



GEORGE J PARELL M.D.

License Number: ME21358

Profession	Medical Doctor
License Status	Retired/
Year Began Practicing	07/01/1977
License Expiration Date	01/31/2018

## General Information

### Primary Practice Address

GEORGE J PARELL M.D.  
330 W 23RD ST #E  
PANAMA CITY, FL 32405

### 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
BAY MEDICAL CENTER	PANAMA CITY	FLORIDA
GULF COAST MEDICAL CENTER	PANAMA CITY	FLORIDA
SHANDS HOSPITAL AT THE UNIVERSITY OF FLO	GAINESVILLE	FLORIDA
GAINESVILLE VA MEDICAL CENTER	GAINESVILLE	FLORIDA

### Email Address

Please contact at: [gjp330@aol.com](mailto:gjp330@aol.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
CALIFORNIA, NOVEMBER 1974	
NEW JERSEY, SEPTEMBER 1973	
FLORIDA, NOVEMBER 1973	

### 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
UNIVERSITY OF TEXAS	MD	9/1/1970 - 6/30/1972	06/30/1972
ST. BENEDICTS PREPARATORY		1/1/1959 - 1/1/1963	
VILLANOVA UNIVERSITY		1/1/1963 - 1/1/1967	
UNIV AUTONOMA DE GUADALAJARA		1/1/1967 - 1/1/1970	

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
UNIVERSITY OF FLORIDA	INTERNSHIP	OTO - OTOLARYNGOLOGY		GAINESVILLE	FLORIDA	07/01/1972	06/30/1973
UNIVERSITY OF CALIFORNIA	RESIDENCY	OTO - OTOLARYNGOLOGY		LOS ANGELES	CALIFORNIA	07/01/1974	06/30/1977

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 CLINICAL PROFESSOR	UNIVERSITY OF FLORIDA COLLEGE OF MEDICIN	GAINESVILLE	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 OTOLARYNGOLOGY	OTO - OTOLARYNGOLOGY	
AMERICAN BOARD OF SURGERY	OTO - OTOLARYNGOLOGY	
AMERICAN BOARD OF FACIAL PLASTIC & RECON	OTO - OTOLARYNGOLOGY	

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:

For instructions on how to order copies of final disciplinary actions, please click [here](#).

[View Discipline Narratives](#)

[View Board Actions](#)

Taken By	Date Of Action	Description of Disciplinary Action	Under Appeal
FLORIDA DEPARTMENT OF HEALTH	05/10/2018	OBLIGATIONS IMPOSED	NO

Type	Imposed	Due	Completed	Amt Due	Amt Recvd
COSTS	5/10/2018			\$ 2,966.59	\$ 0.00
BOARD RETAINS JURISDICTION	5/10/2018			\$ 0.00	\$ 0.00
FINE	5/10/2018			\$ 2,500.00	\$ 0.00
FAILURE TO COMPLY	5/10/2018			\$ 0.00	\$ 0.00
APPEARANCES	5/10/2018			\$ 0.00	\$ 0.00
LECTURES	5/10/2018			\$ 0.00	\$ 0.00
RETURN LICENSE	5/10/2018			\$ 0.00	\$ 0.00
RETIRED LICENSE	5/10/2018			\$ 0.00	\$ 0.00
CE: RISK MANAGEMENT				\$ 0.00	\$ 0.00

The information below is self reported by the practitioner. For Florida health care practitioner discipline, see information listed above.

### 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](#).**

The following liability actions have been reported as required under section 456.049, F. S., within the previous 10 years:

Incident Date	County	Judicial Case	Settlement Date	Amount	Policy Amount
02/18/2013	BAY	2016-CA-1152	07/25/2017	\$150,000.00	\$250,000.00

## 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 provided the following professional or community service activities, honors, or awards:

Community Service/Award/Honor	Organization
EAGLE SCOUT 1959	
ALL AMERICAN COLLEGIATE SWIMMING TEAM 1965	
'85 HON AWD-AMER ACADEMY OF OTOLARYNGOLOGY-HEAD & NECK SUR	
VILLANOVA VARSITY CLUB HALL OF FAME 1998	

### Publications

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

Title	Publication	Date
BAROTRAUMA OF THE EARS AND SINUSES AFTER SCUBA DIVING	EUR ARCH OTORHINOLARYNGOL 258:159-163	02/01/2001
STAPEDECTOMY IN THE GUINEA PIG	OTOLARYNGOLOGY HEAD AND NECK SURGERY VOL 121 PP581-4	01/01/1999
INNER EAR BAROTRAUMA AFTER STAPEDECTOMY IN THE GUINEA PIG	LARYNGOSCOPE VOL 109 PP1991-1995	01/01/1999
NEUROLOGIC CONSEQUENCES OF SCUBA DIVING WITH CHRONIC SINUS	LARYNGOSCOPE VOL 110 PP 1358-1360	01/01/2000
DOUBLE V-Y SUBCUTANEOUS ISLAND FLAP	LARYNGOSCOPE	07/08/1996
MAGNETIC RESONANCE IMAGING IN GUINEA PIG MODEL OF INNER EAR	LARYNGOSCOPE - ACCEPTED FOR PUB	10/01/2015
SKIN-STERNOCLEIDOMASTOID MUSCLE COMPOSITE FLAP FOR NECK DIS	LARYNGOSCOPE	05/01/2008
THE TONSIL LOLLY CONTROL OF POST TONSIL BLEEDING	ENT JOURNAL	11/01/2006
HYPERBARIC COMPRESSION IN GUINEA PIG WITH PERILYMPH FISTULA	OTO-HNS	09/01/2003
COMPARISON OF ABSORBABLE AND NON-ABSORBABLE SUTURE IN CLOSUR	ARCHIVES OF FACIAL PLASTIC SURGERY	12/01/2003

### Professional Web Page

This practitioner has not provided any professional web page information.

### Languages Other Than English

This practitioner has indicated that the following languages other than English are used to communicate with patients, or that a translation service is available for patients, at his/her primary place of practice.

SPANISH

### Other Affiliations

This practitioner has provided the following national, state, local, county, and professional affiliations:

## Affiliation

BAY COUNTY CONSERVANCY BOARD 1994-PRESENT

NW FLORIDA SURGERY CENTER BOARD OF DIRECTORS 1992-2006

PROGRAM ADVISORY COM-AAOHNS 2007-2009

QUALITY ASSURANCE COM GCMC 1999-2012