



ROBERT S ENNIS

License Number: ME20284

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	07/01/1967
License Expiration	01/31/2026
Date	

## General Information

### Primary Practice Address

ROBERT S ENNIS  
3455 STALLION LANE  
WESTON, FL 33331

### Medicaid

This practitioner DOES participate in the Medicaid program.

### Staff Privileges

This practitioner has not indicated any staff privileges.

### Email Address

Please contact at: [rennismd@gmail.com](mailto:rennismd@gmail.com)

### 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 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
CORNELL UNIVERSITY MEDICAL COL	MD		06/30/1967

Other Health Related Degrees

This practitioner has completed the following other health related degrees:

School/University	City	State/Country	Dates Attended From	Dates Attended To	Degree Title
NATIONAL INSTITUTES OF HEALTH	WASHINGTON	DISTRICT OF COLUMBIA	06/30/1969	07/01/1971	M.D. MEDICAL DOCTOR

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
NEW YORK PRESBYTERIAN HOSPITAL-CORNELL UNIVERSITY	INTERNSHIP	GS - SURGERY		***	NEW YORK	07/01/1967	06/30/1968
BRIGHAM AND WOMENS HOSPITAL	RESIDENCY	ORS - ORTHOPAEDIC SURGERY		***	MASSACHUSETTS	07/01/1972	06/30/1974
BROCKTON	RESIDENCY	ORS - ORTHOPAEDIC SURGERY		***	MASSACHUSETTS	07/01/1974	12/31/1974
CHILDRENS HOSPITAL	RESIDENCY	ORS - ORTHOPAEDIC SURGERY		***	MASSACHUSETTS	10/01/1971	06/30/1972

Academic Appointments

Graduate Medical Education

The practitioner did not provide this mandatory information.

Academic Appointments

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

Title	Institution	City	State
ASSOCIATE CLINICAL PROFESSOR OF ORTHOPAEDICS	UNIVERSITY OF MIAMI SCHOOL OF MEDICINE	MIAMI	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 ORTHOPAEDIC SURGERY	ORS - ORTHOPAEDIC SURGERY	

Financial Responsibility

## Financial Responsibility

Financial Exemption

## 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:

FORMER CHAIRMAN OF ORTHOPAEDIC SURGERY, NORTH MIAMI GEN  
EXPERT ADVISOR PANEL-STATE OF FLORIDA WORKERS COMPENSATION

#### 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
DEEP VENOUS THROMBOSIS PROPHYLAXIS IN ORTHOPAEDIC SURGERY	EMEDICINE	06/12/2009
POST OPERATIVE DVT PROPHYLAXIS A RETROSPECTIVE ANALYSIS IN	J SOUTHERN ORTHOPAEDIC ASSN V 12 NO 1 10-17	03/01/2003

### 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
AMERICAN ACADEMY OF ORTHOPAEDIC SURGEONS
AMERICAN ACADEMY OF SPORTS MEDICINE
AMERICAN COLLEGE OF LEGAL MEDICINE
AMERICAN COLLEGE OF SURGEONS
AMERICAN MEDICAL ASSOCIATION
DADE COUNTY MEDICAL ASSOCIATION
FLORIDA MEDICAL ASSOCIATION
FLORIDA ORTHOPAEDIC SOCIETY
MIAMI ORTHOPAEDIC SOCIETY
SOUTHEASTERN MEDICAL ASSOCIATION
SOUTHEASTERN ORTHOPAEDIC SOCIETY