



STANLEY RHETT SMITH

License Number: ME141646

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	07/01/2005
License Expiration	01/31/2027
Date	

General Information

Primary Practice Address

STANLEY RHETT SMITH
325 WEST LOAFER DR
WOODLAND HILLS, UT 84653

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
HILLCREST HOSPITAL PRYOR		
HELEN KELLER HOSPITAL		
CHI CREIGHTON BERGAN MERCY		
CHI LAKESIDE		
CHI MERCY COUNCIL BLUFFS		
CHI MISSOURI VALLEY		
CHI SCHUYLER		
BANNER COMMUNITY HOSPITAL - TORRINGTON		
CHI IMMANUEL		
MELISSA MEMORIAL HOSPITAL		
WRAY HOSPITAL & CLINIC		
HILLCREST HOSPITAL - CUSHING		
OGALLALA COMMUNITY HOSPITAL		
HILLCREST MEDICAL CENTER		
HILLCREST CLAREMORE		
CCH SAUK CENTRE		
BRYAN MEMORIAL-BRYANLGH-EAST		
FULTON MEDICAL CENTER		
FORT MADISON COMM HOSPITAL		
FREMONT AREA MEDICAL CENTER		
PLATTE COUNTY MEMORIAL HOSPITAL		
CRETE AREA MEDICAL CENTER		
KIOWA DISTRICT HOSPITAL		
COX BARTON COUNTY MEMORIAL HOSPITAL		

Institution Name	City	State
RED BAY HOSPITAL		
"WINN ARMY COMMUNITY HOSPITAL "		
BAPTIST BEAUMONT HOSPITAL		
BAY AREA MEDICAL CENTER		
PROVIDENCE HOSPITAL NORTH EAST (PKA ICON)		
HSHS ST. VINCENT HOSPITAL		
HSHS ST. NICHOLAS HOSPITAL		
HSHS ST. MARY'S HOSPITAL MEDICAL CENTER		
HSHS ST. CLARE MEMORIAL HOSPITAL		
HENRY COUNTY HEALTH CENTER		
GREAT RIVER MEDICAL CENTER		
WASHINGTON COUNTY MEM HOSPITAL		
UNIVERSITY MEDICAL CENTER		
SUMNER REGIONAL MEDICAL CENTER		
SSM HEALTH ST. MARY'S HOSPITAL-AUDRAIN		
SAMARITAN MEMORIAL HOSPITAL		
PROVIDENCE HOSPITAL OF NORTH HOUSTON		
PARKLAND HEALTH CENTER		
NORTHEAST REGIONAL MEDICAL CTR		
MOBERLY REGIONAL MEDICAL CTR		
MENA MEDICAL CENTER		
GIBSON AREA HOSP & HLTH SVCS		
FROEDTERT SOUTH ST. CATHERINE'S		
FROEDTERT SOUTH KENOSHA		
ENNIS REGIONAL MEDICAL CENTER		
COMANCHE COMMUNITY HOSPITAL		
COLUMBUS COMMUNITY HOSPITAL		

Email Address

Please contact at: rsmithmd@realrads.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
ALABAMA	MD
ALASKA	MD
ARIZONA	MD
ARKANSAS	MD
CALIFORNIA	MD
COLORADO	MD
DELAWARE	MD
GEORGIA	MD
IDAHO	MD
ILLINOIS	MD
IOWA	MD
KANSAS	MD
MICHIGAN	MD
MINNESOTA	MD

State	Profession
MISSOURI	MD
NEBRASKA	MD
NEVADA	MD
NEW MEXICO	MD
NEW MEXICO	MD
OKLAHOMA	MD
PENNSYLVANIA	MD
SOUTH CAROLINA	MD
SOUTH DAKOTA	MD
TENNESSEE	MD
TEXAS	MD
TEXAS	MD
UTAH	MD
WASHINGTON	MD
WISCONSIN	MD
WYOMING	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 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
MEDICAL COLLEGE OF GEORGIA		8/1/1996 - 5/3/2000	05/03/2000

Other Health Related Degrees

This practitioner does not hold any additional health related degrees.

Professional and Postgraduate Training

This practitioner has not completed any graduate medical education.

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 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 the following criminal offenses:

Description of Offense	Date	State or Jurisdiction	Under Appeal	Status	Date Of Corroboration
MISDEMEANOR BOATING TICKET	08/30/2014	ARIZONA	NO	NOT CORROBORATED	
CRIMINAL TRESPASS 3RD DEGREE	06/27/2021	ARIZONA	NO	NOT CORROBORATED	
IMPAIRED DRIVING	11/19/2021	UTAH	NO	NOT CORROBORATED	

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.
