

AUGUSTINE ANTHONY BOLLO

License Number: PO2570

Profession Podiatric Physician
License Status DELINQUENT/
Year Began Practicing 01/01/1996
License Expiration Date 03/31/2024
Controlled Substance Prescriber (for the Yes

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Treatment of Chronic Non-malignant

Pain)

General Information

Primary Practice Address

AUGUSTINE ANTHONY BOLLO 1331 MARBLE CREST WAY WINTER GARDEN, FL 34787

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

This practitioner has not indicated any staff privileges.

Email Address

Please contact at: podbilling@yahoo.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 |
|--------------------------------|--------------|---------------------|-----------------|
| OHIO COLLEGE OF PODIATRIC MEDI | DPM | 1/1/1989 - 1/1/1993 | 05/01/1993 |

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 |
|-------------------------------------|-----------------|-------------------|---------------------------------------|------------|---------------------|---------------------------|-------------------------|
| PODIATRY HOSPITAL OF PITTSBURGH | RESIDENCY | | 36 MONTH PROGRAM PODIATRIC SURGERY | PITTSBURGH | PENNSYLVANIA | 01/01/1993 | 01/01/1996 |
| WESTERN PENNSYLVANIA HOSPITAL | RESIDENCY | | SURGERY | PITTSBURGH | PENNSYLVANIA | 01/01/1993 | 01/01/1996 |

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 PODIATRIC SURGERY | ORS - FOOT AND ANKLE ORTHOPAEDICS | |

Financial Responsibility

Financial Responsibility

I have obtained and will maintain an unexpired, irrevocable letter of credit, established pursuant to Chapter 675, F.S., in an amount not less than \$50,000 and in compliance with rule 64B18-14.0072(1)(c), Florida Administrative Code.

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 the following criminal offenses:

| Description of Offense | Date | State or Jurisdiction | Under Appeal | Status | Date Of Corroboration |
|-----------------------------------|------------|--------------------------|-----------------|---------------------|--------------------------|
| LEWD OR LASCIVIOUS MOLESTATION | 04/25/2012 | ? FLORIDA | YES | NOT CORROBORATED | |
| TRESPASSING ON PROPERTY | 08/01/2023 | SUMTER COUNTY FLORIDA | YES | NOT CORROBORATED | |

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

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 |
|---------------|--------|----------------|-----------------|--------------|---------------|
| 12/03/2010 | DADE | CACE-13-010532 | 12/08/2015 | \$87,500.00 | \$250,000.00 |
| 04/08/2011 | | 2014011803 | 01/11/2018 | \$135,000.00 | \$0.00 |

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 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 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 not provided any national, state, local, county, or professional affiliations.