### MICHELE RAUL D'APUZZO

### License Number: ME119693

Profession Medical Doctor
License Status CLEAR/Active
Year Began Practicing 01/01/2006
License Expiration Date 01/31/2026

Controlled Substance Prescriber (for the Yes

Treatment of Chronic Non-malignant

Pain)

## **General Information**

## **Primary Practice Address**

MICHELE RAUL D'APUZZO 1321 NW 14TH ST SUITE 306 MIAMI, FL 33125

#### 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
UNIVERSITY OF MIAMI MLLER SCHOOL OF MEDICINE	MIAMI	FLORIDA

### **Email Address**

Please contact at: mdapuzzo@miami.edu

#### **Other State Licenses**

This practitioner has not indicated any additional state licensures.

### 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
UNIVERSIDAD CENTRAL DE VENEZUELALUIS RAZETTI	MD	10/4/1993 - 1/16/2000	03/10/2000

### **Other Health Related Degrees**

This practitioner does not hold any additional health related degrees.

### **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
MAYO CLINIC	INTERNSHIP	GS - SURGERY		ROCHESTER	MINNESOTA	06/24/2006	06/22/2007
MAYO CLINIC	RESIDENCY	ORS - ORTHOPAEDIC SURGERY		ROCHESTER	MINNESOTA	06/25/2008	06/25/2010
UNIVERSITY OF VIRGINIA	RESIDENCY	ORS - ORTHOPAEDIC SURGERY		CHARLOTTESVILLE	VIRGINIA	06/20/2011	06/21/2013
HOSPITAL FOR SPECIAL SURGERY	FELLOWSHIP	ORS - ADULT RECONSTRUCTIVE ORTHOPAEDICS		NEW YORK	UNITED STATES	08/01/2013	07/31/2014

## **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
ASSISTANT PROFESSOR	UNIVERSITY OF MIAMI HOSPITAL	MIAMI	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 ORTHOPAEDIC SURGERY	ORS - ORTHOPAEDIC SURGERY	

# 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**

#### FIULEEUHIYS & ACHUHS

#### **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 provided the following professional or community service activities, honors, or awards:

Community Service/Award/Honor	Organization
CLINICAL EXCELLENCE AWARD	HOSPITAL FOR SPECIAL SURGERY
CURRENT CONCEPTS FOUNDATION SCHOLARSHIP	CURRENT CONCEPTS IN JOINT REPLACEMENT
JOHN INSALL AWARD FOR BEST CLINICAL PAPER	THE KNEE SOCIETY
ACHIEVEMENT AWARD	AMERICAN ACADEMY OF ORTHOPAEDIC SURGEONS
EMERGING LEADERSHIP PROGRAM	AMERICAN ORTHOPEDIC ASSOCIATION
THE FACULTY RESEARCH AWARD	MAYO CLINIC
BEST POSTER AWARD	MID-AMERICA ORTHOPAEDIC ASSOCIATION

Community Service/Award/Honor	Organization
2ND PRIZE FELLOW RESEARCH COMPETITION	FLORIDA ORTHOPAEDIC SOCIETY
RESIDENT AND FELLOW TRAVEL AWARD	EASTERN ORTHOPAEDIC ASSOCIATION
1ST PRIZE FELLOW RESEARCH COMPETITION	FLORIDA ORTHOPAEDIC SOCIETY
1ST PRIZE RESIDENTS FELLOWS RESEARCH COMPETITION	FLORIDA ORTHOPAEDIC SOCIETY

