

Anuj KHATTAR

License Number: 20222
License Type: Medical Doctor
License Status: Active
Initial License Date: Aug-19-2020
Expiration Date: Jun-30-2023
Public Address: PO Box 257 PMB 09206
Public City: Olympia
Public State: Washington
Public ZIP Code: 98507
Public Country: United States
Public Phone Number: 4252550471
Credential: M.D.

Specialties

Specialty
Family Medicine

Education History

Institution	Degree/Certificate	Date Enrolled	Date To
Oregon Health and Science Univ SOM / Portland, OR	Medical Doctor Degree	N/A	Jun-04-2012

Postgraduate Training

Institution	Program Type	Specialty Type	Start Date	End Date
Swedish Medical Center / Seattle, WA	Residency	Family Medicine	Jun-23-2012	Jun-24-2015

Board Actions

Summary	Attachments
None.	Powered by Thentia Cloud (https://www.thentia.com)

Current Employment Status / Conditions / Restrictions on License / Prior Malpractice Claims

Summary	Attachments
None.	

Malpractice Information

Summary	Attachments
None.	