



CRAIG JASON BRESLAUER

License Number: PO2616

Profession Podiatric Physician
License Status Clear/Active
Year Began Practicing 01/01/1996
License Expiration 03/31/2028
Date

General Information

Primary Practice Address

CRAIG JASON BRESLAUER
1050 SE MONTEREY ROAD
SUITE 102
STUART, FL 34994

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
MARTIN MEMORIAL HOSPITAL SOUTH	STUART	FLORIDA
MARTIN MEMORIAL HOSPITAL NORTH	STUART	FLORIDA
MARTIN MEMORIAL SURGICENTER	STUART	FLORIDA
TREASURE COAST CENTER FOR SURGERY	STUART	FLORIDA

Email Address

Not Provided

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
BARRY UNIVERSITY	B.S.	8/1/1991 - 6/1/1992	12/19/1992
BARRY UNIVERSITY	DPM	8/1/1991 - 5/1/1995	05/01/1995

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
VA MEDICAL CENTER	RESIDENCY	OTHER	PODIATRIC MEDICINE/FOOT AND ANKLE SURGERY	MIAMI	FLORIDA	07/01/1995	06/30/1996
VA MEDICAL CENTER	RESIDENCY	OTHER	FOOT AND ANKLE SURGERY	MIAMI	FLORIDA	07/01/1996	06/30/1998

Academic Appointments

Graduate Medical Education

This practitioner has 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 ACADEMY OF WOUND MANAGEMENT	CERTIFIED WOUND SPECIALIST	
AMERICAN BOARD OF PODIATRIC SURGERY	FOOT AND ANKLE SURGERY	

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.

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](#).

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:
FELLOW, AMERICAN COLLEGE OF FOOT & ANKLE SURGEONS
BYLAWS COMMITTEE MARTIN MEMORIAL MEDICAL CENTERS
PRESIDENT EAST CENTRAL COMPONENT FPMA
PAST MEMBER INFECTION CONTROL COMMITTEE MARTIN MEMORIAL MC

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
REGULAR DIABETES LECTURES/EDUCATION	MARTIN MEMORIAL MEDICAL CENTERS

Publications

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

Title	Publication	Date
THE EFFECTS OF PASA CORRECTING OSTEOTOMIES ON THE HALLUCAL	JOURNAL FOOT ANKLE SURGERY	11/01/2001

Professional Web Page

www.southflaortho.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.

SPANISH

Other Affiliations

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

Affiliation

AMERICAN PODIATRIC MEDICAL ASSOCIATION

BOARD CERTIFIED IN FOOT SURGERY-AMERICAN BOARD OF PODIATRIC SURGERY

BOARD CERTIFIED IN WOUND CARE (AMERICAN ACADEMY OF WOUND MANAGEMENT)

BOARD CERTIFIED IN RECONSTRUCTIVE REARFOOT/ANKLE SURGERY - ABPS

FELLOW, AMERICAN COLLEGE OF FOOT & ANKLE SURGEONS

FLORIDA PODIATRIC MEDICAL ASSOCIATION