Florida HEALTH Department of Health

ADAM RICHARD SASSO

License Number: ME141543

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/2009
License Expiration Date	01/31/2029
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Authorized to Order (Medical and Low-THC Cannabis)	Yes

General Information

Primary Practice Address

ADAM RICHARD SASSO
2681 NE 8TH AVE
WILTON MANORS, FL 33334

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

Email Address

Please contact at: **adam.sasso@gmail.com**

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
ALABAMA	MEDICAL LICENSE
ALASKA	MEDICAL LICENSE
ARIZONA	MEDICAL LICENSE
ARKANSAS	MEDICAL LICENSE
CALIFORNIA	MEDICAL LICENSE
COLORADO	MEDICAL LICENSE
CONNECTICUT	MEDICAL LICENSE
DELAWARE	MEDICAL LICENSE
DISTRICT OF COLUMBIA	MEDICAL LICENSE
GEORGIA	MEDICAL LICENSE
GUAM	MEDICAL LICENSE
HAWAII	MEDICAL LICENSE
IDAHO	MEDICAL LICENSE
ILLINOIS	MEDICAL LICENSE
INDIANA	MEDICAL LICENSE
IOWA	MEDICAL LICENSE

State	Profession
KANSAS	MEDICAL LICENSE
KENTUCKY	MEDICAL LICENSE
LOUISIANA	MEDICAL LICENSE
MAINE	MEDICAL LICENSE
MARYLAND	MEDICAL LICENSE
MASSACHUSETTS	MEDICAL LICENSE
MICHIGAN	MEDICAL LICENSE
MINNESOTA	MEDICAL LICENSE
MISSISSIPPI	MEDICAL LICENSE
MISSOURI	MEDICAL LICENSE
MONTANA	MEDICAL LICENSE
NEBRASKA	MEDICAL LICENSE
NEVADA	MEDICAL LICENSE
NEW HAMPSHIRE	MEDICAL LICENSE
NEW JERSEY	MEDICAL LICENSE
NEW MEXICO	MEDICAL LICENSE
NEW YORK	MEDICAL LICENSE
NORTH CAROLINA	MEDICAL LICENSE
NORTH DAKOTA	MEDICAL LICENSE
N.MARIANAS	MEDICAL LICENSE
OHIO	MEDICAL LICENSE
OKLAHOMA	MEDICAL LICENSE
OREGON	MEDICAL LICENSE
PENNSYLVANIA	MEDICAL LICENSE
PUERTO RICO	MEDICAL LICENSE
RHODE ISLAND	MEDICAL LICENSE
SOUTH CAROLINA	MEDICAL LICENSE
SOUTH DAKOTA	MEDICAL LICENSE
TENNESSEE	MEDICAL LICENSE
TEXAS	MEDICAL LICENSE
UTAH	MEDICAL LICENSE
VERMONT	MEDICAL LICENSE
VIRGIN ISL	MEDICAL LICENSE
VIRGINIA	MEDICAL LICENSE
WASHINGTON	MEDICAL LICENSE
WEST VIRGINIA	MEDICAL LICENSE
WISCONSIN	MEDICAL LICENSE
WYOMING	MEDICAL LICENSE

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

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
NATIONAL CAPITOL CONSORTIUM FAMILY MEDICINE RESIDENCY	RESIDENCY	FP - FAMILY MEDICINE		FORT BELVOIR	VIRGINIA	07/01/2009	06/30/2012

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 do not have hospital staff privileges and I have obtained and maintain professional liability coverage in an amount not less than $100,000 per claim, with a minimum annual aggregate of not less than $300,000 from an authorized insurer as defined under s. 624.09, F. S., from a surplus lines insurer as defined under s. 626.914(2).

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.

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.