**Naomi Alphonso**

**Case Manager - Geriatric Medicine**

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ID#:**551006**

Print

[naomimalphonso@gmail.com](https://www.practicelink.com/Rms/HypEmailClick?candidateId=551006)

**1127 Prospect circle
Vista, CA 92081**

**Mobile Phone:**

**(203) 770-5621**

**Home Phone:**

**Not Provided**

**Work Phone:**

**Not Provided**

**Date Available:**

**12/2021**

**Date Submitted:**

**11/15/2021**

**Date Updated:**

**11/15/2021**

Client Information

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**Description:**

Professional Information

**Professional Status:**

**Not Provided**

**Board Status:**

**Not Provided**

**Authorized to work for any Employer in the United States:**

**Not Provided**

**State License:**

**Not Provided**

**School:**

**Not Provided**

**Internship:**

**Not Provided**

**Residency:**

**Not Provided**

**Fellowship:**

**Not Provided**

**Professional Interests:**

**Not Provided**

Personal Information

**Type of Community:**

**No Preference**

**Significant Other:**

**Not Provided**

**Gender:**

**Not Provided**

**Specific Geographic Preference:**

**Not Provided**

**Language:**

**Not Provided**