MEDICAL BOARD OF CALIFORNIA

LICENSING DETAILS FOR: G 10958

NAME: GIOVANNINI, ANDREW M

LICENSE TYPE: PHYSICIAN AND SURGEON G
PRIMARY STATUS: LICENSE SURRENDERED

SCHOOL NAME: GEORGE WASHINGTON UNIVERSITY SCHOOL OF MEDICINE

GRADUATION YEAR: 1961

ADDRESS OF RECORD
3490 20TH STREET STE 201
SAN FRANCISCO CA 94110-2582
SAN FRANCISCO COUNTY

ISSUANCE DATE

JULY 26, 1965

EXPIRATION DATE

N/A

CURRENT DATE / TIME

FEBRUARY 18, 2022 9:47:41 AM

PUBLIC RECORD ACTIONS

> ADMINISTRATIVE DISCIPLINARY ACTIONS (1)

DISCLAIMER: The Medical Board's public disclosure screens are updated periodically as new information becomes available. Please contact the Central File Room at (916) 263-2525 or at 2005 Evergreen Street, Suite 1200, Sacramento, CA 95815, to obtain a copy of public documents at a minimal charge.

• CASE NUMBER: 12 2009202222

DESCRIPTION: SURRENDER OF LICENSE.

• EFFECTIVE DATE: MAY 29, 2012

- > COURT ORDER (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- > MISDEMEANOR CONVICTION (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- PROBATIONARY LICENSE (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- > FELONY CONVICTION (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- MALPRACTICE JUDGMENT (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- > HOSPITAL DISCIPLINARY ACTION (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- > LICENSE ISSUED WITH PUBLIC LETTER OF REPRIMAND (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- > ADMINISTRATIVE CITATION ISSUED (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- ADMINISTRATIVE ACTION TAKEN BY OTHER STATE OR FEDERAL GOVERNMENT (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- > ARBITRATION AWARD (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)
- MALPRACTICE SETTLEMENTS (NO INFORMATION TO MEET THE CRITERIA FOR POSTING)

PUBLIC DOCUMENTS

DECISION (1)

DOCUMENT: DECISION DATE: MAY 29, 2012 PAGES: 18

SURVEY INFORMATION

PLAINTIFF TRIAL EXHIBIT
P-22421_00001

THE FOLLOWING INFORMATION IS SELF-REPORTED BY THE LICENSEE AND HAS NOT BEEN VERIFIED BY THE BOARD.

ARE YOU RETIRED? NOT IDENTIFIED

ACTIVITIES IN MEDICINE PATIENT CARE - 10-19 HOURS

PATIENT CARE PRACTICE

LOCATION

ZIP - 94110

COUNTY - NOT IDENTIFIED

PATIENT CARE SECONDARY

PRACTICE LOCATION

NOT IDENTIFIED

TELEMEDICINE PRACTICE

LOCATION

NOT IDENTIFIED

TELEMEDICINE SECONDARY

PRACTICE LOCATION

NOT IDENTIFIED

CURRENT TRAINING STATUS

NOT IN TRAINING

AREAS OF PRACTICE

PAIN MEDICINE - SECONDARY

BOARD CERTIFICATIONS

AMERICAN BOARD OF ORTHOPAEDIC SURGERY -

ORTHOPAEDIC SURGERY

POSTGRADUATE TRAINING

YEARS

4 YEARS

CULTURAL BACKGROUND

OTHER (NOT LISTED)

FOREIGN LANGUAGE

PROFICIENCY

SPANISH ITALIAN

GENDER

MALE