



EUGENE JOSEPH STRASSER

License Number: ME33959

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/1979
License Expiration Date	01/31/2027
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

General Information

Primary Practice Address

EUGENE JOSEPH STRASSER
EUGENE J STRASSER MD PA
1505 N. UNIVERSITY DR
CORAL SPRINGS, FL 33071-6041

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
CORAL SPRINGS MEDICAL CENTER	CORAL SPRINGS	FLORIDA
NORTHWEST MEDICAL CENTER	MARGATE	FLORIDA
UNIVERSITY HOSPITAL AND MEDICAL CENTER	TAMARAC	FLORIDA
SURGERY CENTER AT CORAL SPRINGS	CORAL SPRINGS	FLORIDA

Email Address

Please contact at: ejstrasser2017@gmail.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 has submitted payment of the assessment.

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
UNIVERSITY OF MARYLAND BALTIMO	BS	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
NOVA SOUTHEASTERN UNIVERSITY			J.D.	DAVIE	FLORIDA	01/01/0001	01/01/2001
UNIVERSITY OF MARYLAND	INTERNSHIP	GS - SURGERY		BALTIMORE	MARYLAND	01/01/1972	01/01/1973
UNIVERSITY OF MARYLAND	FELLOWSHIP	GS - SURGERY		BALTIMORE	MARYLAND	01/01/1973	01/01/1974
YORK HOSPITAL	RESIDENCY	GS - SURGERY		YORK	PENNSYLVANIA	01/01/1974	01/01/1977
ALBANY MEDICAL CENTER	RESIDENCY	PS - PLASTIC SURGERY		ALBANY	NEW YORK	01/01/1977	01/01/1979

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 BOARD OF PLASTIC SURGERY	PS - PLASTIC SURGERY	
AMERICAN BOARD OF SURGERY	GS - SURGERY	

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:

SURGERY, INC.

AMERICAN COLLEGE OF SURGEONS

AMERICAN MEDICAL ASSOCIATION

BROWARD COUNTY MEDICAL ASSOCIATION

FLORIDA SOCIETY OF PLASTIC SURGEONS

FLORIDA PHYSICIANS ASSOCIATIONS

AMERICAN SOCIETY OF AESTHETIC PLASTIC

AMERICAN SOCIETY OF PLASTIC SURGEONS

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
AMA RECOGNITION AWARD 1988, 1991	MEMBER, PARKLAND CHAMBER OF COMMERCE
	MEMBER, NEUROFIBROMATOSIS CENTER
	MEMBER, BOARD OF TRUSTEES
	MEDICAL DIRECTOR, WOUND CARE CENTER (FL MED. CTR)
	MEDICAL DIRECTOR, WOUND CARE CENTER (UNIV. COMM. HOSP.)
	FORMER VICE CHIEF OF STAFF, MARGATE HOSPITAL
SECOND PRIZE, GENERAL SURGERY RESIDENT PRESENTATION	
"LIVER TRAUMA" THIRD PRIZE, GENERAL SURGERY RES. CONTEST	

Publications

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

Title	Publication	Date
WHEN LIGHTNING STRIKES	THE BULLETIN OF THE YORK COUNTY MEDICAL SOCIETY	09/02/1975
POSTPARTUM HEMORRHAGE INTO A LARGE NONFUNCTIONING ISLET...	THE AMERICAN SURGEON	07/01/1975
LIGHTNING INJURIES	THE JOURNAL OF TRAUMA	01/01/1977
EXTROPERITONEAL INGUINAL ENDOMETRIOSIS	AMERICAN SURGEON	
AN OBJECTIVE GRADING SYSTEM FOR THE EVALUATION OF	PLAST. RECONSTR. SURG.	01/01/1999
THE INITIAL MANAGEMENT OF THE BURNED PATIENT	THE BULLETIN OF THE YORK COUNTY MEDICAL SOCIETY	10/01/1974
SOME ASPECTS OF BURN THERAPY	THE BULLETIN OF THE YORK COUNTY MEDICAL SOCIETY	11/02/1974

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.

OTHER

Other Affiliations

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

Affiliation
FORMER MEMBER, MEDICAL ADVISORY BOARD
GAURDIAN AD LITEM
GUEST SPEAKER & GUEST HOST, "ADAMS WORLD" RADIO SHOW
PARKLAND CHAMBER OF COMMERCE
RADIO SHOW, "PLASTIC SURGERY-THE TOTAL VIEW"