## **Publications**

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

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Title	Publication	Date
PERIOPERATIVE COMPLICATIONS IN PATIENTS WITH INFLAMMATORY AR	JOURNAL OF ARTHROPLASTY	09/01/2015
LACK OF EARLY DISLOCATION FOLLOWING TOTAL HIP ARTHROPLASTY $\ensuremath{W}$	HIP INTERNATIONAL	02/01/2015
MEDICAID PAYER STATUS IS ASOCIATED WITH IN- HOSPITAL MORBIDIT	JOURNAL OF BONE AND JOINT SURGERY - AM	11/01/2014
RELATIVE HEAD SIZE INCREASE USING AN ANATOMIC DUAL MOBILITY	JOURNAL OF ARTHROPLASTY	09/01/2014
THE JOHN INSALL AWARD MORBID OBESITY INDEPENDENTLY IMPACTS	CLINICAL ORTHOPAEDIC AND RELATED RESEARCH	05/01/2014
DEPRESSION IS ASSOCIATED WITH EARLY POSTOPERATIVE OUTCOMES F	JOURNAL OF ARTHROPLASTY	03/01/2014
AGE AS AN INDEPENDENT RISK FACTOR FOR POSTOPERATIVE MORBIDIT	JOURNAL OF ARTHROPLASTY	03/01/2014
CTPA FOLLOWING TOTAL JOINT ARTHROPLASTY OVERDIAGNOSIS AND I	CLINICAL ORTHOPAEDIC AND RELATED RESEARCH	09/01/2013
TOTAL HIP ARTHROPLASTY FOR FEMORAL NECK FRACTURE COMPARING	JOURNAL OF ARTHROPLASTY	10/01/2013
MANAGEMENT OF FAILED METAL-ON-METAL TOTAL HIP ARTHROPLASTY	WORLD JOURNAL OF ORTHOPEDICS	06/01/2012
OBSTRUCTIVE SLEEP APNEA AS A RISK FACTOR FOR POSTOPERATIVE C	JOURNAL OF ARTHROPLASTY	09/01/2012
MID TERM FOLLOW-UP OF PRIMARY TKA IN PATIENTS WITH FIBROMYAL	ORTHOPEDICS	02/01/2012
IS POST-OPERATIVE FUNCTION FOLLOWING HIP OR KNEE ARTHROPLAST	JOURNAL OF ARTHROPLASTY	10/01/2009
ACCURACY OF KNEE RANGE OF MOTION ASSESSMENT AFTER TOTAL KNEE	JOURNAL OF ARTHROPLASTY	09/01/2008
REVISION TOTAL HIP ARTHROPLASTY IN OCTOGENARIANS A CASE-CON	JOURNAL OF BONE AND JOINT SURGERY - AM	12/01/2007
PATELLAR MENISCUS IN TOTAL KNEE ARTHOPLASTY	JOURNAL OF KNEE SURGERY	04/01/2007
POST-DISCHARGE COSTS IN ARTHROPLASTY SURGERY	JOURNAL OF ARTHROPLASTY	09/01/2006
PATIENT PERCEIVED OUTCOMES IN THIGH PAIN AFTER PRIMARY ARTHR	CLINICAL ORTHOPAEDIC AND RELATED RESEARCH	12/01/2005
FIXATION WITH ANCHORS FOR POSTERIOR CRUCIATE LIGAMENT AVULSI	ARTHROSCOPY	09/01/2005
ARTHROSCOPIC SHAVER-ASSISTED TOTAL HIP ARTHROPLASTY REVISION	JOURNAL SURGICAL ORTHOPEDIC ADVANCES	09/01/2004
THIGH PAIN IN PRIMARY THA THE EFFECTS OF ELASTIC MODULI	JOURNAL OF ARTHROPLASTY	06/01/2004
ALL-CAUSE COMPARED TO COMPLICATION-SPECIFIC READMISSION FOLLOWING TOTAL KNEE ARTHROPLASTY	JOURNAL OF BONE AND JOINT SURGERY AM	07/01/2017

## **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.

SPANISH

### **Other Affiliations**

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

### Affiliation

AMERICAN ACADEMY OF ORTHOPEDIC SURGEONS

AMERICAN ASSOCIATION OF HIP AND KNEE SURGEONS

AMERICAN ORTHOPEDIC ASSOCIATION

FLORIDA ORTHOPEDIC SOCIETY

ORTHOPEDIC RESEARCH SOCIETY