



## KEITH EDWARD BARIBAULT

License Number: ME123973

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/2004
License Expiration Date	01/31/2027

## General Information

### Primary Practice Address

KEITH EDWARD BARIBAULT  
10500 UNIVERSITY CTR. DR.  
SUITE 200  
TAMPA, FL 33612

### Medicaid

This practitioner does NOT participate in the Medicaid program.

### Staff Privileges

This practitioner has not indicated any staff privileges.

### Email Address

Please contact at: [kbaribault@gmail.com](mailto:kbaribault@gmail.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
ARKANSAS	MEDICINE
NEVADA	MEDICINE
NEW YORK	MEDICINE

### 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
ALBERT EINSTEIN COLLEGE OF MEDICINE	MD	7/1/2000 - 6/1/2004	06/02/2004

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
NEW YORK PRESBYTERIAN HOSPITAL COLUMBIA UNIVERSITY MEDICAL	RESIDENCY	PTH - PATHOLOGY- ANATOMIC AND CLINICAL		NEW YORK	NEW YORK	07/01/2004	06/30/2008
ACKERMAN ACADEMY OF DERMATOPATHOLOGY/SUNY DOWNSTATE MEDICAL	FELLOWSHIP	D - DERMATOPATHOLOGY		NEW YORK	NEW YORK	07/01/2008	06/30/2009

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 PATHOLOGY	PTH - PATHOLOGY-ANATOMIC AND CLINICAL	07/31/2008
AMERICAN BOARD OF PATHOLOGY	D - DERMATOPATHOLOGY	09/17/2009

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

Title	Publication	Date
"GIANNOTTI-CROSTI SYNDROME AFTER H1N1 INFLUENZA VACCINE"	PEDIATRIC DERMATOLOGY	10/01/2011
"A SWITCH IN NOTCH GENE EXPRESSION PARALLELS STEM CELL TO ENDOTHELIAL TRANSITION IN INFANTILE HEMANGIOMA."	ANGIOGENESIS	03/01/2010
"MEDALLION-LIKE DERMAL DENDROCYTE HAMARTOMA IN A 36-YEAR-OLD MALE."	JOURNAL OF THE AMERICAN ACADEMY OF DERMATOLOGY	07/01/2008
"BRAIN STRUCTURAL ABNORMALITIES IN PSYCHOTROPIC DRUG-NAÏVE PEDIATRIC PATIENTS WITH OBSESSIVE-COMPULSIVE DISORDER."	AMERICAN JOURNAL OF PSYCHIATRY	06/01/2004

Title	Publication	Date
CUTANEOUS GANGLIONEUROMA: A CASE REPORT AND JOURNAL OF CUTANEOUS PATHOLOGY DISCUSSION OF THE LITERATURE		04/01/2019

### Professional Web Page

www.dermpathdiagnostics.com

### 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 provided the following national, state, local, county, and professional affiliations:

Affiliation
AMERICAN MEDICAL ASSOCIATION
AMERICAN SOCIETY OF DERMATOPATHOLOGY
AOA HONOR MEDICAL SOCIETY
COLLEGE OF AMERICAN PATHOLOGISTS
INTERNATIONAL SOCIETY OF DERMATOPATHOLOGY