

MEDICAL BOARD OF CALIFORNIA

LICENSING DETAILS FOR: G 83659

NAME: ANTHONY, GIOVANNINA MARIA

LICENSE TYPE: PHYSICIAN AND SURGEON G

PRIMARY STATUS: LICENSE CANCELED

SCHOOL NAME: UNIVERSITY OF SOUTHERN CALIFORNIA KECK SCHOOL OF MEDICINE

GRADUATION YEAR: 1992

ISSUANCE DATE

APRIL 11, 1997

EXPIRATION DATE

N/A

CURRENT DATE / TIME

DECEMBER 9, 2017
7:15:43 PM

ADDRESS OF RECORD (REQUIRED)

4083 TUJUNGA AVENUE #104
STUDIO CITY CA 91604
LOS ANGELES COUNTY

[MAP](#)

PUBLIC RECORD ACTIONS

- › [ADMINISTRATIVE DISCIPLINARY ACTIONS \(NO RECORDS\)](#)
- › [COURT ORDER \(NO RECORDS\)](#)
- › [MISDEMEANOR CONVICTION \(NO RECORDS\)](#)
- › [PROBATIONARY LICENSE \(NO RECORDS\)](#)
- › [FELONY CONVICTION \(NO RECORDS\)](#)
- › [MALPRACTICE JUDGMENT \(NO RECORDS\)](#)
- › [HOSPITAL DISCIPLINARY ACTION \(NO RECORDS\)](#)
- › [ISSUED WITH PUBLIC LETTER OF REPRIMAND \(NO RECORDS\)](#)
- › [ADMINISTRATIVE CITATION ISSUED \(NO RECORDS\)](#)
- › [ACTION TAKEN BY OTHER STATE/FEDERAL GOV \(NO RECORDS\)](#)

- › [ARBITRATION AWARD \(NO RECORDS\)](#)
- › [MALPRACTICE SETTLEMENTS \(NO RECORDS\)](#)

PUBLIC DOCUMENTS

- › [DOCUMENTS \(NO RECORDS\)](#)

SURVEY INFORMATION

THE FOLLOWING INFORMATION IS **SELF-REPORTED BY THE LICENSEE AND HAS NOT BEEN VERIFIED BY THE BOARD.**

ARE YOU RETIRED?	NOT IDENTIFIED
ACTIVITIES IN MEDICINE	NO ACTIVITIES IDENTIFIED
PATIENT CARE PRACTICE LOCATION	NOT IDENTIFIED
PATIENT CARE SECONDARY PRACTICE LOCATION	NOT IDENTIFIED
TELEMEDICINE PRACTICE LOCATION	NOT IDENTIFIED
TELEMEDICINE SECONDARY PRACTICE LOCATION	NOT IDENTIFIED
CURRENT TRAINING STATUS	NOT IDENTIFIED
AREAS OF PRACTICE	NO AREAS OF PRACTICE IDENTIFIED
BOARD CERTIFICATIONS	NO BOARD CERTIFICATIONS IDENTIFIED
POSTGRADUATE TRAINING YEARS	NOT IDENTIFIED
CULTURAL BACKGROUND	DECLINED TO DISCLOSE
FOREIGN LANGUAGE PROFICIENCY	DECLINED TO DISCLOSE
GENDER	DECLINED TO DISCLOSE
