Department of Health

RICHARD F LOCKEY

License Number: ME19662

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/1973
License Expiration Date	01/31/2027
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes

General Information

Primary Practice Address

RICHARD F LOCKEY
13801 BRUCE B DOWNS BLVD
SUITE 502
TAMPA, FL 33613

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
UNIVERSITY COMMUNITY HOSPITAL	TAMPA	FLORIDA
THE TAMPA GENERAL HOSPITAL	TAMPA	FLORIDA
H. LEE MOFFITT CANCER CTR & RESEARCH INST	TAMPA	FLORIDA
ALL CHILDREN'S HOSPITAL	SAINT PETERSBURG	FLORIDA
TAMPA (JAMES A. HALEY VA MEDICAL CENTER)	TAMPA	FLORIDA

Email Address

Please contact at: **dlshearer1@aol.com**

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
	MEDICAL

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
TEMPLE UNIVERSITY	MD		01/01/1965

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
TEMPLE UNIVERSITY HOSPITAL	INTERNSHIP	IM - INTERNAL MEDICINE		***	PENNSYLVANIA	07/01/1965	06/30/1966
UNIVERSITY OF MICHIGAN HOSPITAL	RESIDENCY	IM - INTERNAL MEDICINE		***	MICHIGAN	07/01/1966	12/31/1968
UNIVERSITY OF MICHIGAN HOSPITAL	RESIDENCY	AI - ALLERGY AND IMMUNOLOGY		***	MICHIGAN	01/01/1969	12/31/1970

Academic Appointments

Graduate Medical Education

This practitioner has had the responsibility for graduate medical education within the last 10 years.

Academic Appointments

This practitioner currently holds faculty appointments at the following medical/health related institutions of higher learning:

Title	Institution	City	State
DIRECTOR, DIVISION OF ALLERGY AND IMMUNOLOGY	UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M	TAMPA	FLORIDA
PROFESSOR OF MEDICINE	UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M	TAMPA	FLORIDA
PROFESSOR OF PEDIATRICS	UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M	TAMPA	FLORIDA
PROFESSOR OF PUBLIC HEALTH	UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M	TAMPA	FLORIDA
JOY MCCANN CULVERHOUSE-PROFESSOR OF ALLERGY IMMUNOLOGY	UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M	TAMPA	FLORIDA

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 ALLERGY AND IMMUNOLOGY	AI - ALLERGY AND IMMUNOLOGY	01/01/1972
AMERICAN BOARD OF INTERNAL MEDICINE	IM - INTERNAL MEDICINE	01/01/1970

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:
PAST DIRECTOR, AMERICAN BOARD OF ALLERGY & IMMUNOLOGY
PAST PRESIDENT, AMERICAN ACADEMY OF ASTHMA & IMMUNOLOGY
PAST PRESIDENT/FL ASTHMA, ALLERGY & IMMUNOLOGY SOCIETY

PAST PRESIDENT WORLD ALLERGY ORGANIZATION

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
WHO'S WHO IN AMERICA	INTERNATIONAL WHO IS WHO 1996
ALUMNI ACHEIVEMENT AWARD	TEMPLE UNIVERSITY SCHOOL OF MEDICINE

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

Affiliation
ALPHA OMEGA ALPHA
AMERICAN ACADEMY OF ALLERGY AND IMMUNOLOGY-FELLOW
AMERICAN ASSOCIATION OF ENVIRONMENTAL AND OCCUPATIONAL MED
AMERICAN COLLEGE OF CHEST PHYSICIANS-FELLOW
AMERICAN COLLEGE OF PHYSICIANS (FELLOW)
AMERICAN MEDICAL ASSOCIATION
AMERICAN THORACIC SOCIETY
FAC APPT/DIRECTOR, DIV OF AI, J HALEY VA HOSP, TAMPA, FL
FLORIDA ALLERGY & IMMUNOLOGY SOCIETY