



## DERRICK DIONE COX

License Number: ME110824

Profession Medical Doctor  
License Status Null And Void/  
Year Began Practicing 06/30/1999  
License Expiration 01/31/2016  
Date

## General Information

### Primary Practice Address

DERRICK DIONE COX  
1955 1ST AVE. NORTH  
SUITE #104  
SAINT PETERSBURG, FL 33713  
ATTN: DERRICK D. COX, M.D., PLLC

### 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
BAYFRONT MEDICAL CENTER	SAINT PETERSBURG	FLORIDA
ST. ANTHONYS HOSPITAL	SAINT PETERSBURG	FLORIDA
EDWARD WHITE HOSPITAL	SAINT PETERSBURG	FLORIDA
NORTHSIDE HOSPITAL	SAINT PETERSBURG	FLORIDA
ST. PETERSBURG GENERAL HOSPITAL	SAINT PETERSBURG	FLORIDA
PALMS OF PASADENA HOSPITAL	SAINT PETERSBURG	FLORIDA

### Email Address

Not Provided

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
CALIFORNIA	MEDICAL
MARYLAND	MEDICAL
DISTRICT OF COLUMBIA	MEDICAL
NEW YORK	MEDICAL
TEXAS	MEDICINE

### 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 not indicated whether 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 TEXAS AT HOUSTON	MD	8/1/1994 - 6/1/1999	06/01/1999

### 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
TEXAS A&M UNIVERSITY	COLLEGE STATION	TEXAS	08/01/1989	05/01/1994	BS IN MICROBIOLOGY

### 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
LOS ANGELES COUNTY-KING/DREW MEDICAL CENTER	RESIDENCY	GS - SURGERY		LOS ANGELES	CALIFORNIA	06/01/1999	06/01/2001
NATIONAL INSTITUTE OF HEALTH	FELLOWSHIP	OTHER	CLINICAL IMMUNOTHERAPY	BETHESDA	MARYLAND	07/01/2002	06/01/2003
GEORGETOWN UNIVERSITY HOSPITAL	RESIDENCY	GS - SURGERY		WASHINGTON DISTRICT OF COLUMBIA		06/01/2006	06/01/2009
GEORGETOWN UNIVERSITY HOSPITAL	RESIDENCY	GS - SURGERY		WASHINGTON DISTRICT OF COLUMBIA		06/01/2008	06/01/2009
ROSWELL PARK CANCER INST	FELLOWSHIP	OTHER	SURGICAL ONCOLOGY	BUFFALO	NEW YORK	07/01/2009	06/01/2011

## 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 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 an affiliation with the following committees:

AMERICAN CANCER SOCIETY

AMERICAN COLLEGE OF SURGEONS

AMERICAN SOCIETY OF CLINICAL ONCOLOGY

NATIONAL ASSOC FOR THE ADVANCEMENT OF COLORED PEOPLE  
NATIONAL MEDICAL ASSOCIATION  
AMERICAN MEDICAL ASSOCIATION  
NATIONAL URBAN LEAGUE  
SAGES

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
POSTER OF EXCEPTIONAL MERIT	AMERICAN COLLEGE OF SURGEONS
SCHOLAR IN TRAINING MERIT	AMERICAN ASSOC. FOR CANCER RESEARCH

Publications

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

Title	Publication	Date
COMPUTER ASSISTED DETECTION OF SUBCUTANEOUS MELANOMAS FEASIB	ACADEMIC RADIOLOGY	11/05/2004
DETECTION AND QUANTITATION OF SERUM MESOTHELIN A TUMOR MARKE	CLINICAL CANCER RESEARCH	01/15/2006
DIRECT EVIDENCE FOR RAPID AND SELECTIVE INDUCTION OF TUMOR N	INT J CANCER	06/01/2007

Professional Web Page

www.baysurgicalspecialists.com

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

Affiliation
AMERICAN COLLEGE OF SURGEONS
AMERICAN MEDICAL ASSOCIATION
AMERICAN SOCIETY OF CLINICAL ONCOLOGY
NATIONAL ASSOC FOR THE ADVANCEMENT OF COLORED PEOPLE
NATIONAL MEDICAL ASSOCIATION
NATIONAL URBAN LEAGUE
SAGES