### HANTZ C HERCULE

### License Number: ACN242

Profession Area of Critical Need Medical Doctor

License Status Clear/Active
Year Began Practicing 07/01/1996
License Expiration Date 01/31/2026

Controlled Substance Prescriber (for the Yes

Treatment of Chronic Non-malignant

Pain)

### **General Information**

### **Primary Practice Address**

HANTZ C HERCULE 809 E JEFFERSON ST QUINCY, FL 32351

### **Medicaid**

The practitioner did not indicate if he/she participates in the Medicaid program.

### **Staff Privileges**

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

### **Email Address**

Please contact at: herculeh1@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
UNIVERSIDAD CENTRAL DEL ESTE	MD	5/1/1992 - 6/1/1996	06/19/1996

### **Other Health Related Degrees**

This practitioner has completed the following other 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
NEW YORK MEDICAL COLLEGE	FELLOWSHIP	IM - INTERNAL MEDICINE		VALHALLA	NEW YORK	01/01/1998	01/01/1999

### **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 does not hold any certifications from specialty boards recognized by the Florida board which regulates the profession for which he/she is licensed.

### Financial Responsibility

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

Title	Publication		Date
NITRIC OXIDE-EPOXYGENASE INTERACTIONS AND ARACHIDONATE-INDUC	AM J PHYSIOL HEART CIRC PHYSIOL 20 H2054-63	003 NOV 285 5	11/01/2003
ALTERATION IN ENDOTHELIN RECEPTOR SUB-TYPE RESPONSIVENESS AN	DIABETES RES CLIN PRACT 2004 MAR	63 3 155-69	03/01/2004
NITRIC OXIDE CYTOCHROME P450 INTERACTIONS IN CYCLOSPORIN A-I	J HYPERTENS 2006 SEP 24 9 1865-72		09/01/2006
MOUSE CYP4A ISOFORMS ENZYMATIC PROPERTIES GENDER- AND STRA	BIOCHEM J 2006 NOV 20		11/01/2006
CYTOCHROME P450 W W-1 HYDROXYLASE CONTRIBUTE TO ETA AND ETB	J PHARMACOL EXP THER 2000 292 3 1	153-60	03/01/2000
THE ROLE NITRIC OXIDE AND CYTOCHROME P450- DERIVED EICOSANOID	AM J PHYSIOL 2000 279 6 R2132-R214	1	12/01/2000
IDENTIFICATION OF THE SIGNALING PATHWAYS INVOLVED IN THE DIF	HYPERTENSION 2002 SUPPL 39		10/01/2002
GENDER DIFFERENCE IN VASCULAR AND PLATELET REACTIVITY TO THR	DIABETES RES CLIN PRACT 2003 JAN 5	59 1 11-24	01/01/2003
CONTRIBUTION OF CYTOCHROME P450 4A ISOFORMS TO RENAL FUNCTIO	J PHYSIOL 2003 SEP 15 551 PT 3 971-9	)	09/01/2003

### **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 provided the following national, state, local, county, and professional affiliations:

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AMERICAN DIABETES ASSOCIATION

AMERICAN HEART ASSOCIATION

AMERICAN PHYSIOLOGICAL SOCIETY

COLLEGIO DE MEDICOS-CIRUJANOS DE PUERTO RICO