



LUIS DAVID SUMOZA

License Number: ME164064

Profession	Medical Doctor
License Status	CLEAR/Active
Year Began Practicing	01/01/1991
License Expiration Date	01/31/2027

General Information

The practitioner has not verified the information contained in this profile.

Primary Practice Address

LUIS DAVID SUMOZA
100 NW 170TH STREET, SUITE 207
NORTH MIAMI BEACH, FL 33169

Medicaid

This practitioner DOES participate in the Medicaid program.

Staff Privileges

This practitioner currently holds staff privileges at the following hospital/medical/health institutions:

Institution Name	City	State
JACKSON NORTH MEDICAL CENTER	NORTH MIAMI BEACH	FLORIDA
	ST LOUIS	
	ST LOUIS	
NORTH SHORE HOSPITAL	MIAMI	FLORIDA
AVENTURA HOSPITAL MEDICAL CENTER	AVENTURA	FLORIDA
HIALEAH HOSPITAL	HIALEAH	FLORIDA
PALMETTO GENERAL HOSPITAL	HIALEAH	FLORIDA

Email Address

Please contact at: sumoza@hotmail.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
ILLINOIS	MD
MISSOURI	MD

Florida Birth-Related Neurological Injury Compensation Association

If you are a Florida Allopathic (MD) or Osteopathic (DO) Physician, you are required to provide proof of payment of the Florida Birth-Related Neurological Injury Compensation Association (NICA) assessment as required by section 766.314, Florida Statutes. Payment of the initial and annual assessment are required of all Florida Allopathic and Osteopathic Physicians who do not qualify for an exemption as set forth in section 766.314(4)(b)4, Florida Statutes.

This practitioner has indicated that he/she has submitted payment of the assessment.

Education and Training

The practitioner has not verified the information contained in this profile.

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
UNIVERSIDAD DE CARABOBA	MD	1/1/1981 - 12/1/1990	12/01/1990
UNIVERSIDAD DE CARABOBA	N/A	1/6/1981 - 12/15/1990	12/13/1990

Other Health Related Degrees

This practitioner does not hold any additional health related degrees.

Professional and Postgraduate Training

This practitioner has completed the following graduate medical education:

Program Name	Program Type	Specialty Area	Other Specialty Area	City	State or Country	Dates Attended From	Dates Attended To
MD ANDERSON CANCER CENTER	FELLOWSHIP	IM - INTERNAL MEDICINE	INFECTIOUS DISEASES	HOUSTON	TEXAS	01/01/1996	05/01/1999
UNIVERSITY OF ILLINOIS AT CHICAGO	FELLOWSHIP	IM - HEMATOLOGY AND ONCOLOGY		CHICAGO	ILLINOIS	07/01/1999	07/01/2002
MINISTRY OF HEALTH AND SOCIAL CARE	OTHER PROGRAM	IM - INTERNAL MEDICINE				01/06/1991	12/15/1991
INTERNSHIP	OTHER PROGRAM	IM - INTERNAL MEDICINE				01/06/1992	12/15/1992
INTERNAL MEDICINE RESIDENCY	RESIDENCY	IM - INTERNAL MEDICINE				01/06/1993	12/15/1995

Academic Appointments

The practitioner has not verified the information contained in this profile.

Graduate Medical Education

This practitioner has not had the responsibility for graduate medical education within the last 10 years.

Academic Appointments

This practitioner does not currently hold faculty appointments at any medical/health related institutions of higher learning.

Specialty Certification

The practitioner has not verified the information contained in this profile.

Specialty Certification

This practitioner does not hold any certifications from specialty boards recognized by the Florida board which regulates the profession for which he/she is licensed.

Financial Responsibility

The practitioner has not verified the information contained in this profile.

Financial Responsibility

I have hospital staff privileges and I have professional liability coverage in an amount not less than \$250,000 per claim, with a minimum annual aggregate of not less than \$750,000 from an authorized insurer as defined under s. 624.09, F. S., from a surplus lines insurer as defined under s. 626.914(2), F. S., from a risk retention group as defined under s. 627.942, F.S., from the Joint Underwriting Association established under s. 627.351(4), F. S., or through a plan of self insurance as provided in s.627 .357, F.S.

Proceedings and Actions

The practitioner has not verified the information contained in this profile.

Proceedings & Actions

Criminal Offenses

The criminal history information, if any exists, may be incomplete; federal criminal history information is not available to the public. Information is verified by the Department at the time of initial licensure and renewal.

This practitioner has indicated that he/she has no criminal offenses required to be published on this profile.

Medicaid Sanctions and Terminations

This practitioner has not been sanctioned or terminated for cause from the Medicaid program.

Final Disciplinary Actions Reported by the Department of Health within the last 10 years:

The information below is self reported by the practitioner.

Final disciplinary action taken by a specialty board within the last 10 years:

This practitioner has indicated that he/she has *NOT* had any final disciplinary action taken against him/her within the last 10 years by a specialty board.

