

Primary Source Verification

The licensee search function of this website provides data extracted from our database and constitutes a Primary Source Verification.

Licensee Name:	Mattei, Tobias Alecio
Profession Name:	Medical Physician & Surgeon
Licensee Number:	2018009352
Expiration Date:	1/31/2021
Original Issue Date:	3/16/2018
Primary Business Address:	3635 Vista Avenue 5th Floor FDT
Address Con't:	Neurological Surgery
City, State Zip:	Saint Louis, MO 63110
County:	St. Louis City
Other Business Addresses:	View addresses
Board Certification:	Board certification is provided by the licensee. It has not been verified by the Board of Registration for the Healing Arts. To verify visit ABMS and AOA.
Professional School:	Univ De Sao Paulo
Other Actions:	
Current Discipline Status:	None