



## NAGARAJAN RAMAKRISHNAN

License Number: ME122564

Profession Medical Doctor  
License Status CLEAR/Active  
Year Began Practicing 01/01/1989  
License Expiration 01/31/2027  
Date

## General Information

### Primary Practice Address

NAGARAJAN RAMAKRISHNAN  
ONE CITYPLACE DRIVE  
STE 570  
ST. LOUIS, MO 63141

### 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
HICUITY HEALTH	SAINT LOUIS	MISSOURI
ADVENT HEALTH WINTER PARK, FL.	TAMPA	FLORIDA
ADVENTHEALTH CENTRAL TEXAS	KILLEEN	TEXAS
ADVENT HEALTH WINTER PARK, FL.	DELAND	FLORIDA
FLORIDA HOSPITAL FISH MEMORIAL	ORANGE CITY	FLORIDA
ADVENTHEALTH HENDERSONVILLE	HENDERONSVILLE	NORTH CAROLINA
ADVENTHEALTH MANCHESTER	MANCHESTER	KENTUCKY
ADVENT HEALTH WINTER PARK, FL.	NEW SMYRNA BEACH	FLORIDA
FLORIDA HOSPITAL NORTH PINELLAS	TARPON SPRINGS	FLORIDA
FLAGLER HOSPITAL	PALM COAST	FLORIDA
ADVENTHEALTH SAN MARCOS	SAN MARCOS	TEXAS
FLORIDA HOSPITAL HEARTLAND MEDICAL CENTER	SEBRING	FLORIDA
ADVENTHEALTH SHAWNEE MISSION	SHAWNEE MISSION	KANSAS
ADVENT HEALTH WINTER PARK, FL.	ZEPHYRHILLS	FLORIDA
AMITA ADVENTIST MEDICAL CENTER BOLINGBROOK	BOLINGBROOK	ILLINOIS
AMITA ADVENTIST MEDICAL CENTER GLENOAKS	GLENDAL HEIGHTS	ILLINOIS
ASCENSION ST. CLARE'S HOSPITAL	WESTON	WISCONSIN
BAPTIST HEALTH CORBIN	CORBIN	KENTUCKY
CAPE REGIONAL MEDICAL CENTER	CAPE MAY COURT HOUSE	NEW JERSEY
CAROLINA PINES REGIONAL MEDICAL CENTER	HARTSVILLE	SOUTH CAROLINA
CHILTON MEDICAL CENTER	POMPTON PLAINS	NEW JERSEY
DAVIE MEDICAL CENTER	BERMUDA RUN	NORTH CAROLINA
DIVINE SAVIOR HEALTHCARE	PORTAGE	WISCONSIN

Institution Name	City	State
EINSTEIN MEDICAL CENTER ELKINS PARK	ELKINS PARK	PENNSYLVANIA
HACKETTSTOWN MEDICAL CENTER	HACKETTSTOWN	NEW JERSEY
HAVASU REGIONAL MEDICAL CENTER	LAKE HAVASU CITY	ARIZONA
HIGH POINT REGIONAL MEDICAL CENTER	HIGH POINT	NORTH CAROLINA
KERSHAWHEALTH MEDICAL CENTER	CAMDEN	SOUTH CAROLINA
LEXINGTON MEDICAL CENTER	LEXINGTON	NORTH CAROLINA
LINCOLNHEALTH- MILES CAMPUS	DAMARISCOTTA	MAINE
MEADVILLE MEDICAL CENTER	MEADVILLE	PENNSYLVANIA
MEMORIAL HEALTHCARE	OWOSSO	MICHIGAN
MERCY MEDICAL CENTER - OSHKOSH	OSHKOSH	WISCONSIN
MERCY MEDICAL CENTER MERCED	MERCED	CALIFORNIA
NEWTON MEDICAL CENTER	NEWTON	NEW JERSEY
NORTHERN DUTCHESS HOSPITAL	RHINEBECK	NEW YORK
PEN BAY MEDICAL CENTER	ROCKPORT	MAINE
PENN HIGHLANDS HEALTHCARE - DUBOIS	DUBOIS	PENNSYLVANIA
PUTNAM HOSPITAL CENTER	CARMEL	NEW YORK
REID HOSPITAL & HEALTH CARE SERVICES	RICHMOND	INDIANA
SANFORD ABERDEEN MEDICAL CENTER	ABERDEEN	SOUTH DAKOTA
SANFORD BISMARCK MEDICAL CENTER	BISMARCK	NORTH DAKOTA
SARAH BUSH LINCOLN HEALTH CENTER	MATTOON	ILLINOIS
SELF REGIONAL MEDICAL CENTER	GREENWOOD	SOUTH CAROLINA
SOUTHERN OHIO MEDICAL CENTER	PORTSMOUTH	OHIO
ST. CLARE HOSPITAL - BARABOO	BARABOO	WISCONSIN
ST. ELIZABETH HEALTHCARE	EDGEWOOD	KENTUCKY
ST. FRANCIS HOSPITAL - MARYVILLE	MARYVILLE	MISSOURI
ST. JOHN'S HOSPITAL	SPRINGFIELD	ILLINOIS
ST. MARY¿S HOSPITAL - JEFFERSON CITY	JEFFERSON CITY	MISSOURI
ST. MARY'S HOSPITAL - CENTRALIA	CENTRALIA	ILLINOIS
ST. MARY'S HOSPITAL - JANESVILLE	JANESVILLE	WISCONSIN
ST. MARY'S REGIONAL MEDICAL CENTER	LEWISTON	MAINE
SUMMIT HEALTHCARE REGIONAL MEDICAL CENTER	SHOW LOW	ARIZONA
TAKOMA REGIONAL HOSPITAL	GREENEVILLE	TENNESSEE
UPPER VALLEY MEDICAL CENTER	TROY	OHIO
WALDO COUNTY GENERAL HOSPITAL	BELFAST	MAINE
WESTERN MARYLAND REGIONAL MEDICAL CENTER	CUMBERLAND	MARYLAND
WILKES REGIONAL MEDICAL CENTER	NORTH WILKESBORO	NORTH CAROLINA
WINCHESTER MEDICAL CENTER	WINCHESTER	VIRGINIA
LECONTE MEDICAL CENTER	SEVIERVILLE	TENNESSEE
METHODIST MEDICAL CENTER OF OAK RIDGE	OAK RIDGE	TENNESSEE
PARKWEST MEDICAL CENTER	KNOXVILLE	TENNESSEE
ROANE MEDICAL CENTER	HARRIMAN	TENNESSEE
ADVENTHEALTH SOUTH OVERLAND PARK	OVERLAND PARK	KANSAS
BAPTIST HEALTH DEACONESS MADISONVILLE	MADISONVILLE	KENTUCKY
TEXAS HEALTH HUGULEY HOSPITAL	BURLESON	TEXAS
ARH ADVANCED CARE ¿ BIG SANDY	SOUTH WILLIAMSON	KENTUCKY
ARH ADVANCED CARE ¿ KENTUCKY RIVER	HAZARD	KENTUCKY
PAINTSVILLE ARH HOSPITAL	PAINTSVILLE	KENTUCKY

