# DEE WALKER FORD

# License Number: ME138996

ProfessionMedical DoctorLicense StatusVol Relinquish/Year Began PracticingNot ProvidedLicense Expiration01/31/2023DateVol Relinquish/

# **General Information**

# **Primary Practice Address**

DEE WALKER FORD 500 HUGER STREET CHARLESTON, SC 29403

# 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
MEDICAL UNIVERSITY OF SOUTH CAROLINA	CHARLESTON	SOUTH CAROLINA
RALPH H. JOHNSON VA MEDICAL CENTER	CHARLESTON	SOUTH CAROLINA
PRISMA HEALTH TUOMEY	SUMTER	SOUTH CAROLINA
ANMED HEALTH	ANDERSON	SOUTH CAROLINA
KERSHAWHEALTH MEDICAL CENTER	CAMDEN	SOUTH CAROLINA
CAROLINA PINES REGIONAL MEDICAL CENTER	HARTSVILLE	SOUTH CAROLINA
SELF REGIONAL MEDICAL CENTER	GREENWOOD	SOUTH CAROLINA
ADVANCED ICU CARE	SAINT LOUIS	MISSOURI
LINCOLNHEALTH	DAMARISCOTTA	MAINE
SUMMIT HEALTHCARE REGIONAL MEDICAL CENTER	SHOW LOW	ARIZONA
HAVASU REGIONAL MEDICAL CENTER	LAKE HAVASU CITY	ARIZONA
MERCY MEDICAL CENTER MERCED	MERCED	CALIFORNIA
SHARON HOSPITAL	SHARON	CONNECTICUT
LAKE WALES MEDICAL CENTER	LAKE WALES	FLORIDA
BAPTIST MEDICAL CENTER - NASSAU	FERNANDINA BEACH	FLORIDA
CLEVELAND CLINIC HOSPITAL	PORT ST. LUCIE	FLORIDA
PERRY HOSPITAL	PERRY	GEORGIA
HOUSTON MEDICAL CENTER	WARNER ROBINS	GEORGIA
MEMORIAL SATILLA HEALTH	WAYCROSS	GEORGIA
ADVENTHEALTH GORDON	CALHOUN	
ST. MARY'S HOSPITAL - DECATUR	DECATUR	ILLINOIS
ST. MARY'S HOSPITAL - CENTRALIA	CENTRALIA	
SARAH BUSH LINCOLN HEALTH CENTER	MATTOON	ILLINOIS
REID HOSPITAL & HEALTH CARE SERVICES	RICHMOND	INDIANA

Institution Name	City	State
ADVENTHEALTH OTTAWA	OTTAWA	51010
BARBOURVILLE ARH HOSPITAL	BARBOURVILLE	KENTUCKY
	SOUTH WILLIAMSON	KENTUCKY
MIDDLESBORO ARH HOSPITAL	MIDDLESBORO	KENTUCKY
ARH OUR LADY OF THE WAY	MARTIN	KENTUCKY
HARLAN ARH HOSPITAL	HARLAN	KENTUCKY
MARY BRECKINRIDGE ARH HOSPITAL	HYDEN	KENTUCKY
MORGAN COUNTY ARH HOSPITAL	WEST LIBERTY	KENTUCKY
HAZARD ARH REGIONAL MEDICAL CENTER	HAZARD	KENTUCKY
WHITESBURG ARH HOSPITAL	WHITESBURG	KENTUCKY
MCDOWELL ARH HOSPITAL	MCDOWELL	KENTUCKY
BAPTIST HEALTH CORBIN	CORBIN	KENTUCKY
ST. ELIZABETH HEALTHCARE	EDGEWOOD	KENTUCKY
ADVENTHEALTH MANCHESTER	MANCHESTER	KENTUCKY
UPMC WESTERN MARYLAND	CUMBERLAND	MARYLAND
WALDO COUNTY GENERAL HOSPITAL	BELFAST	MARTLAND
PEN BAY MEDICAL CENTER	ROCKPORT	MAINE
ST. MARY'S REGIONAL MEDICAL CENTER	LEWISTON	MAINE
MEMORIAL HEALTHCARE	OWOSSO	MICHIGAN
COX MEDICAL CENTER BRANSON	BRANSON	MISSOURI
ST. MARY'S HOSPITAL - JEFFERSON CITY	JEFFERSON CITY	MISSOURI
MOSAIC MEDICAL CENTER MARYVILLE	MARYVILLE	MISSOURI
	LEXINGTON	NORTH CAROLINA
DAVIE MEDICAL CENTER	BERMUDA RUN	NORTH CAROLINA
HIGH POINT REGIONAL MEDICAL CENTER	HIGH POINT	NORTH CAROLINA
WILKES REGIONAL MEDICAL CENTER	NORTH WILKESBORO	NORTH CAROLINA
ADVENTHEALTH HENDERSONVILLE	HENDERSONVILLE	NORTH CAROLINA
HACKETTSTOWN MEDICAL CENTER	HACKETTSTOWN	NEW JERSEY
NEWTON MEDICAL CENTER	NEWTON	NEW JERSEY
CHILTON MEDICAL CENTER	POMPTON PLAINS	NEW JERSEY
CAPE REGIONAL MEDICAL CENTER	CAPE MAY COURT HOUSE	NEW JERSEY
CENTRASTATE MEDICAL CENTER	FREEHOLD	NEW JERSEY
PUTNAM HOSPITAL CENTER	CARMEL	NEW YORK
NORTHERN DUTCHESS HOSPITAL	RHINEBECK	NEW YORK
SOUTHERN OHIO MEDICAL CENTER	PORTSMOUTH	OHIO
UPPER VALLEY MEDICAL CENTER	TROY	ОНЮ
SALEM REGIONAL MEDICAL CENTER	SALEM	OHIO
CHICKASAW NATION MEDICAL CENTER	ADA	OKLAHOMA
MEADVILLE MEDICAL CENTER	MEADVILLE	PENNSYLVANIA
EINSTEIN MEDICAL CENTER ELKINS PARK	ELKINS PARK	PENNSYLVANIA
PENN HIGHLANDS HEALTHCARE - DUBOIS	DUBOIS	PENNSYLVANIA
BON SECOURS ST. FRANCIS HOSPITAL	CHARLESTON	SOUTH CAROLINA
ROPER ST. FRANCIS MOUNT PLEASANT HOSPITAL	MOUNT PLEASANT	SOUTH CAROLINA
ROPER ST. FRANCIS BERKELEY HOSPITAL	MONCKS CORNER	SOUTH CAROLINA
LANCASTER MEDICAL CENTER - PREVIOUSLY SPRINGS MEMORIAL HOSPI	LANCASTER	SOUTH CAROLINA
THE REGIONAL MEDICAL CENTER	ORANGEBURG	SOUTH CAROLINA
SANFORD ABERDEEN MEDICAL CENTER	ABERDEEN	SOUTH DAKOTA

