

IOWA BOARD OF MEDICINE

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Physician - Permanent Details

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Personal Information

First Name	Jamie
Middle Name	Michele
Last Name	Phifer
Other Names Used	
Birth Year	1985

License Information

License Type	Physician - Permanent
License Number	MD-47026
Status	Active
Basis for Application	Interstate Compact
State of Principal License (if licensed via IMLC)	Michigan
Original Issue Date	02/07/2020
Expiration Date	08/01/2021
Renewal Date	
Relinquished Date	
Status at time of Relinquishment	
Public Charges and/or Public Discipline	No

Public Documents

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Practice Information

Primary Specialty	Family Medicine
Physician License Information Only: Please note that a physician's specialty information is self-reported and is not verified by this board.	
NPI	1154615185

Location (Work Address - 1)

Address Type	Work
Business / Organization	
Bldg/House Number	1037
Street Prefix	NE
Street Name	65TH
Street Type	Street
Street Direction	
Unit Type	Suite
Unit Number	371
City	Seattle
State	Washington
Zip Code	98115
Country	USA
Phone	4252761881

Education History

Medical or Acupuncture School	University of Florida College of Medicine
Graduation Date	05/14/2011
Degree Received	MD



