**Alicia Peterson**

**Certified Medical Dosimetrist - Addictions Medicine**

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**Date Available:**

**10/2021**

**Date Submitted:**

**9/30/2021**

**Date Updated:**

**9/30/2021**

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**