#### **ALAN B MILLER**

#### License Number: ME20368

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 07/01/1973
License Expiration 01/31/2027

Date

## General Information

## **Primary Practice Address**

ALAN B MILLER
NOT PRACTICING

This practitioner does not have an address of record on file with the department. If you have any questions, please contact the department at (850) 488-0595.

#### **Medicaid**

This practitioner DOES 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 MEDICAL CENTER	JACKSONVILLE	FLORIDA

#### **Email Address**

Please contact at: rolloutab@gmail.com

#### **Other State Licenses**

This practitioner has indicated the following additional state licensure:

State	Profession
	MEDICAL DOCTOR

## 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 is exempt from paying assessment.

## **Education and Training**

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Institution Name	Degree Title	Dates of Attendance	Graduation Date
UNIVERSITY OF PITTSBURGH MAIN	MD	9/1/1962 - 6/6/1966	06/06/1966

## **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
MT SINAI MEDICAL CENTER	INTERNSHIP	IM - INTERNAL MEDICINE			OHIO	07/01/1966	06/30/1967
MT SINAI MEDICAL CENTER	RESIDENCY	IM - INTERNAL MEDICINE			OHIO	07/01/1967	06/30/1968
GEORGE WASHINGTON UNIVERSITY	RESIDENCY	IM - INTERNAL MEDICINE			DISTRICT OF COLUMBIA	10/01/1970	06/30/1971
HURON ROAD HOSPITAL	FELLOWSHIP	OTHER	CARDIOLOGY	CLEVELAND	OHIO	07/01/1971	09/30/1972
CLEVELAND METROPOLITAN GENERAL HOSPITAL	FELLOWSHIP	IM - CARDIOVASCULAR DISEASE		CLEVELAND	OHIO	10/01/1972	06/30/1973

# **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
PROFESSOR	UNIVERSITY OF FLORIDA COLLEGE OF MEDICIN	JACKSONVILLE	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 INTERNAL MEDICINE	IM - INTERNAL MEDICINE	
AMERICAN BOARD OF INTERNAL MEDICINE	IM - CARDIOVASCULAR DISEASE	

# Financial Responsibility

## **Financial Responsibility**

I have elected not to carry medical malpractice insurance however, I agree to satisfy any adverse judgments up to the minimum amounts pursuant to s. 458.320(5) (g)1, F. S. I understand that I must either post notice in a sign prominently displayed in my reception area or provide a written statement to any person to whom medical services are being provided that I have decided not to carry medical malpractice insurance. I understand that such a sign or notice must contain the wording specified in s. 458.320(5) (g), 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: CONTINUING MEDICAL EDUCATION COMMITTEE

## **Professional or Community Service Awards**

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

Community Service/Award/Honor	Organization
DISTINGUISHED SERVICE AWARD	FLORIDA CHAPTER OF AMERICAN COLLEGE OF CARDIOLOGY
10 YEAR SERVICE AWARD	AMERICAN HEART ASSOCIATION

#### **Publications**

This practitioner has authored the following publications in peer-reviewed medical literature within the previous ten years:

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Title	Publication	Date
EFFECT OF AMLODIPINE ON MORTALITY AND MORBIDITY IN SEVERE	NEW ENGLAND JOURNAL OF MEDICINE	10/01/1996
EFFECT OF AMLODIPINE OF MODE OF DEATH AMONG ADVANCED HEART	AMERICAN JOURNAL OF CARDIOLOGY	11/01/1998
LEFT VENTRICULAR FUNCTION IN CORONARY DISEASE:	CAN J CARDIOL	01/01/1986
TRANSLUMINAL ANGIOPLASTY OF ANOMALOUS CORONARY ARTERIES.	AMER HEART JOURNAL	01/01/1986
PROLONGED SURVIVAL IN A PATIENT WITH PRIMARY ANGIOSARCOMA.	AMER HEART JOURNAL	01/01/1987

## **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:

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AMERICAN COLLEGE OF CARDIOLOGY

AMERICAN FEDERATION FOR CLINICAL RESEARCH

AMERICAN HEART ASSOCIATION