# HARRIS HUGH MCILWAIN

# License Number: ME26737

ProfessionMedLicense StatusDecYear Began PracticingNotLicense Expiration Date01/3Controlled Substance Prescriber (for the<br/>Treatment of Chronic Non-malignantYesPain)Pain

Medical Doctor Deceased/ Not Provided 01/31/2021 Yes

# **General Information**

### **Primary Practice Address**

HARRIS HUGH MCILWAIN 4700 NORTH HABANA AVENUE, STE SUITE 201 TAMPA, FL 33614-7117

#### 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
ST. JOSEPH'S HOSPITAL	TAMPA	FLORIDA
BRANDON REGIONAL HOSPITAL	BRANDON	FLORIDA
UNIVERSITY COMMUNITY HOSPITAL	TAMPA	FLORIDA

## **Email Address**

Please contact at: harris.mcilwain@mmghealth.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 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
EMORY UNIVERSITY	MD		

### **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
GRADY MEMORIAL HOSPITAL	INTERNSHIP	IM - INTERNAL MEDICINE		ATLANTA	GEORGIA	07/01/1973	06/30/1974
GRADY MEMORIAL HOSPITAL	RESIDENCY	IM - INTERNAL MEDICINE		ATLANTA	GEORGIA	07/01/1974	06/30/1978
EMORY UNIVERSITY SCHOOL OF MEDICINE	RESIDENCY	IM - RHEUMATOLOGY		ATLANTA	GEORGIA	07/01/1976	06/30/1978

# 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
USE COLLEGE OF PUBLIC HEALTH AD IL	INCT PROF UNIVERSITY OF SOUTH FLORIDA CO		

# **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 - RHEUMATOLOGY	
AMERICAN BOARD OF INTERNAL MEDICINE	IM - GERIATRIC 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:

#### 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: MEDICAL DIRECTOR,ST JOSEPHS JOHN KNOX VILLAGE MEDICAL DIRECTOR OSTEOPOROSIS CENTER OF EXCELLENCE OF UCH CHAIRMAN OF FLORIDA OSTEOPOROSIS BOARD EXECUTIVE COUNCIL-HILLBOROUGH COUNTY MED. ASSOCIATION 83-4

#### **Professional or Community Service Awards**

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

Community Service/Award/Honor	Organization
CONSULTING PHYSICIAN	STATE OF FLORIDA DEPARTMENT OF PROFESSIONAL REGULATION
ALPHA OMEGA ALPHA	EMORY UNIVERSITY
TERAM PHYSICIAN	TAMPA BAY ROWDIES SOCCER CLUB

Community Service/Award/Honor	Organization
CLINICAL RHEUMATOLOGY FACULTY	MERCK SHARP AND DOHME RESEARCH LABORATORIES
CLINICAL OSTEOPOROSIS FACULTY	MERCK
NATIONAL INITIATIVE IN CONTINUING MEDICAL EDUCATION	ELI LILLY, FACULTY
CLINICAL FACULTY	SEARLE PHARMACEURICAL
CLINICAL FACULTY	NORVARTIS
VISITING PROFESSOR CONTINUING MEDICAL EDUCATION	N PROCTOR AND GAMBLE
BEST DOCTORS IN AMERICA (1998)	
TOP 100 PHYSICIANS IN THE UNITED STATES (1997)	
TOP PHYSICIANS IN AMERICA	TOWN & COUNTRY MAGAZINE (1997)

## **Publications**

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

Title	Publication	Date
COMPARATIVE STUDY OF ALENDRONATE VERSUS ETIDRONATE FOR THE	JOURNAL OF CLINICAL ENDOCRINOLOGY & METABOLISM	01/01/1996
INTRA-ARTICULAR ORGOTEIN IN OSTEOARTHRITIS OF THE KNEE	AMERICAN JOURNAL OF MEDICINE	01/01/1989
THIS PRACTITIONER HAS AUTHORED SEVERAL OTHER PUBLICATIONS		
AN OPEN-LABEL EXTENSION STUDY OF ALENDRONATE TREATMENT IN	CALCIFIED TISSUE INT 64:463-469	01/01/1999
ALENDRONATE FOR THE PREVENTION AND TREATMENT OF GLUCOCORTI	NEW ENGLAND JOURNAL OF MEDICINE	07/30/1998
FLARE DURING DRUG WITHDRAWAL AS A METHOD TO SUPPORT EFFICA	JOURNAL OF RHEUMATOLOGY	01/01/1998

## **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 COLLEGE OF PHYSICIANS	
AMERICAN COLLEGE OF RHEUMATOLOGY	
AMERICAN MEDICAL ASSOCIATION	
AMERICAN MEDICAL DIRECTORS ASSOCIATION	
FLORIDA MEDICAL ASSOCIATION	
HILLSBOROUGH COUNTY MEDICAL ASSOCIATION	