DIONNE LAYNE HINDS MD

License Number: ME106391

ProfessionMedLicense StatusCONYear Began Practicing07/0License Expiration Date01/3Controlled Substance Prescriber (for the
Treatment of Chronic Non-malignantYesPain)Pain

Medical Doctor CONDITIONAL/Active 07/01/2005 01/31/2026 Yes

General Information

Primary Practice Address

DIONNE LAYNE HINDS MD 1801 SE HILLMOOR DRIVE SUITE C-106 PORT SAINT LUCIE, FL 34952

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
ST. LUCIE MEDICAL CENTER	PORT ST LUCIE	FLORIDA

Email Address

Please contact at: drdionne@hotmail.com

Other State Licenses

This practitioner has not indicated any additional state licensures.

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

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
ROSS UNIVERSITY	MD	1/1/2002 - 5/1/2005	05/31/2005

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
ST JOHN'S EPISCOPAL HOSPITAL	INTERNSHIP	OIR - OSTEOPATHIC INTERNSHIP/RESIDENCY		FAR ROCKAWAY	NEW YORK	07/01/2005	06/16/2006
SOMERSET FAMILY PRACTICE	RESIDENCY	FP - FAMILY MEDICINE		SOMERVILLE	NEW JERSEY	07/01/2006	07/31/2009

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 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

Financial Responsibility

I do not have hospital staff privileges and I have obtained and maintain professional liability coverage in an amount not less than \$100,000 per claim, with a minimum annual aggregate of not less than \$300,000 from an authorized insurer as defined under s. 624.09, F. S., from a surplus lines insurer as defined under s. 626.914(2).

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:

For instructions on how to order copies of final disciplinary actions, please click here. View Discipline Narratives

View Board Actions

Taken By		Date Of Action	Description of Di	sciplinary Action	Under Appeal
FLORIDA DEPARTMENT	OF HEALTH	10/22/2015	PROBATION		
Туре	Imposed	Due	Completed	Amt Due	Amt Recvd
PAYMENT PLAN	10/22/2015	12/21/2015		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	1/21/2016		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	2/21/2016		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	3/21/2016		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	4/21/2016		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	5/21/2016		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	6/21/2016		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	7/21/2016		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	8/21/2016		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	9/21/2016		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	10/21/2016		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	11/21/2016		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	12/21/2016		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	1/21/2017		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	2/21/2017		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	3/21/2017		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	4/21/2017		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	5/21/2017		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	6/21/2017		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	7/21/2017		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	8/21/2017		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	9/21/2017		\$ 0.00	\$ 0.00
PAYMENT PLAN	10/22/2015	10/21/2017		\$ 0.00	\$ 0.00
COSTS	10/22/2015	11/21/2015	8/22/2016	\$ 82.00	\$ 82.00
PAYMENT PLAN	10/22/2015	11/21/2015		\$ 0.00	\$ 0.00
FINE	10/22/2015	10/21/2017		\$ 8,828.87	\$ 0.00

The information below is self reported by the practitioner. For Florida health care practitioner discipline, see information listed above.

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

Committees/Memberships

This practitioner has not indicated any committees on which they serve for any health entity with which they are affiliated.

Professional or Community Service Awards

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

Publications

This practitioner has not provided any publications that he/she authored in peer-reviewed medical literature within the last ten years.

Professional Web Page

This practitioner has not provided any professional web page information.

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.