



CANDACE SUE COOLEY MD

License Number: ME77965

Profession

Medical Doctor

License Status

CLEAR/ACTIVE

Year Began Practicing

Not Provided

License Expiration Date

01/31/2019

General Information

Education & Training

Academic Appointments

Specialty Certification

Financial Responsibility

Proceedings & Actions

Optional Information

License Information

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
ALBANY MEDICAL COLLEGE			01/01/0001

Other Health Related Degrees

The practitioner did not provide this mandatory information.

Professional and Postgraduate Training

This practitioner has completed the following graduate medical education:

Program Name	Program Type	Specialty Area	Other Specialty Area	City	State or Country	Dates Attended From	Dates Attended To
ALBANY MEDICAL CENTER HOSPITAL	RESIDENCY	OBG - OBSTETRICS AND GYNECOLOGY		ALBANY	NEW YORK	07/01/1994	06/30/1996
ARNOLD PALMER HSOITAL	RESIDENCY			ORLANDO	FLORIDA	07/01/1996	06/30/1998

[Privacy Statement](#) | [Disclaimer](#) | [Email Advisory](#) | [Accessibility](#)

© 2015 FL HealthSource, All Rights Reserved Florida Department of Health | Division of Medical Quality Assurance Search Services