



## TARA C KHAN

License Number: OS10823

Profession Osteopathic Physician  
License Status CLEAR/Active  
Year Began Practicing 11/01/2005  
License Expiration 03/31/2026  
Date

## General Information

### Primary Practice Address

TARA C KHAN  
13000 BRUCE B. DOWNS BLVD  
VA -DEPARTMENT OF EMERGENCY MEDICINE  
TAMPA, FL 33612

### 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
PALMS OF PASADENA HOSPITAL	ST PETERSBURG	FLORIDA
BAY PINES VA MEDICAL CENTER	ST PETERSBERG	FLORIDA

### Email Address

Not Provided

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NEW YORK	OSTEOPATHIC PHYSICIAN
FLORIDA	OSTEOPATHIC PHYSICIAN

### 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 is exempt from paying assessment.

## Education and Training

## Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
NEW YORK INSTITUTE OF TECHNOLOGY MAIN CA	DO	8/20/2000 - 6/20/2004	06/20/2004

## Other Health Related Degrees

This practitioner has completed the following other health related degrees:

School/University	City	State/Country	Dates Attended From	Dates Attended To	Degree Title
COLLEGE OF STATEN ISLAND	SI	NEW YORK	08/19/1995	06/19/1999	BS - BIOCHEMISTRY

## 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
NEW YORK METHODIST	INTERNSHIP	EM - EMERGENCY MEDICINE		BROOKLYN	NEW YORK	07/01/2004	06/30/2005
NEW YORK METHODIST HOSPITAL	RESIDENCY	EM - EMERGENCY MEDICINE		BROOKLYN	NEW YORK	07/01/2005	06/30/2007

## Academic Appointments

### Graduate Medical Education

The practitioner did not provide this mandatory information.

### Academic Appointments

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

## Specialty Certification

### Specialty Certification

This practitioner holds the following certifications from specialty boards recognized by the Florida board which regulates the profession for which he/she is licensed:

Specialty Board	Certification
AMERICAN BOARD OF EMERGENCY MEDICINE	EM - EMERGENCY MEDICINE

## Financial Responsibility

### Financial Responsibility

Financial Exemption

## Proceedings and Actions

### 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](#).

The following liability actions have been reported as required under section 456.049, F. S., within the previous 10 years:

Incident Date	County	Judicial Case	Settlement Date	Amount	Policy Amount
08/03/2013			05/25/2018	\$170,000.00	\$0.00

## Optional Information

### Committees/Memberships

This practitioner has an affiliation with the following committees:  
New York Methodist Hospital Research Committee

### Professional or Community Service Awards

This practitioner has provided the following professional or community service activities, honors, or awards:

Community Service/Award/Honor	Organization
OUTSTANDING ACHIEVEMENT IN RESEARCH, N.Y. METHODIST	AMERICAN OSTEOPATHIC ASSOCIATION
RESIDENT OF THE YEAR, N.Y. METHODIST HOSPITAL	
LAURIE-MILLER MEMORIAL SCHOLARSHIP FOR EMERGENCY MEDICINE	

### Publications

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

Title	Publication	Date
TRANSTRACHEAL 2-D ULTRASOUND FOR IDENTIFICATION		05/01/2007
LUPUS ANTI-COAGULANT SYNDROME - A CASE REPORT		05/20/2008
THE EFFECT OF GLUTAMATE UPTAKE INHIBITORS ON HIPPOCAMPAL		

**Professional Web Page**

This practitioner has not provided any professional web page information.

**Languages Other Than English**

This practitioner has not indicated that any languages other than English are used to communicate with patients, or that any translation service is available for patients, at his/her primary place of practice.

**Other Affiliations**

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

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