



## FREDERICK BRENT STEINBERG

License Number: ME106004

Profession Medical Doctor  
License Status Clear/Active  
Year Began Practicing 06/28/2003  
License Expiration 01/31/2026  
Date

## General Information

### Primary Practice Address

FREDERICK BRENT STEINBERG  
2911 NW 164TH STREET  
CLIVE, IA 50325

### 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
GENERAL LEONARD WOOD ARMY COMMUNITY HOSPITAL	FORT LEONARD WOOD	MISSOURI
BAYNE-JONES ARMY COMMUNITY HOSPITAL	FORT POLK	LOUISIANA
MUNSON ARMY HEALTH CENTER	FORT LEAVENWORTH	KANSAS
FREMONT AREA MEDICAL CENTER	FREMONT	NEBRASKA
REYNOLDS ARMY COMMUNITY HOSPITAL	FORT SILL	OKLAHOMA
AURORA BEHAVIORAL HEALTHCARE	SAN DIEGO	CALIFORNIA
HEALTHSOUTH BAKERSFIELD REHABILITATION HOSPITAL	BAKERSFIELD	CALIFORNIA
VICTORY MEDICAL CENTER BEAUMONT	BEAUMONT	TEXAS
CENTRAL VALLEY SPECIALTY HOSPITAL	MODESTO	CALIFORNIA
DIRECT RADIOLOGY	COEUR D'ALENE	IDAHO
MONTEVISTA HOSPITAL	LAS VEGAS	NEVADA
HEALTHSOUTH REHABILITATION HOSPITAL OF ALBUQUERQUE	ALBUQUERQUE	NEW MEXICO
OASIS HOSPITAL	PHOENIX	ARIZONA

### Email Address

Please contact at: [pedsxray@gmail.com](mailto:pedsxray@gmail.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
ARKANSAS	MD
ARIZONA	MD
CALIFORNIA	MD
COLORADO	MD

State	Profession
DELAWARE	MD
GEORGIA	MD
ILLINOIS	MD
INDIANA	MD
IOWA	MD
KANSAS	MD
KENTUCKY	MD
LOUISIANA	MD
MASSACHUSETTS	MD
MICHIGAN	MD
MINNESOTA	MD
MISSOURI	MD
NEBRASKA	MD
NEW JERSEY	MD
NEW YORK	MD
NORTH CAROLINA	MD
OHIO	MD
OKLAHOMA	MD
PENNSYLVANIA	MD
SOUTH CAROLINA	MD
SOUTH DAKOTA	MD
TENNESSEE	MD
TEXAS	MD
WEST VIRGINIA	MD
WISCONSIN	MD
WYOMING	MD
HAWAII	MD
NEW MEXICO	MD
NEVADA	MD
OREGON	MD
UTAH	MD
WASHINGTON	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

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
MERCER UNIVERSITY	MD	9/1/1999 - 5/1/2003	05/31/2003

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
MERCER UNIVERSITY	MACON	GEORGIA	08/10/1994	05/02/1998	PHARM. D. DOCTOR OF PHARMACY

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
MAYO CLINIC	RESIDENCY	TY - TRANSITIONAL YEAR		PHOENIX	ARIZONA	06/28/2003	06/25/2004
MAYO CLINIC	RESIDENCY	DR - DIAGNOSTIC RADIOLOGY		ROCHESTER	MINNESOTA	06/26/2004	06/27/2008
ARKANSAS CHILDRENS HOSP	RESIDENCY	DR - PEDIATRIC RADIOLOGY		LITTLE ROCK	ARKANSAS	07/01/2008	06/30/2009

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 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	DR - DIAGNOSTIC RADIOLOGY	06/01/2008
AMERICAN BOARD OF RADIOLOGY	PD - PEDIATRICS	

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:

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

### Professional Web Page

[www.realrads.com](http://www.realrads.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 not provided any national, state, local, county, or professional affiliations.

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