



WILLIAM MARK MENDENHALL

License Number: ME35881

Profession	Medical Doctor
License Status	CLEAR/Active
Year Began Practicing	01/01/1982
License Expiration Date	01/31/2027
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

General Information

Primary Practice Address

WILLIAM MARK MENDENHALL
DEPT. OF RADIATION ONCOLOGY
1535 GALE LEMERAN RD RM 1210
GAINESVILLE, FL 32610-0385

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
SHANDS HOSPITAL AT THE UNIVERSITY OF FLO	GAINESVILLE	FLORIDA
NORTH FLORIDA REGIONAL MEDICAL CENTER	GAINESVILLE	FLORIDA
SHANDS AT JACKSONVILLE	JACKSONVILLE	FLORIDA

Email Address

Please contact at: mendwm@shands.ufl.edu

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 SOUTH FLORIDA	MD	1/1/1975 - 1/1/1978	01/01/1978

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		Other Specialty Area	City	State or Country	Dates Attended From	Dates Attended To
	Type	Specialty Area					
SHANDS HOSP AT UNIV	INTERNSHIP	TY - TRANSITIONAL YEAR		GAINESVILLE	FLORIDA	07/01/1978	06/30/1979
SHANDS HOSP AT UNIV	RESIDENCY	OTHER	THERAPEUTIC RADIOLOGY	GAINESVILLE	FLORIDA	07/01/1979	06/30/1982

Academic Appointments

Graduate Medical Education

This practitioner has 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
PROFESSOR	UNIVERSITY OF FLORIDA COLLEGE OF MEDICIN	GAINESVILLE	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 RADIOLOGY	RADIOLOGY THERAPEUTIC	

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:
CHAIRMAN/EDUCATION COMM/FLORIDA RADIOLOGICAL SOCIETY
EXECUTIVE COMM/FIFTH INT'L CONFERENCE ON HEAD & NECK CANC
HEAD & NECK COMM/RADIATION THERAPY ONCOLOGY GROUUP
ADVISORY BOARD/CONTINUING MEDICAL EDUCATION 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
TOP 318 CANCER SPECIALISTS FOR WOMEN	GOOD HOUSEKEEPING
THE BEST DOCTORS IN AMERICA	AMERICAN HEALTH
THE BEST DOCTORS IN AMERICA	SECOND EDITION
FELLOW	AMERICAN COLLEGE OF RADIOLOGY

Publications

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

Title	Publication	Date
POSTOPERATIVE IRRADIATION FOR SQUAMOUS CELL CARCINOMA OF T	INT J RADIAT OCOL BIOL PHSY	01/01/1989
TREATMENT WITH PREOPERATIVE IRRADIATION & SURGERY OF SQUA	CANCER	01/01/1989
CLINICAL STAGE I-II ENDOMETRIAL CARCINOMA TREATED WITH SU	GYNECOL ONCOL	01/01/1989
RR: IS ELECTIVE NECK TREATMENT INDICATED FOR T2NO SQUAMOU	RADIOTHER ONCOL	01/01/1989

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:

Affiliation
ALACHUA COUNTY MEDICAL SOCIETY
AMERICAN COLLEGE OF RADIOLOGY
AMERICAN RADIUM SOCIETY
AMERICAN SOCIETY FOR THERAPEUTIC RADIOLOGY & ONCOLOGY