## **ERIC JACOB HASSANI**

### License Number: OS17788

ProfessionOsteopathic PhysicianLicense StatusClear/ActiveYear Began PracticingNot ProvidedLicense Expiration03/31/2026DateValue

# **General Information**

This profile is not publishable pending confirmation by the practitioner.

#### **Primary Practice Address**

ERIC JACOB HASSANI JACKSON WEST MEDICAL CENTER EMERGENCY DEPARTMENT MIAMI, FL 33122

### **Email Address**

Please contact at: erichassani@gmail.com