DANIEL JOSE PLASENCIA MD

License Number: ME34158

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 03/05/1979
License Expiration 01/31/2026

Date

General Information

Primary Practice Address

DANIEL JOSE PLASENCIA MD 2804 WHITTINGTON PL CARROLLWOOD, FL 33618

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
ALL CHILDREN'S HOSPITAL	SAINT PETERSBURG	FLORIDA
MORTON PLANT MEASE-N BAY HOSP	CLEARWATER	FLORIDA
LAKELAND REGIONAL MEDICAL CENTER	LAKELAND	FLORIDA
ST. JOSEPH'S HOSPITAL	TAMPA	FLORIDA

Email Address

Please contact at: providerservices@floridapediatrics.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
SCHOOL OF MEDICINE SPAIN	MD	1/1/1970 - 1/9/1976	01/09/1976

Other Health Related Degrees

This practitioner has completed the following other health related degrees:

School/University	City	State/Country	Dates Attended From	Dates Attended To	Degree Title
UNIVERSITY OF MIAMI, SCHOOL OF MEDICINE	MIAMI	FLORIDA	10/01/1976	01/01/1977	
SANTIAGO DE COMPOSTELA SCHOOL OF MEDICINE	SANTIAGO DE COMPOSTELA	SPAIN	08/01/1970	01/09/1976	M.D. MEDICAL DOCTOR
SANTIAGO DE COMPOSTELA SCHOOL OF MEDICENE	SANTIAGO DE COMPOSTELA	SPAIN	08/01/1970	01/09/1976	M.D. MEDICAL DOCTOR

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 MEDICAL CENTER - UNIVERSITY OF FLORIDA	INTERNSHIP	PD - PEDIATRICS		JACKSONVILLE	FLORIDA	07/01/1977	06/30/1978
UNIVERSITY MEDICAL CENTER - UNIVERSITY OF FLORIDA	RESIDENCY	PD - PEDIATRICS		JACKSONVILLE	FLORIDA	07/01/1978	06/30/1980
UNIVERSITY MEDICAL CENTER - UNIVERSITY OF FLORIDA	FELLOWSHIF	PD - PEDIATRIC CRITICAL CARE MEDICINE		JACKSONVILLE	FLORIDA	07/01/1980	06/30/1981

Academic Appointments

Graduate Medical Education

The practitioner did not provide this mandatory information.

Academic Appointments

This practitioner currently holds faculty appointments at the following medical/health related institutions of higher learning:

Title	Institution	City	State
OL INIIO AL	ACCORDATE PROFESSOR REPLATRICO LINIVERDITY OF COLUMN ACCULEOF OF	4 TABADA	EL ODIDA

CLINICAL ASSOCIATE PROFFESOR PEDIATRICS UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M TAMPA FLORIDA

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 PEDIATRICS	PD - PEDIATRIC CRITICAL CARE MEDICINE	07/20/1990
AMERICAN BOARD OF PEDIATRICS	PD - PEDIATRICS	05/17/1982

Financial Responsibility

Financial Responsibility

I have hospital staff privileges and I have professional liability coverage in an amount not less than \$250,000 per claim, with a minimum annual aggregate of not less than \$750,000 from an authorized insurer as defined under s. 624.09, F. S., from a surplus lines insurer as defined under s. 626.914(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.

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: ST JOSEPH CHILDREN HOSPITAL MEC MEMBER

ST JOSEPH CHILDREN HOSPITAL QI COMMITTEE MEMBER ST JOSEPH CHILDREN HOSPITAL STEERING COMMITTEE MEMBER ST. JOSEPH HOSPITAL ADVISORY COMMITTEE

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
FREE SERVICE/JUDEO CHRISTIAN PEDIATRIC CLINIC, TAMPA, FL	
COMMUNITY PHYSICIAN AWARD	AMERICAN ACADEMY PEDIATRICS
MEDICAL DIRECTOR FOR MED FEST EVENTS	SPECIAL OLYMPICS

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 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	d the following national, state, local, county, and professional affiliations:
Affiliation	
AMERICAN ACADEMY OF PI	EDIATRICS
AMERICAN MEDICAL ASSOC	CIATION
FLORIDA CHAPTER AMERIC	CAN ACADAMY PEDIATRICS
FLORIDA MEDICAL ASSOCI	ATION (FMA)
HILLSBOROUGH COUNTY M	MEDICAL SOCIETY