## SUSAN WELSH

## License Number: CH3746

Profession Chiropractic Physician

License Status CLEAR/Active
Year Began Practicing 01/01/1980
License Expiration 03/31/2026

Date

## **General Information**

## **Primary Practice Address**

SUSAN WELSH 13330 USF LAUREL DRIVE 3RD FLOOR TAMPA, FL 33612

## **Medicaid**

This practitioner DOES participate in the Medicaid program.

## **Staff Privileges**

This practitioner currently holds staff privileges at the following hospital/medical/health institutions:

## **Email Address**

Please contact at: drwelshdc@aol.com

#### **Other State Licenses**

This practitioner has indicated the following additional state licensure:

State	Profession
ILLINOIS	CHIROPRACTIC PHYSICIAN
INDIANA	CHIROPRACTIC PHYSICIAN

# **Education and Training**

## **Education and Training**

Institution Name	Degree Title	Dates of Attendance	Graduation Date
PALMER COLLEGE OF CHIROPRACTIC	DC	1/1/1977 - 1/1/1980	01/01/1980

## **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
SPORTS PHYSICIAN	OTHER PROGRAM	CHIROPRACTIC ORTHOPEDICS		SENECA FALLS	NEW YORK	01/01/1990	01/01/1996
SPORTS PHYSICIAN	OTHER PROGRAM	SPORTS INJURIES & PHYSICAL FITNESS		SENECA FALLS	NEW YORK	01/01/1990	07/01/1996

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

Title	Institution	City	State
ASSISTANT CLINICAL PROFESSOR	UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M	TAMPA	FLORIDA
CONTINUING EDUCATION FACULTY	PALMER COLLEGE OF CHIROPRACTRIC	DAVENPORT	IOWA

## **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 CHIROPRACTIC ASSOCIATION	SPORTS INJURIES & PHYSICAL FITNESS	

# Financial Responsibility

## **Financial Responsibility**

FINANCIAL EXEMPTION 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 \$5,000.00 Within last 10 years.

This profession is not required by F.S., to report bankruptcy and liability claims.

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:

**AHCA** 

AMERICAN COLLEGE OF SPORTS MEDICINE

AMERICAN CHIROPRACTIC ASSOCIATION

FLORIDA CHIROPRACTIC ASSOCIATION

HILLSBOROUGH COUNTY CHIROPRACTIC SOCIETY

PALMER COLLEGE OF CHIROPRACTIC ALUMNI ASSOCIATION

## **Professional or Community Service Awards**

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

Community Service/Award/Honor	Organization
LEADERSHIP TAMPA ALUMNI	CHAMBER OF COMMERCE
LEADERSHIP AWARD	LEADERSHIP TAMPA BAY
SPORTS COUNCIL	GREATER TAMPA BAY CHAMBER OF COMMERCE

#### **Publications**

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

Title	Publication	Date
SPORTS CHIROPRACTIC	SPORTS TALK	01/01/1997

#### **Professional Web Page**

www.health.usf.eddu/neurosurgery

#### **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:

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AIR WAR COLLEGE ALUMNI

AMERICAN VICTORY SHIP

DEFENSE ORIENTATION CONFERENCE ASSOCIATION

DEPARTMENT OF HEALTH/STATE OF FLORIDA

FAC APP/HILLSBOROUGH COMMUNITY COLLEGE/TAMPA,FL

FAC APP/PALMER COLLEGE OF CHIROPRACITC/DAVENPORT,IOWA

FAIRLEIGH DICKINSON UNIVERSITY

HILLSBOROUGH COUNTY CHIROPRACTIC SURGERY

LEADERSHIP TAMPA ALUMNI

LEADERSHIP TAMPA BAY

PCC STATE ALUMNI PRESIDENT