Email Address

Please contact at: [Nagarajan.Ramakrishnan.HH@hicuityhealth.com](mailto:Nagarajan.Ramakrishnan.HH@hicuityhealth.com)

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
	MEDICAL DOCTOR
ARIZONA	MEDICAL DOCTOR
CALIFORNIA	MEDICAL DOCTOR
GEORGIA	MEDICAL DOCTOR
IOWA	MEDICAL DOCTOR
ILLINOIS	MEDICAL DOCTOR
INDIANA	MEDICAL DOCTOR
KANSAS	MEDICAL DOCTOR
KENTUCKY	MEDICAL DOCTOR
MARYLAND	MEDICAL DOCTOR
MAINE	MEDICAL DOCTOR
MICHIGAN	MEDICAL DOCTOR
MISSOURI	MEDICAL DOCTOR
NORTH CAROLINA	MEDICAL DOCTOR
NORTH DAKOTA	MEDICAL DOCTOR
NEW JERSEY	MEDICAL DOCTOR
NEW YORK	MEDICAL DOCTOR
OHIO	MD
PENNSYLVANIA	MEDICAL DOCTOR
SOUTH CAROLINA	MEDICAL DOCTOR
SOUTH DAKOTA	MEDICAL DOCTOR
TENNESSEE	MEDICAL DOCTOR
VIRGINIA	MEDICAL DOCTOR
WISCONSIN	MEDICAL DOCTOR
TEXAS	MEDICAL DOCTOR
WEST VIRGINIA	MEDICAL DOCTOR
IDAHO	MEDICAL DOCTOR
CONNECTICUT	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
STANLEY MEDICAL COLLEGE	MBBS	10/4/1983 - 6/15/1989	09/05/1989

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
WESTERN GENERAL HOSPITAL	RESIDENCY	IM - INTERNAL MEDICINE		EDINBURGH	UNITED KINGDOM	04/01/1991	07/31/1991
SUNDERLAND DISTRICT GENERAL HOSPITAL	RESIDENCY	IM - INTERNAL MEDICINE		SUNDERLAND	UNITED KINGDOM	08/01/1991	07/31/1992
ABERDEEN ROYAL INFIRMARY	INTERNSHIP	IM - INTERNAL MEDICINE		ABERDEENSHIRE	UNITED KINGDOM	08/01/1992	05/31/1993
UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE	RESIDENCY	IM - INTERNAL MEDICINE		FARMINGTON	CONNECTICUT	07/01/1993	06/30/1995
UNIVERSITY OF PITTSBURGH	FELLOWSHIP	IM - CRITICAL CARE MEDICINE		PITTSBURGH	PENNSYLVANIA	07/01/1996	06/30/1998

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 INTERNAL MEDICINE	IM - INTERNAL MEDICINE	08/23/1995
AMERICAN BOARD OF INTERNAL MEDICINE	IM - CRITICAL CARE MEDICINE	11/04/1998

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 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.

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