



PUBLIC VERIFICATION / PHYSICIAN PROFILE

PHYSICIAN IN TRAINING PERMIT

NAME: ANASTASIA COUTINHO MD

DATE: 01/30/2020

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

Date of Birth: 1986
Permit Number: BP10062155
Permit Type: PHYSICIAN IN TRAINING PERMIT
Permit Status: PERMIT TERMINATED
Permit Status Date: 3/10/2018
Begin Date: 02/24/2018
Expiration Date: 03/10/2018
End Date: 03/10/2018
Terminated Date: 03/10/2018

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

NONE

**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:

8616 GREENVILLE AVE
SUITE 101
DALLAS , TX 75243

Education

Graduation Year: 2015
Medical School: UNIV OF VERMONT COLL OF MED, BURLINGTON
Program Type: RESIDENT
Training Institution: UNIV OF CALIFORNIA - SAN FRANCISCO
Program Specialty: FAMILY MEDICINE

Summary of all License/Permit Types

Issue Date:	Type:
02/24/2018	PHYSICIAN IN TRAINING PERMIT
07/12/2019	LICENSED PHYSICIAN

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