



## WILLIAM J NAMEN II DPM

### License Number: PO2208

Profession Podiatric Physician  
License Status Clear/Active  
Year Began Practicing 01/01/1993  
License Expiration 03/31/2026  
Date

## General Information

### Primary Practice Address

WILLIAM J NAMEN II DPM  
1351 13TH AVENUE SOUTH  
SUITE 110  
JACKSONVILLE BEACH, FL 32250

### 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
BAPTIST MEDICAL CENTER - BEACHES	JACKSONVILLE BEACH	FLORIDA
MEMORIAL HOSPITAL JACKSONVILLE	JACKSONVILLE	FLORIDA
ST. VINCENT'S MEDICAL CENTER	JACKSONVILLE	FLORIDA
BAPTIST MEDICAL CENTER-SOUTH	JACKSONVILLE	FLORIDA

### Email Address

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

### Other State Licenses

This practitioner has not indicated any additional state licensures.

## Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
AUBURN UNIVERSITY	BS	9/1/1980 - 6/30/1984	06/30/1984
BARRY UNIVERSITY	DPM	8/1/1986 - 5/1/1990	05/01/1990

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
BARRY UNIVERSITY SCHOOL OF PODIATRIC MEDICINE	MIAMI SHORES	UNITED STATES	08/01/1986	05/12/1990	D.P.M. PODIATRIC MEDICINE

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
WESTCHESTER GENERAL HOSPITAL	RESIDENCY	GS - SURGERY		MIAMI	FLORIDA	07/01/1990	06/30/1991
HADASSAH MEDICAL ORGANIZATION	FELLOWSHIP	OTHER	FOOT ANKLE RECONSTRUCTIVE SURGERY	JERUSALEM	ISRAEL	09/01/1991	09/30/1992
HIALEAH HOSPITAL	RESIDENCY	GS - PEDIATRIC SURGERY		HIALEAH	FLORIDA	11/01/1992	10/31/1993

Academic Appointments

Graduate Medical Education

The practitioner did not provide this mandatory information.

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 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 BD. OF MULTIPLE SPEC. ON PODIATRIC PRIM. CARE	PODIATRY	

Financial Responsibility

Financial Responsibility

I have obtained and will maintain professional liability coverage in an amount not less than \$50,000 from an authorized insurer as defined under section 624.09, F.S., from an eligible surplus lines insurer as defined under s. 629.914(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:

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 \$5,000.00 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
03/01/2017	DUVAL		06/03/2022	\$50,000.00	\$0.00

## Optional Information

### Committees/Memberships

This practitioner has an affiliation with the following committees:

AMERICAN PODIATRIC MEDICAL ASSOCIATION  
FLORIDA PODIATRIC MEDICAL ASSOCIATION  
AMERICAN COLLEGE OF FOOT AND ANKLE SOCIETY

### 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 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
AMERICAN COLLEGE OF ANKLE AND FOOT SURGERY
AMERICAN PODIATRIC ASSOCIATION
FLORIDA PODIATRIC MEDICAL ASSOCIATION
NORTHEAST FLORIDA PODIATRIC MEDICAL ASSOCIATION