Louisiana State Board of Medical Examiners

630 Camp Street, New Orleans, LA 70130
Phone: (504) 568-6820
Email: lsbme@lsbme.la.gov
Website: http://www.lsbme.la.gov

COMPLAINT FORM
REGARDING LSBME ACTIONS OR PROCEDURES

In compliance with Act 2018-655, the Board gives notice to its licensees and applicants of their opportunity to file a complaint about board actions and board procedures. You may submit such complaints to one or more of the following organizations:

1. Louisiana State Board of Medical Examiners; 630 Camp Street, New Orleans, LA 70130; (504) 568-6820; lsbme@lsbme.la.gov.
2. Committee on House & Governmental Affairs; La. House of Representatives; PO Box 94062, Baton Rouge, LA 70804; (504) 342-2403; h&ga@legis.la.gov
3. Committee on Senate & Governmental Affairs; La Senate; PO Box 94183, Baton Rouge, LA 70804; (225) 342-9845; s&g@legis.la.gov.

Use this form if you choose to submit your complaint to the LSBME

Complainant Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Day phone #: _____ Evening Phone #: _____ Email: _____

Complaint Information:
Please provide a clear and concise description of the nature of your complaint. If your complaint is against an employee, include the name of the employee here.

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Complainant's Signature: _____ **Date**: _____