AZIZA NASSAR

License Number: ME114479

Profession Medical Doctor
License Status CLEAR/Active
Year Began Practicing 01/01/1996
License Expiration 01/31/2027

Date

General Information

Primary Practice Address

AZIZA NASSAR 4500 SAN PABLO ROAD MAYO 3-160S JACKSONVILLE, FL 32224

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
MAYO CLINIC	JACKSONVILLE	FLORIDA

Email Address

Please contact at: nassar.aziza@mayo.edu

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
MARYLAND	MEDICAL DOCTOR
MINNESOTA	MEDICAL DOCTOR
GEORGIA	MEDICAL DOCTOR
PENNSYLVANIA	MEDICAL DOCTOR
DISTRICT OF COLUMBIA	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 KHARTOUM	MBBS	8/1/1986 - 4/28/1993	04/28/1993
GEORGE WASHINGTON UNIVERSITY THE SCHOOL OF MEDICINE AND HEALTH SCIENCES	MASTERS DE	9/1/2000 - 5/18/2008	05/18/2008

Other Health Related Degrees

This practitioner does not hold any additional health related degrees.

School/University	City	State/Country	Dates Attended From	Dates Attended To	Degree Title
NORTHCENTRAL UNIVERSITY	SAN DIEGO	UNITED STATES	05/29/2017	01/20/2019	MBA

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
UNIVERSITY OF KHARTOUM TEACHING HOSPITAL	INTERNSHIP	FAMILY MEDICINE		KHARTOUM	SUDAN	09/01/1993	09/30/1995
GEORGE WASHINGTON UNIVERSITY	RESIDENCY	PTH - PATHOLOGY- ANATOMIC AND CLINICAL		WASHINGTON	DISTRICT OF COLUMBIA	07/01/1996	06/30/2000
GEORGE WASHINGTON UNIVERSITY	FELLOWSHIP	PTH - SELECTIVE PATHOLOGY		WASHINGTON	DISTRICT OF COLUMBIA	07/01/2000	06/30/2001
UNIVERSITY OF PENNSYLVANIA	FELLOWSHIP	PTH - CYTOPATHOLOGY		PHILADELPHIA	PENNSYLVANIA	07/01/2001	06/30/2002

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
PROFESSOR OF PATHOLOGY AND LABORATORY MEDICINE	MAYO MEDICAL SCHOOL	ROCHESTER	MINNESOTA

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 PATHOLOGY	PTH - PATHOLOGY-ANATOMIC AND CLINICAL	07/29/2002
AMERICAN BOARD OF PATHOLOGY	PTH - CYTOPATHOLOGY	11/12/2002

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:

ASCP - Commission on Science, Technology and Public Policy

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
SERVANT LEADERSHIP AWARD	COLLEGE OF AMERICAN PATHOLOGISTS

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

http://mayoresearch.mayo.edu/mayo/research/staff/nassar_a6.c

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.

ARABIC

Other Affiliations

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

This practitioner has provided the following flational, state, local, count	y, and professional anniations.
Affiliation	
AMERICAN MEDICAL ASSOCIATION	
AMERICAN SOCIETY OF CLINICAL PATHOLOGY	
AMERICAN SOCIETY OF CYTOPATHOLOGY	
COLLEGE OF AMERICAN PATHOLOGISTS	
UNITED STATES AND CANADIAN ACADEMY OF PATHOLOGY	