialty	Year
Orthopaedic Surgery	2014

**Area of Practice**

Area Of Practice	Primary
Orthopaedic Surgery	
Orthopedic Surgery	
Orthopedic Surgery of the Spine	
Spinal Reconstructive Surgery	Yes

**Current Membership in Medical Professional Organizations**

Membership
American Academy of Orthopaedic Surgery
Cervical Spine Research Society

### Honors & Awards

Honor/Award	Given By	Date
None Reported		

### Public Service

Name of Clinic	Service Description	Date
None Reported		

### Current Academic Appointments

Title	Institution	City, State, Country
Clinical Instructor	UNC School of Medicine	Chapel Hill, NC, US

### Publications

Title
None Reported

## Section 1: Adverse Actions

### North Carolina Medical Board Public Actions

Date	Description	Link
None Reported		

### Other Regulatory Board or Agency Public Actions

Date	Name of Board/Agency	Action Taken	Link
None Reported			

### Health Care Institution Suspensions and Revocations

Date	Health Care Institution	Action Taken
None Reported		

## Section 2: Administrative Actions

Actions listed in this section are considered non-disciplinary by the Board. In situations where administrative actions are taken, the licensee may not have met certain statutory requirements or may have failed to follow correct administrative procedures.

### North Carolina Medical Board Reentry Agreement

Date	Description	Link
None Reported		

### North Carolina Special Purpose Licensing Agreement

Date	Description	Link
None Reported		

Date	Description	Link
None Reported		

### Malpractice Information

Incident Date	Payment Date	Area of Practice	City, State, Country	Response
None Reported				

### Misdemeanor/DUI/DWI Conviction Information

Conviction Date	Conviction	Jurisdiction	Sentence
None Reported			

### Felony Conviction Information

Conviction Date	Conviction	Jurisdiction	Sentence
None Reported			

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