



WILLIAM RYMER

License Number: ME25882

Profession	Medical Doctor
License Status	Obligations/Active
Year Began Practicing	01/01/1975
License Expiration Date	01/31/2027
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes

General Information

Primary Practice Address

WILLIAM RYMER
2066 NW 56TH STREET
BOCA RATON
BOCA RATON, FL 33496

Medicaid

This practitioner DOES participate in the Medicaid program.

Staff Privileges

This practitioner has not indicated any staff privileges.

Institution Name	City	State
	FT LAUDERDALE	FLORIDA
	FT LAUDERDALE	FLORIDA
	FT LAUDERDALE	FLORIDA
	FT LAUDERDALE	FLORIDA

Email Address

Please contact at: rwilliam47@hotmail.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 is exempt from paying assessment.

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
NEW YORK MEDICAL COLLEGE	MD	1/1/1968 - 1/1/1972	01/01/1972

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 WISCONSIN HOSPITAL	INTERNSHIP	IM - INTERNAL MEDICINE		***	WISCONSIN	06/01/1972	06/30/1973
UNIVERSITY OF WISCONSIN HOSPITAL	RESIDENCY	IM - INTERNAL MEDICINE		***	WISCONSIN	07/01/1973	06/30/1975
UNIVERSITY OF MIAMI/JACKSON	FELLOWSHIP	IM - HEMATOLOGY		MIAMI	FLORIDA	07/01/1975	06/30/1977
UNIVERSITY OF MIAMI/JACKSON	FELLOWSHIP	IM - ONCOLOGY		MIAMI	FLORIDA	07/01/1977	06/30/1978

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 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 - HEMATOLOGY	
AMERICAN BOARD OF INTERNAL MEDICINE	IM - ONCOLOGY	
AMERICAN BOARD OF INTERNAL MEDICINE	IM - INTERNAL MEDICINE	

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:

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	12/29/2021	OBLIGATIONS IMPOSED			NO	
FLORIDA DEPARTMENT OF HEALTH	03/10/2025	OBLIGATIONS IMPOSED			NO	

Type	Imposed	Due	Completed	Amt Due	Amt Recvd
COSTS	12/29/2021	8/31/2022	8/10/2022	\$ 8,132.54	\$ 8,132.54
FL CARES EVALUATION	12/22/2021	2/28/2023	9/28/2023	\$ 0.00	\$ 0.00
APPEARANCES	12/29/2021		10/6/2023	\$ 0.00	\$ 0.00
FINE	12/29/2021	8/31/2022	8/31/2022	\$ 20,000.00	\$ 20,000.00
PRN EVALUATION	12/29/2021			\$ 0.00	\$ 0.00
SUBSEQUENT ORDER	8/22/2022			\$ 0.00	\$ 0.00
TOLLING	10/26/2023			\$ 0.00	\$ 0.00
EMPLOYER-PROBATION ACKNOWLEDGE	10/26/2023			\$ 0.00	\$ 0.00
LAST APPEARANCE	10/26/2023			\$ 0.00	\$ 0.00
APPEARANCES	10/26/2023			\$ 0.00	\$ 0.00
INDIRECT SUPERVISION	10/26/2023			\$ 0.00	\$ 0.00
PRE-APPROVAL OF SUPERVISOR/MON	10/26/2023			\$ 0.00	\$ 0.00
MONITOR	10/26/2023			\$ 0.00	\$ 0.00
RESPONDENT REPORT	10/26/2023			\$ 0.00	\$ 0.00
QUALITY ASSURANCE REVIEW	10/26/2023	12/25/2023		\$ 0.00	\$ 0.00
QUALITY ASSURANCE REVIEW - FOL	10/26/2023	4/25/2024		\$ 0.00	\$ 0.00
BOARD RETAINS JURISDICTION	10/26/2023			\$ 0.00	\$ 0.00
RETURN TO PRACTICE	10/26/2023			\$ 0.00	\$ 0.00
MONITOR REPORTS	10/26/2023			\$ 0.00	\$ 0.00
CHANGE OF SUPERVISOR	10/26/2023			\$ 0.00	\$ 0.00
SUBSEQUENT ORDER	2/27/2023			\$ 0.00	\$ 0.00
SUBSEQUENT ORDER	10/26/2023			\$ 0.00	\$ 0.00
MOTIONS FILED WITH CRU	7/10/2024			\$ 0.00	\$ 0.00
CE: "RISK MANAGEMENT"	11/12/2022	12/28/2022	11/12/2022	\$ 0.00	\$ 0.00
CE: PAIN MANAGEMENT		10/25/2024		\$ 0.00	\$ 0.00
FINE	3/10/2025	12/9/2025		\$ 3,000.00	\$ 0.00
COMPLY WITH PREVIOUS ORDER	3/10/2025			\$ 0.00	\$ 0.00
COSTS	3/10/2025	12/9/2025		\$ 6,500.00	\$ 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](#).

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:
REIMBURSEMENT COMMITTEE, FL SOCIETY OF CLINICAL ONCOLOGY

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

rwilliam47@hotmail.com

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.

FRENCH

Other Affiliations

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

Affiliation
AMERICAN COLLEGE OF PHYSICIANS-FELLOW
AMERICAN MEDICAL ASSOCIATION
AMERICAN SOCIETY OF CLINICAL ONCOLOGY
AMERICAN SOCIETY OF HEMATOLOGY
BROWARD COUNTY MEDICAL ASSOCIATION

Affiliation

FLORIDA MEDICAL ASSOCIATION

FLORIDA PHYSICIANS ASSOCIATION

FLORIDA SOCIETY OF CLINICAL ONCOLOGY

SOUTHERN MEDICAL ASSOCIATION