

**OMOKHAYE MOGOKEOLA HIGO**

License Number: ME117260

Profession Medical Doctor
License Status Vol Relinquish/
Year Began Practicing 01/01/1990
License Expiration 01/31/2020
Date

General Information**Primary Practice Address**

OMOKHAYE MOGOKEOLA HIGO
1 SHIRCLIFF WAY
JACKSONVILLE, FL 32204

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

This practitioner currently holds staff privileges at the following hospital/medical/health institutions:

Institution Name	City	State
DEPAUL HEALTH CENTER	BRIDGETON	MISSOURI
SSM ST. CLARE HEALTH CENTER	FENTON	MISSOURI
ST. JOHNS MERCY HOSPITAL	WASHINGTON	MISSOURI
ADVANCED ICU CARE	ST. LOUIS	MISSOURI
ST. MARYS HEALTH CENTER	JEFFERSON CITY	MISSOURI
WAUKESHA MEMORIAL HOSPITAL	WAUKESHA	WISCONSIN
OCONOMOWOC MEMORIAL HOSPITAL	WAUKESHA	WISCONSIN
BARNES JEWISH ST. PETERS HOSPITAL	ST. PETERS	MISSOURI
ST. CLARES HOSPITAL & DIAGNOSTIC TREATMENT CENTER	WESTON	WISCONSIN
DIVINE SAVIOR HEALTHCARE	PORTAGE	WISCONSIN
AFFINITY HEALTH SYSTEM	OSHKOSH	WISCONSIN
PRESBYTERIAN HOSPITAL-RUST MEDICAL CENTER	ALBUQUERQUE	NEW MEXICO
BARNES JEWISH WEST COUNTY HOSPITAL	ST. LOUIS	MISSOURI
ROCKFORD MEMORIAL HOSPITAL	ROCKFORD	ILLINOIS
ST. MARYS GOOD SAMARITAN INC	CENTRALIA	ILLINOIS
ALBERT EINSTEIN MEDICAL CENTER	PHILADELPHIA	PENNSYLVANIA
SOUTHERN REGIONAL MEDICAL CENTER	RIVERDALE	GEORGIA
HIGH POINT REGIONAL HEALTH SYSTEM	HIGH POINT	NORTH CAROLINA
MAYO CLINIC HEALTH SYSTEM	WAYCROSS	GEORGIA
GRANDE RONDE HOSPITAL	LA GRANDE	OREGON
PERRY HOSPITAL	PERRY	GEORGIA
HOUSTON MEDICAL CENTER	WARNER ROBINS	GEORGIA
SANFORD ABERDEEN MEDICAL CENTER	ABERDEEN	SOUTH DAKOTA
TIFT REGIONAL MEDICAL CENTER	TIFTON	GEORGIA

Institution Name	City	State
TUOMEY HEALTHCARE SYSTEM	SUMTER	SOUTH CAROLINA
EINSTEIN MEDICAL CENTER MONTGOMERY	EAST NORRITON	PENNSYLVANIA
ST. FRANCIS EASTSIDE	GREENVILLE	SOUTH CAROLINA
MEMORIAL HOSPITAL AT GULFPORT	GULFPORT	MISSISSIPPI
SHORE MEMORIAL HOSPITAL	SOMERS POINT	NEW JERSEY

Email Address

Please contact at: **ohigo61531@aol.com**

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
CALIFORNIA	MEDICAL DOCTOR
GEORGIA	MEDICAL DOCTOR
ILLINOIS	MEDICAL DOCTOR
INDIANA	MEDICAL DOCTOR
MISSISSIPPI	MEDICAL DOCTOR
MISSOURI	MEDICAL DOCTOR
NEBRASKA	MEDICAL DOCTOR
NEW JERSEY	MEDICAL DOCTOR
NEW MEXICO	MEDICAL DOCTOR
NORTH CAROLINA	MEDICAL DOCTOR
OREGON	MEDICAL DOCTOR
PENNSYLVANIA	MEDICAL DOCTOR
SOUTH CAROLINA	MEDICAL DOCTOR
SOUTH DAKOTA	MEDICAL DOCTOR
VIRGINIA	MEDICAL DOCTOR
WEST VIRGINIA	MEDICAL DOCTOR
WISCONSIN	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 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 IBADAN	BACHELOR D	9/1/1980 - 6/30/1984	06/30/1984
UNIVERSITY OF ILORIN	MBBS	9/1/1985 - 8/1/1990	08/01/1990

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
UNIVERSITY COLLEGE HOSPITAL	ROTATING INTERNSHIP	OTHER	GENERAL	IBADAN	NIGERIA	11/01/1990	10/01/1991
JOHN H. STROGER, JR. COOK COUNTY HOSPITAL	ROTATING INTERNSHIP	IM - INTERNAL MEDICINE		CHICAGO	ILLINOIS	07/01/1993	06/30/1994
JOHN H. STROGER, JR. COOK COUNTY HOSPITAL	RESIDENCY	AN - ANESTHESIOLOGY		CHICAGO	ILLINOIS	07/01/1994	06/30/1997
WASHINGTON UNIVERSITY SCHOOL OF MEDICINE	FELLOWSHIP	AN - CRITICAL CARE MEDICINE		ST. LOUIS	MISSOURI	08/01/1999	07/31/2000

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 ANESTHESIOLOGY	AN - CRITICAL CARE MEDICINE	09/08/2001
AMERICAN BOARD OF ANESTHESIOLOGY	AN - ANESTHESIOLOGY	04/23/1999

Financial Responsibility

Financial Responsibility

I have hospital staff privileges and I have established an irrevocable letter of credit or escrow account in an amount of \$250,000/\$750,000, in accordance with Chapter 675, F. S., for a letter of credit and s. 625.52, F. S., for an escrow account.

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

This practitioner has not provided any professional web page information.

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.
