



## ALEXANDER S DONATH

License Number: ME123179

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/2001
License Expiration Date	01/31/2027
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

## General Information

### Primary Practice Address

ALEXANDER S DONATH  
1575 PINE RIDGE RD. SUITE 7  
NAPLES, FL 34109

### 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
TRI-HEALTH EVENDALE HOSPITAL	CINCINNATI	OHIO

### Email Address

Please contact at: [credentialing@drdonath.com](mailto:credentialing@drdonath.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
CALIFORNIA	MEDICAL DOCTOR
OHIO	MEDICAL DOCTOR
KENTUCKY	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
OHIO UNIVERSITY	BACHELOR D	9/1/1992 - 6/1/1996	06/01/1996
UNIVERSITY OF CINCINNATI COLLEGE OF MEDICINE	MD	9/1/1996 - 6/1/2001	06/01/2001

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
ST. LOUIS UNIVERSITY SCHOOL OF MEDICINE	RESIDENCY	GS - SURGERY		ST. LOUIS	MISSOURI	09/01/2001	06/01/2002
ST. LOUIS UNIVERSTIY DEPT. OF OTOLARYNGOLOGY HEAD AND NECK S	RESIDENCY	OTO - OTOLARYNGOLOGY		ST. LOUIS	MISSOURI	09/01/2002	06/01/2006
THE GLASGOLD GROUP, AMER. ACAD. FACIAL AND PLASTIC AND RECON	FELLOWSHIP	PLASTIC SURGERY WITHIN THE HEAD AND NECK		HIGHLAND PARK	NEW JERSEY	06/01/2006	06/01/2007

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 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 FACIAL PLASTIC & RECON	PS - PLASTIC SURGERY	01/15/2010
AMERICAN BOARD OF OTOLARYNGOLOGY	OTO - OTOLARYNGOLOGY	05/14/2007

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.  
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:  
Florida Medical Association  
American Academy of Facial Plastics and Reconstructive Surge  
Emerging Trends and Technologies Committee--AAFPRS  
Electronic Media Committee--AAFPRS  
Ohio State Medical Association  
Face To Face program-to aid domestic violence victims-AAFPRS

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
TOP DOCTOR--2012-2025	CINCINNATI MAGAZINE
BEST DOCTORS IN AMERICA	CASTLE CONNOLLY
RESEARCH TRAVEL AWARD	TRIOLOGICAL SOCIETY (OTOLARYNGOLOGY HONOR SOCIETY)

Publications

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

Title	Publication	Date
FACIAL REJUVENATION: A CHRONOLOGY OF PROCEDURES	TEXTBOOK OF AGING SKIN, 2ND ED.	09/17/2016
QUANTITATIVE EVALUATION OF VOLUME AUGMENTATION IN THE TEAR TROUGH WITH A HYALURONIC ACID-BASED FILLER: A THREE DIMENSIONAL ANALYSIS	PLASTIC & RECONSTRUCTIVE SURGERY JOURNAL	11/05/2010
FACIAL REJUVENATION: A CHRONOLOGY OF PROCEDURES	TEXTBOOK OF AGING SKIN	01/01/2010
VOLUME LOSS VS. GRAVITY: NEW CONCEPTS IN FACIAL AGING	CURRENT OPINION IN OTOLARYNGOLOGY AND HEAD AND NECK SURGERY	08/01/2007
FRONTAL SINUS CRANIALIZATION USING THE PERICRANIAL FLAP: AN ADDED LAYER OF PROTECTION	LARYNGOSCOPE	09/01/2006
SERUM TRANSFERRIN RECEPTOR LEVELS IN PATIENTS UNDERGOING EVALUATION OF IRON STORES: CORRELATION WITH OTHER PARAMETERS, AND OBSERVED VERSUS PREDICTED RESULTS	CLINICAL & LABORATORY HAEMATOLOGY	06/01/1997
CORRELATION BETWEEN SERUM SOLUBLE TRANSFERRIN RECEPTOR AND SERUM FERRITIN LEVELS	BLOOD	12/31/1995
CORRELATION OF SERUM TRANSFERRIN RECEPTOR LEVELS WITH OTHER PARAMETERS IN PATIENTS UNDERGOING EVALUATION OF IRON STATUS: OBSERVED VS. PREDICTED RESULTS	BLOOD	12/31/1996
MOTOR PATTERN EXPRESSION OF A LATERAL PYLORIC CONSTRICTOR MUSCLE	SOCIETY FOR NEUROSCIENCE ABSTRACTS	12/31/1996
LIPOSUCTION AND FAT GRAFTING.	ESSENTIAL FACIAL PLASTIC AND RECONSTRUCTIVE SURGERY. © NOVA SCIENCE PUBLISHERS	06/24/2024

Professional Web Page

www.cincyfacialplastics.com

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.  
GERMAN

Other Affiliations

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