Final disciplinary action taken by a licensing agency within the last 10 years:

This practitioner has indicated that he/she has *NOT* had any final disciplinary action taken against him/her within the last 10 years by a licensing agency.

Disciplinary action taken by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center within the last 10 years:

This practitioner has indicated that he/she has *NOT* had any final disciplinary action taken against him/her within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center.

The following discipline has been reported as required under 456.041(5), F.S. within the previous 10 years.

Resignation from or non-renewal of medical staff membership or the restriction or revocation of staff privileges within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center in lieu of or in settlement of a pending disciplinary case related to competence or character.

This practitioner has indicated that he/she has *NEVER* been asked to or allowed to resign from or had any medical staff privileges restricted or revoked within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center.

Liability Claims Exceeding \$100,000.00 Within last 10 years.

Settlement of a claim may occur for a variety of reasons that do not necessarily reflect negatively on the professional competence or conduct of the physician. A payment settlement of a medical malpractice action or claim should not be construed as creating a presumption that medical malpractice has occurred.

Additional claims information may have been reported to the Department of Financial Services. To check their web site, please click [here](#).

There have not been any reported liability actions, which are required to be reported under section 456.049, F. S., within the previous 10 years.

Optional Information

The practitioner has not verified the information contained in this profile.

Committees/Memberships

This practitioner has an affiliation with the following committees:
American Society of Hematology
American Society of Medical Oncology

Professional or Community Service Awards

This practitioner has not provided any professional or community service activities, honors, or awards.

Publications

This practitioner has authored the following publications in peer-reviewed medical literature within the previous ten years:

Title	Publication	Date
. BACTERIAL PNEUMONIA DUE TO BORDETELLA BRONCHISEPTICA IN A PATIENT WITH ACUTE LEUKEMIA.	CLINICAL INFECTIOUS DISEASE	04/15/1998
SIGNIFICANCE OF ASPERGILLEMIA IN PATIENTS WITH CANCER: A 10-YEAR STUDY.	CLINICAL INFECTIOUS DISEASE	07/15/2000
DIFFERENTIATING THORACIC ACTINOMYCOSIS FROM LUNG CANCER	INFECTION IN MEDICINE	10/10/2000
RENAL SALT-WASTING SYNDROME IN A PATIENT WITH CISPLATIN-INDUCED HYPONATREMIA: CASE REPORT.	AM J CLINICAL ONCOLOGY	08/25/2002
DIAGNOSIS OF INVASIVE PULMONARY ASPERGILLOSIS USING POLYMERASE CHAIN REACTION-BASED DETECTION OF ASPERGILLUS IN BAL.	CHEST	04/18/2002
POLYMERASE CHAIN REACTION ON BLOOD FOR THE DIAGNOSIS OF INVASIVE PULMONARY ASPERGILLOSIS IN CANCER PATIENTS	CANCER	02/15/2002
HYDROXYUREA FOR PREVENTION OF RECURRENT STROKE IN SICKLE CELL ANEMIA.	AM J HEMATOLOGY	11/07/2002
. CLINICAL AND RADIOLOGIC PREDICTORS OF INVASIVE PULMONARY ASPERGILLOSIS IN CANCER PATIENTS: SHOULD THE EUROPEAN ORGANIZATION FOR RESEARCH AND TREATMENT OF CANCER/MYCOSIS STUDY GROUP (EORTC/MSG) CRITERIA BE REVISED?	CANCER	04/15/2006
EOSINOPHILIC PLEURAL EFFUSIONS WITHOUT LUNG PARENCHYMAL INVOLVEMENT IN PATIENT WITH HYPEREOSINOPHILIC SYNDROME.	CHEST	10/10/2014
WHEN MONOCLONAL GAMMOPATHY IS OF RENAL SIGNIFICANCE: A CASE STUDY OF CRYSTALGLOBULINEMIA FROM CHICAGO MULTIPLE MYELOMA ROUNDS	CLINICAL LYMPHOMA AND MYELOMA	06/19/2019
MYELOID SARCOMAS CAUSING UNILATERAL CRANIAL NERVE PALSIES IN A PATIENT WITH RELAPSED ACUTE MYELOBLASTIC LEUKEMIA	CASE REPORTS IN HEMATOLOGY	01/13/2020
RACIAL/ETHNIC DIFFERENCES IN CLINICAL PRESENTATION AND OVERALL SURVIVAL IN PATIENTS WITH DIFFUSE LARGE B-CELL LYMPHOMA IN AN UNDERSERVED POPULATION	BLOOD	12/07/2017

Professional Web Page

<https://theoncologyinstitute.com/locations/north-miami-beach>

Languages Other Than English

This practitioner has indicated that the following languages other than English are used to communicate with patients, or that a translation service is available for patients, at his/her primary place of practice.
SPANISH

Other Affiliations

This practitioner has not provided any national, state, local, county, or professional affiliations.

