



Practitioner Profile

EDWARD R WATSON MD

Printer Friendly Version

License Number: ME35674

Profession

Medical Doctor

2 License Status

CLEAR/ACTIVE

Year Began Practicing

Not Provided

License Expiration Date

01/31/2022

Information

General	Education	Academic	Specialty	Financial	Proceedings
Information	& Training	Appointments	Certification	Responsibility	& Actions
Optional	License				

Primary Practice Address

Information

EDWARD R WATSON MD 5640 E MESQUITE LN PHOENIX, AZ 85018 UNITED STATES

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

This practitioner has not indicated any staff privileges.

Institution Name	City	State
	MIAMI	FI ORIDA

Email Address

Please contact at: edwardwatson@mac.com

	r State Licenses Tiga ractional state licensure:				
HEALTH State		Profession			
COLO	RADO	MEDICAL DOCTOR			
CALIF	ORNIA	MEDICAL DOCTOR			
ARIZO	NA	MEDICAL DOCTOR			
NEW I	MEXICO	MEDICAL DOCTOR			
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