



PUBLIC VERIFICATION / PHYSICIAN PROFILE

PHYSICIAN ASSISTANT

NAME: KAREN DOLORES GAROFALO

DATE: 05/11/2016

**THE INFORMATION IN THIS BOX HAS BEEN VERIFIED
BY THE TEXAS MEDICAL BOARD**

Date of Birth: 1958

PA License Number: PA00523

Issuance Date: 11/01/1994

Expiration Date: 02/28/2017

Registration Status: ACTIVE

Registration Date: 12/20/1996

Disciplinary Status: NONE

Disciplinary Date: NONE

Licensure Status: NONE

Licensure Date: NONE

Education

Year of graduation from physician assistant school: 1982

Program: PENN STATE UNIVERSITY (HERSHEY MEDICAL CENTER) HERSHEY, PA (3/74 - 9/86 EXTINCT)

Board Action (includes all actions regardless of license/permit type)

NONE

Status History

Status history contains entries for any updates to the individual's registration, licensure or disciplinary status types (beginning with 1/1/78, when the board's records were first automated). Entries are in reverse chronological order; new entries of each type supersede the previous entry of that same type. These records do not display status type. Should you have any questions, please contact our Customer Information Center at 512-305-7030 or verificic@tmb.state.tx.us

Status Code: AC

Effective Date: 12/06/1994

Description: ACTIVE

Status Code: LI

Effective Date: 11/01/1994

Description: LICENSE ISSUED

**THE INFORMATION IN THIS BOX WAS REPORTED BY THE LICENSEE AND
HAS NOT BEEN VERIFIED BY THE TEXAS MEDICAL BOARD**

Gender: FEMALE

Current Primary Practice Address:

5200 HARRY HINES BLVD
DALLAS , TX 75235

Active Supervising Physician(s)

Note: An asterisk (*) will appear next to the name of any supervising physician that has an active Board order. Please see the physician's profile for any information regarding a restriction on prescriptive delegation.

Supervising Physician: LUK, STEPHEN SHANG-YAN MD

License Number: H4505

Begin Date: 02/07/2011

Hours Supervised: 45

Prescriptive Delegation: YES

Dangerous Drugs: YES

Controlled Substances: YES

Summary of all License/Permit Types

Issue Date:

11/01/1994

Type:

[PHYSICIAN ASSISTANT](#)

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