



SIMON SY TAN MD

License Number: ME130452

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 01/01/2002
License Expiration 01/31/2027
Date

General Information

Primary Practice Address

SIMON SY TAN MD
241 W SOUTHLAKE BLVD
STE 140
SOUTHLAKE, TX 76092

Medicaid

This practitioner DOES participate in the Medicaid program.

Staff Privileges

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

Institution Name	City	State
	AVENTURA	FLORIDA
	MELBOURNE	FLORIDA
CRESCENT MEDICAL CENTER	LANCASTER	TEXAS
BAYLOR SCOTT & WHITE ALL SAINTS FTW	FORT WORTH	TEXAS
BAYLOR SCOTT & WHITE GRAPEVINE	GRAPEVINE	TEXAS
CORYELL MEMORIAL HEALTHCARE SYSTEM	GATESVILLE	TEXAS
	MESA	ARIZONA
LEGENT HOSPITAL FOR SPECIAL SURGERY	PLANO	TEXAS
LEGENT ORTHOPEDIC + SPINE HOSPITAL	SAN ANTONIO	TEXAS
MEDICAL CITY MCKINNEY	MCKINNEY	TEXAS
TOWNSEN MEMORIAL SURGERY CENTER-MEDICAL CENTER	HOUSTON	TEXAS
	MESA	ARIZONA
	SCOTTSDALE	ARIZONA
	SALEM	OREGON
TRIDENT MEDICAL CENTER	CHARELSTON	SOUTH CAROLINA
	MESA	ARIZONA
MEDICAL CITY FTW (PLAZA MEDICAL CTR)	FORT WORTH	TEXAS
HOWARD COUNTY GENERAL	COLUMBIA	MARYLAND
PARKWAY SURGERY CENTER (SCA)	HAGERSTOWN	MARYLAND
UPPER CHESAPEAKE MEDICAL CENTER	BEL AIR	MARYLAND
MIDTOWN GENERAL	BALTIMORE	MARYLAND
ST JOSEPH'S MEDICAL CENTER	TOWSON	MARYLAND
SHADY GROVE MEDICAL CENTER	ROCKVILLE	MARYLAND

Institution Name	City	State
PENISULA REGIONAL HOSPITAL	SALISBURY	MARYLAND
MUSC HEALTH FLORENCE MEDICAL CENTER	FLORENCE	SOUTH CAROLINA
CHARLES REGIONAL MEDICAL CENTER	LA PLATA	MARYLAND
ST. AGNES HOSPITAL	BALTIMORE	MARYLAND
BALTIMORE WASHINGTON MEDICAL CENTER	GLEN BURNIE	MARYLAND
FREDERICK HEALTH	FREDERICK	MARYLAND
LYNCHBURG HOSPITAL	LYNCHBURG	VIRGINIA
MERITUS MEDICAL CENTER	HAGERSTOWN	MARYLAND
MERCY MEDICAL CENTER	BALTIMORE	MARYLAND
UNITED HOSPITAL CENTER	BRIDGEPORT	WEST VIRGINIA
DOCTORS COMMUNITY MEDICAL CENTER	LANHAM	MARYLAND
DR. ROY A. HIMELFARB SURGERY CENTER	CHAMBERSBURG	PENNSYLVANIA
MEDICAL CITY SURGERY CENTER FRISCO	FRISCO	TEXAS
	CARROLLTON	TEXAS
	HILLSBORO	OREGON
	DECATUR	TEXAS
WISE HEALTH SYSTEM - WISE PAIN MGT (MONTICELLO)	SPOKANE	WASHINGTON
	PORTLAND	OREGON
ADVENTIST HEALTH PORTLAND	CHANDLER	ARIZONA
	MARTINSBURG	WEST VIRGINIA
WVU MEDICINE BERKELEY MEDICAL CENTER	FRISCO	TEXAS
BAYLOR SCOTT & WHITE FRISCO (NTX DIV)	WILSONVILLE	OREGON
METHODIST MANSFIELD MEDICAL CENTER	MANSFIELD	TEXAS
	TAMPA	FLORIDA
	BOYNTON BEACH	FLORIDA
	TAMPA	FLORIDA
	MERRITT ISLAND	FLORIDA
	ORLANDO	FLORIDA
	RUSKIN	FLORIDA
	PINELLAS PARK	FLORIDA
	KITTANING	PENNSYLVANIA
ARMSTRONG COUNTY MEMORIAL HOSPITAL	EULESS	TEXAS
	ODESSA	TEXAS
	CEDAR HILL	TEXAS
	DALLAS	TEXAS
	WAYNESBORO	PENNSYLVANIA
WAYNESBORO HOSPITAL	CHAMBERSBURG	PENNSYLVANIA
CHAMBERSBURG HOSPITAL	CONROE	TEXAS
	MELBOURNE	FLORIDA
HCA HOUSTON HEALTHCARE NORTHWEST	HOUSTON	TEXAS
CASTLE HILL SURGERY CENTER	SAN ANTONIO	TEXAS
ST. LUKE'S SOUTH SURGERY CENTER	WICHITA	KANSAS
BUTLER MEMORIAL HOSPITAL	BUTLER	PENNSYLVANIA
MEDICAL UNIVERSITY OF SOUTH CAROLINA	CHARLESTON	SOUTH CAROLINA
VA PITTSBURGH HEALTHCARE SYSTEM	PITTSBURGH	PENNSYLVANIA
YAKIMA VALLEY MEMORIAL HOSPITAL	YAKIMA	WASHINGTON
SURGICAL NEUROMONITORING, PLLC	PITTSBURGH	PENNSYLVANIA

