



CHRISTINA MILSTED CAVANAGH

License Number: ME113753

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/2007
License Expiration Date	01/31/2026
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes

General Information

Primary Practice Address

CHRISTINA MILSTED CAVANAGH
2780 CLEVELAND AVENUE
SUITE 709
FORT MYERS, FL 33901

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
LEE MEMORIAL HOSPITAL	FORT MYERS	FLORIDA
LEE MEMORIAL HOSPITAL-HEALTHPARK	FORT MYERS	FLORIDA

Email Address

Please contact at: christina.cavanagh@leehealth.org

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
SOUTH CAROLINA	MEDICAL DOCTOR

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 FLORIDA	BACHELOR D	8/1/2000 - 5/1/2004	05/15/2004
UNIVERSITY OF FLORIDA COLLEGE OF MEDICINE	MD	7/1/2003 - 5/26/2007	05/26/2007

Other Health Related Degrees

The practitioner did not provide this mandatory information.

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
SELF REGIONAL HEALTHCARE FAMILY MEDICINE RESIDENCY	RESIDENCY	FAMILY MEDICINE		GREENWOOD	SOUTH CAROLINA	07/01/2007	06/17/2010

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
MUSC AHEC INSTRUCTOR	MEDICAL UNIVERSITY OF SOUTH CAROLINA	COL	CHARLESTON SOUTH CAROLINA
ASSISTANT PROFESSOR	FLORIDA STATE UNIVERSITY SCHOOL OF MEDICINE	FORT MYERS	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 FAMILY MEDICINE	FAMILY MEDICINE	07/20/2010

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](#).

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:
AAFP
SOCIETY OF TEACHERS OF FAMILY MEDICINE

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
BMS EXCELLENCE IN GRADUATE MEDICAL EDUCATION	AAFP
OUTSTANDING RESIDENT OF THE YEAR	SELF REGIONAL HEALTHCARE
OUTSTANDING RESIDENT IN OBGYN	SELF REGIONAL HEALTHCARE
RESIDENCY SERVICE AWARD	SELF REGIONAL HEALTHCARE FAMILY MEDICINE RESIDENCY
ALPHA OMEGA ALPHA	AOA HONOR MEDICAL SOCIETY
CHAPMAN CHAPTER OF GOLD HUMANISM SOCIETY	UNIVERSITY OF FLORIDA
EXCELLENCE IN FAMILY MEDICINE	UNIVERSITY OF FLORIDA
DISTINCTION OF FELLOW	AMERICAN ACADEMY OF FAMILY PHYSICIANS

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.leememorial.org

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 ACADEMY OF FAMILY PHYSICIANS