Institution Name	City	State
GREENEVILLE COMMUNITY HOSPITAL EAST	GREENEVILLE	TENNESSEE
ADVENTHEALTH CENTRAL TEXAS	KILLEEN	TEXAS
CHRISTUS SANTA ROSA HOSPITAL – SAN MARCOS	SAN MARCOS	TEXAS
WINCHESTER MEDICAL CENTER	WINCHESTER	VIRGINIA
MERCY MEDICAL CENTER - OSHKOSH	OSHKOSH	WISCONSIN
MARSHFIELD MEDICAL CENTER-WESTON	MARSHFIELD	WISCONSIN
ST. CLARE HOSPITAL - BARABOO	BARABOO	WISCONSIN
ST. MARY'S HOSPITAL - JANESVILLE	JANESVILLE	WISCONSIN
ASPIRUS DIVINE SAVIOR HOSPITAL	PORTAGE	WISCONSIN
SUMMERS COUNTY ARH HOSPITAL	HINTON	WEST VIRGINIA
BECKLEY ARH HOSPITAL	BECKLEY	WEST VIRGINIA
BECKLEY ARH HOSPITAL	BECKLEY	WEST VIRGINIA

# **Email Address**

Please contact at: fordd@musc.edu

## **Other State Licenses**

This practitioner has indicated the following additional state licensure:

State	Profession
ARIZONA	MD
CALIFORNIA	MD
GEORGIA	MD
INDIANA	MD
KANSAS	MD
KENTUCKY	MD
MARYLAND	MD
MAINE	MD
MICHIGAN	MD
NORTH CAROLINA	MD
NEW JERSEY	MD
NEW YORK	MD
MISSOURI	MD
PENNSYLVANIA	MD
SOUTH CAROLINA	MD
SOUTH DAKOTA	MD
WEST VIRGINIA	MD
CONNECTICUT	MD
IDAHO	MD
ILLINOIS	MD
NORTH DAKOTA	MD
OHIO	MD
TENNESSEE	MD
TEXAS	MD
VIRGINIA	MD
WISCONSIN	MD

# 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
JOHNS HOPKINS UNIVERSITY SCHOOL OF MEDICINE		9/5/1995 - 5/26/1999	05/26/1999

## **Other Health Related Degrees**

This practitioner does not hold any additional health related degrees.

			Dates Attended	Dates	
School/University	City	State/Country	From	Attended To	Degree Title
MEDICAL UNIVERSITY OF SOUTH CAROLINA	CHARLESTON	SOUTH CAROLINA	08/01/2003	08/19/2006	MS-HEALTH SCIENCES IN CLINICAL RESEARCH

## **Professional and Postgraduate Training**

This practitioner has not completed any graduate medical education.

# 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
ASSOCIATE PROFESSOR	MEDICAL UNIVERSITY OF SOUTH CAROLINA COL	CHARLESTON	SOUTH CAROLINA

# **Specialty Certification**

# **Specialty Certification**

This practitioner does not hold any certifications from specialty boards recognized by the Florida board which regulates the profession for which he/she is licensed.

# **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.