Institution Name	City	State
LAS PALMAS DEL SOL HEALTHCARE (EL PASO) HCA	EL PASO	TEXAS
	MURRELLS INLET	SOUTH CAROLINA
	ARLINGTON	TEXAS
MEDICAL CITY PLANO	PLANO	TEXAS
	CHANDLER	ARIZONA
	LANCASTER	TEXAS
CAPITAL REGIONAL MEDICAL CENTER	BOWIE	MARYLAND
WHITE OAK MEDICAL CENTER	SILVER SPRING	MARYLAND
MEDICAL CITY FORT WORTH	FORT WORTH	TEXAS
BAYLOR SCOTT & WHITE MEDICAL CENTER - TROPHY CLUB	TROPHY CLUB	TEXAS
BAYLOR SCOTT & WHITE SURGICARE PLANO ALLIANCE	PLANO	TEXAS
BAYLOR SCOTT & WHITE SURGICAL HOSPITAL AT SHERMAN	SHERMAN	TEXAS
METHODIST MCKINNEY HOSPITAL	MCKINNEY	TEXAS
ANNE ARUNDEL MEDICAL CENTER	ANNAPOLIS	MARYLAND
WINCHESTER MEDICAL CENTER	WINCHESTER	VIRGINIA
UM SHORE REGIONAL HEALTH	EASTON	MARYLAND
WALTER REED NATIONAL MILITARY MEDICAL CENTER	BETHESDA	MARYLAND

Email Address

Please contact at: neurology00@yahoo.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
ARIZONA	MEDICAL
CALIFORNIA	PHYSICIAN AND SURGEON
COLORADO	PHYSICIAN
FLORIDA	MEDICAL DOCTOR
DISTRICT OF COLUMBIA	MEDICINE AND SURGERY
GEORGIA	PHYSICIAN
ILLINOIS	PHYSICIAN AND SURGEON
INDIANA	MEDICAL
KANSAS	MEDICAL DOCTOR
LOUISIANA	PHYSICIAN & SURGEON
MICHIGAN	MEDICAL DOCTOR
MISSOURI	MEDICAL PHYSICIAN & SURGEON
NEW JERSEY	MEDICAL EXAMINERS, MEDICAL DOCTOR
NEW YORK	PHYSICIAN
OHIO	DOCTOR OF MEDICINE
OKLAHOMA	MEDICAL DOCTOR
OREGON	MEDICAL DOCTOR
PENNSYLVANIA	MEDICAL PHYSICIAN AND SURGEON
SOUTH CAROLINA	MEDICAL DOCTOR
TEXAS	PHYSICIAN
WASHINGTON	PHYSICIAN AND SURGEON LICENSE
WEST VIRGINIA	MEDICAL DOCTOR
KENTUCKY	PHYSICIAN
MARYLAND	PHYSICIAN-MEDICAL DOCTOR

State	Profession
NORTH CAROLINA	PHYSICIAN
TENNESSEE	MEDICAL DOCTOR
VIRGINIA	MEDICINE
UTAH	PHYSICIAN & SURGEON
NEW MEXICO	PHYSICIAN

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
UNIVERSITY OF SANTO TOMAS	MD	4/1/1982 - 4/30/1987	04/30/1987

Other Health Related Degrees

This practitioner does not hold any additional health related degrees.

School/University	City	State/Country	Dates Attended From	Dates Attended To	Degree Title
UNIVERSITY OF SANTO TOMAS	ESPAÑA, MANILA	PHILIPPINES	06/01/1978	03/31/1982	BS - BACHELOR OF SCIENCE
UNIVERSITY OF STO. TOMAS	ESPAÑA, MANILA	PHILIPPINES	06/01/1982	04/15/1987	M.D. MEDICAL DOCTOR

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
BROOKLYN HOSPITAL CENTER	INTERNSHIP	IM - INTERNAL MEDICINE		BROOKLYN	NEW YORK	07/01/1997	06/30/1998
UNIVERSITY OF TEXAS SOUTHWESTERN MEDICAL CENTER	RESIDENCY	N - NEUROLOGY		DALLAS	TEXAS	07/01/1998	06/30/2001
UNIVERSITY OF TEXAS SOUTHWESTERN MEDICAL CENTER	FELLOWSHIP	OTHER	NEUROMUSCULAR DISORDER	DALLAS	TEXAS	07/01/2001	06/30/2002

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 PSYCHIATRY AND NEUROLO	N - NEUROLOGY	09/01/2015

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 an affiliation with the following committees:

Texas Neurology Association

Life Member, UST Medical Alumni Association

American Medical Association

American Academy of Neurology

Fellow, American Board of Disability Analysts

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 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.

CHINESE

Other Affiliations

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