



JOHN EDWARD SYLVESTER MD

License Number: ME105971

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 06/25/1984
License Expiration 01/31/2026
Date

General Information

Primary Practice Address

JOHN EDWARD SYLVESTER MD
2880 CASEY KEY RD
NOKOMIS, FL 34275

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
DOCTORS HOSPITAL OF SARASOTA	SARASOTA	FLORIDA
SARASOTA MEMORIAL HOSPITAL	SARASOTA	FLORIDA
MANATEE MEMORIAL HOSPITAL	BRADENTON	FLORIDA
LAKEWOOD RANCH MEDICAL CENTER	LAKEWOOD RANCH	FLORIDA

Email Address

Please contact at: jsylvesterm27@gmail.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
FLORIDA	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 has submitted payment of the assessment.

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
UNIVERSITY OF CALIFORNIA-LOS ANGELES	MD	9/1/1980 - 6/1/1984	06/15/1984

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
UNIVERSITY OF CALIFORNIA	SANTA BARBARA	CALIFORNIA	09/01/1975	03/01/1980	BS BIOLOGY

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
USC HUNTINGTON MEMORIAL HOSPITAL	RESIDENCY	IM - INTERNAL MEDICINE		PASADENA	CALIFORNIA	06/01/1984	06/01/1985
UNIVERSITY OF CALIFORNIA	FELLOWSHIP	RO - RADIATION ONCOLOGY		LOS ANGELES	CALIFORNIA	07/01/1985	06/01/1988

Academic Appointments

Graduate Medical Education

This practitioner has had the responsibility for graduate medical education within the last 10 years.

Academic Appointments

This practitioner currently holds faculty appointments at the following medical/health related institutions of higher learning:

Title	Institution	City	State
CLINICAL ASSISTANT PROFESSOR	FLORIDA STATE UNIVERSITY SCHOOL OF MEDICINE	SARASOTA	FLORIDA

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	Date Certified
AMERICAN BOARD OF RADIOLOGY	RO - RADIATION ONCOLOGY	05/01/1988

Financial Responsibility

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

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

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

Title	Publication	Date
PROSTATE BRACHYTHERAPY BIOCHEMICAL RELAPSE FREE SURVIVAL	BRACHYTHERAPY	05/30/2009
RANDOMIZES TRIAL COMPARING INTRAOPERATIVE FLEXIBLE	BRACHYTHERAPY	05/30/2009
POST IMPLANT RECTAL DOSIMETRY IS NOT DEPENDENT ON PD103 OR	BRACHYTHERAPY	05/30/2009

Title	Publication	Date
PERMANENT PROSTATE BRACHYTHERAPY PREPLANNED TECHNIQUE	BRACHYTHERAPY	04/30/2009
ANALYSIS OF THE PRO-QURA DATABASE RECTAL DOSE IMPLANT QUALITY	BRACHYTHERAPY	01/30/2009
EFFECTS OF THE TIME INTERVAL BETWEEN PROSTATE BRACHYTHERAPY	AMERICAN JOURNAL OF CLINICAL ONCOLOGY	12/31/2008
15-YEAR BIOCHEMICAL RELAPSE FREE SURVIVAL IN CLINICAL STAGE	INTERNATIONAL JOURNAL OF RADIATION ONCOLOGY BIOLOGY AND PHYS	01/01/2007
INITIAL ANALYSIS OF PRO-QURA A MULTI-INSTITUTIONAL DATABASE	BRACHYTHERAPY	06/01/2007
INTERSTITIAL IMPLANT ALONE OR IN COMBINATION WITH EXTERNAL	BRACHYTHERAPY	06/01/2007
INFLUENCE OF PRO-QURA FEEDBACK ON RECTAL DOSIMETRY FOLLOWING	BRACHYTHERAPY	04/01/2008
INFLUENCE OF PRO-QURA GENERATED PLANS ON POST-IMPLANT DOSIM	MEDICAL DOSIMETRY	10/01/2008
INTER-INSTITUTIONAL VARIATION OF IMPLANT ACTIVITY FOR PERM-	BRACHYTHERAPY	07/01/2008
SECOND MALIGNANCIES AFTER PROSTATE BRACHYTHERAPY-	INTERNATIONAL JOURNAL OF RADIATION ONCOLOGY BIOLOGY PHYSICS	11/01/2006
PRELIMINARY ANALYSIS OF THE PRO-QURA MULTI-INSTITUTIONAL	BRACHYTHERAPY	04/01/2006
FIFTEEN YEAR BIOCHEMICAL RELAPSE FREE SURVIVAL OUTCOMES OF	BRITISH JOURNAL OF UROLOGY	02/01/2005

Professional Web Page

www.21stcenturyoncology.com

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 provided the following national, state, local, county, and professional affiliations:

Affiliation
AMERICAN BRACHYTHERAPY SOCIETY
AMERICAN SOCIETY FOR THERAPUTIC RADIOLOGY AND ONCOLOGY
FLORIDA STATE MEDICAL ASSOCIATION