



DOUGLAS L STRINGER

License Number: ME18562

Profession	Medical Doctor
License Status	Deceased/
Year Began Practicing	07/01/1967
License Expiration Date	01/31/2022
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

General Information

Primary Practice Address

DOUGLAS L STRINGER
2011 HARRISON AVE
PANAMA CITY, FL 32405-4545

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
BAY MEDICAL CENTER	PANAMA CITY	FLORIDA
GULF COAST HOSPITAL	PANAMA CITY	FLORIDA
HEALTHSOUTH REHABILITATION HOSPITAL	PANAMA CITY	FLORIDA

Email Address

Not Provided

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 not indicated whether he/she has submitted payment of the assessment.

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
MEDICAL COLLEGE OF GEORGIA	MD	9/1/1963 - 5/23/1967	05/23/1967

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
U.S. NAVAL HOSPITAL	INTERNSHIP	TY - TRANSITIONAL YEAR		JACKSONVILLE	FLORIDA	07/01/1967	06/30/1968
MEDICAL COLLEGE OF GEORGIA	RESIDENCY	GS - SURGERY		AUGUSTA	GEORGIA	07/01/1971	06/30/1972
MEDICAL COLLEGE OF GEORGIA	RESIDENCY	NS - NEUROLOGICAL SURGERY		AUGUSTA	GEORGIA	07/01/1972	06/30/1973
NORTH CAROLINA BAPTIST HOSPITAL	RESIDENCY	NS - NEUROLOGICAL SURGERY		WINSTON-SALEM	NORTH CAROLINA	07/01/1973	06/30/1975
UNIVERSITY OF WESTERN ONTARIO	FELLOWSHIP	NS - NEUROLOGICAL SURGERY		LONDON, ONTARIO	CALIFORNIA	07/01/1975	06/30/1976

Academic Appointments

Graduate Medical Education

The practitioner did not provide this mandatory information.

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 NEUROLOGICAL SURGERY	NS - NEUROLOGICAL 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

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](#).

The following liability actions have been reported as required under section 456.049, F. S., within the previous 10 years:

Incident Date	County	Judicial Case	Settlement Date	Amount	Policy Amount
12/22/2015			11/21/2018	\$125,000.00	\$0.00
12/22/2015	BAY	17001175CA	11/26/2018	\$125,000.00	\$250,000.00

Optional Information

Committees/Memberships

This practitioner has an affiliation with the following committees:
CPT ADVISORY COMMITTEE, AMERICAN MEDICAL ASSOCIATION
BOARD OF TRUSTEES, BAY MEDICAL CENTER
BOARD OF DIRECTORS, FLORIDA MEDICAL QUALITY ASSURANCE, INC
DELEGATE TO JCSNS, FLORIDA NEUROSURGICAL SOCIETY
BOARD OF DIRECTORS, FLORIDA NEUROSURGICAL SOCIETY
PAST-PRESIDENT, FLORIDA NEUROSURGICAL SOCIETY
PAST PRESIDENT, EXECUTIVE COMMITTEE, BAY MEDICAL CENTER

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
ADVANCES IN SPINE SURGERY	BAY MEDICAL CENTER	04/02/1992
ADVANCES IN THE TREATMENT OF CERVICAL/LUMBAR DISC DISEASE	BAY MEDICAL CENTER	04/06/1993
SPINAL CORD INJURIES	BAY MEDICAL CENTER	08/03/1993
SPINAL INSTRUMENTATION IN PRIVATE PRACTICE	BOWMAN GRAY SCHOOL OF MEDICINE	09/10/1993
THE SPINE	BAY MEDICAL CENTER	08/06/1994
EVALUATION & MANAGEMENT OF DISORDERS OF THE SPINE WITH	BAY MEDICAL CENTER	04/17/1995

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

Affiliation
AEROSPACE MEDICAL ASSOCIATION
AMERICAN COLLEGE OF PHYSICIANS
AMERICAN COLLEGE OF SURGEONS
AMERICAN HEART ASSOCIATION
AMERICAN MEDICAL ASSOCIATION
BAYS MEDICAL SOCIETY
CANADIAN CONGRESS OF NEUROLOGICAL SCIENCES
CANADIAN NEUROSURGICAL SOCIETY
FLORIDA MEDICAL ASSOCIATION
SOUTHERN NEUROSURGICAL SOCIETY
UNDERSEA & HYPERBARIC MEDICAL SOCIETY