

**Physician - Permanent Details**

## Personal Information

First Name Jeffrey  
 Middle Name Lynn  
 Last Name Piccirillo  
 Other Names Used Piccirillo  
 Birth Year 1962

## License Information

License Type Physician - Permanent  
 License Number DO-03594  
 Status Surrendered  
 Basis for Application Endorsement  
 State of Principal License (if licensed via IMLC) Feb 24 2009 12:00AM  
 Original Issue Date 09/01/2004  
 Expiration Date 10/01/2014  
 Renewal Date Sep 27, 2012  
 Relinquished Date  
 Status at time of Relinquishment  
 Public Discipline On File **Yes**

## Public Documents

[Press Release - 02\\_01\\_2008.pdf](#)  
[Press Release - 02\\_26\\_2009.pdf](#)  
[Press Release - 07\\_03\\_2013.pdf](#)  
[Press Release - 09\\_26\\_2012.pdf](#)  
[Legal Documents - Piccirillo,JeffreyL.,D.O.-03-06-430,03-06-596,03-06-635,03-06-636,03-06-654,03-06-674.pdf](#)  
[Legal Documents - Piccirillo,JeffreyL.,D.O.-03-11-157,03-11-400,03-11-502.pdf](#)

## Practice Information

Primary Specialty Family Medicine  
 Not Specified  
 Not Specified

**Physician License Information Only:** Please note that a physician's specialty information is self-reported and is not verified by this board.

NPI

## Location (Work Address - 1)

Address Type Work  
 Business / Organization  
 Bldg/House Number 1114  
 Street Prefix  
 Street Name WEST  
 Street Type Street  
 Street Direction  
 Unit Type  
 Unit Number  
 City Grinnell  
 State Iowa  
 Zip Code 50112-1646  
 Country  
 Phone 6412367846

## Education History

Medical or Acupuncture School Philadelphia College Of Osteopathic Medicine  
 Graduation Date 1989  
 Degree Received DO

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