Florida HEALTH Department of Health

S.M. ATIQUR RAHMAN

License Number: ME115118

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/2004
License Expiration Date	01/31/2027
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes

General Information

Primary Practice Address

S.M. ATIQUR RAHMAN
2750 CORAL WAY
CORAL GABLES, FL 33145

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

Email Address

Please contact at: **atiq_r@msn.com**

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
KENTUCKY	MEDICAL
COLORADO	MEDICAL
NEW YORK	

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
RANGPUR MEDICAL COLLEGE	MBBS	12/1/1975 - 5/1/1982	05/01/1982

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 ALABAMA AT BIRMINGHAM	BIRMINGHAM	ALABAMA	09/01/1992	12/01/1994	MPH MASTER OF PUBLIC HEALTH
UNIVERSITY OF ALABAMA AT BIRMINGHAM	BIRMINGHAM	ALABAMA	09/01/1996	12/01/2000	DOCTOR OF PUBLIC HEALTH
TULANE UNIVERSITY SCHOOL OF PUBLIC HEALTH AND TROPICAL MEDIC	NEW ORLEANS	UNITED STATES	01/09/1992	05/30/1992	

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
GRIFFIN HOSPITAL	RESIDENCY	IM - INTERNAL MEDICINE		DERBY	CONNECTICUT	07/01/2005	06/30/2006
UNIVERSITY OF LOUISVILLE	RESIDENCY	N - NEUROLOGY		LOUISVILLE	KENTUCKY	07/01/2006	09/28/2007
UNIVERSITY OF COLORADO DENVER	RESIDENCY	GPM - PREVENTIVE MEDICINE		AURORA	COLORADO	07/01/2008	06/30/2009
MEHARRY MEDICAL COLLEGE	INTERNSHIP	GPM - PREVENTIVE MEDICINE		NASHVILLE	TENNESSEE	07/01/2004	06/30/2005

Academic Appointments

Graduate Medical Education

This practitioner has not had the responsibility for graduate medical education within the last 10 years.

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 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.

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 MEDICAL ASSOCIATION
AMERICAN COLLEGE OF PREVENTIVE 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
OUTSTANDING PRESENTATION AWARD IN 2009 ANNUAL CONFERENCE	AMERICAN COLLEGE OF PREVENTIVE MEDICINE

Publications

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

Title	Publication	Date
IS RESECTION IS EQUIVALENT TO TRANSPLANTATION FOR EARLY CIRR	JOURNAL OF GASTROINTESTINAL SURGERY	07/27/2012
COGNITIVE PERFORMANCE AND PLASMA LEVELS OF HOMOCYSTEINE VIT	DEMENTIA AND GERIATRIC COGNITIVE DISORDERS	10/16/2008
VALIDITY OF SELF-REPORTS OF REASONS FOR HOSPITALIZATION BY Y	AMERICAN JOURNAL OF EPIDEMIOLOGY	09/01/2005
DIETARY FACTORS AND COGNITIVE IMPAIRMENT IN COMMUNITY-DWELLI	THE JOURNAL OF NUTRITION HEALTH AGING JNHA	01/01/2007

Professional Web Page

This practitioner has not provided any professional web page information.

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.
BANGLA
SPANISH

Other Affiliations

This practitioner has not provided any national, state, local, county, or professional affiliations.