

Louisiana State Board of Medical Examiners

License Verification

Licensee Information

Name	Public Address
ADRIANO GOFFI	1718 WEST COLTER ST UNIT 127, PHOENIX, AZ 85016

Credential Information

Credential Number	Practitioner Type	Current Status	Discipline Status	Issue Date	Expiration Date	Reinstatement Date
MD.208186	PHYSICIAN	Inactive	None	08/07/2015	05/31/2017	

Specialities

Speciality 1	Speciality 2	Speciality 3	Speciality 4
Family Practice			

Discipline History

If Discipline Status is Conditional, Limited, Probation, Reprimanded, Revoked, Suspended, Past Disciplinary Action or Voluntary Surrender of License, a Board issued order can be found on our Disciplinary Actions page

Credential Number	Discipline Status	Public Document
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Supervisees

First Name	Last Name	License Number	Approved Date	Type
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Supervisors

First Name	Last Name	License Number	Approved Date	Type
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