



## MORRIS FRANK SEGALL

License Number: ME35941

Profession Medical Doctor  
License Status CLEAR/Active  
Year Began Practicing 01/01/1980  
License Expiration 01/31/2027  
Date

## General Information

### Primary Practice Address

MORRIS FRANK SEGALL  
465 ALLENDALE ROAD  
KEY BISCAVNE, FL 33149

### Medicaid

This practitioner DOES participate in the Medicaid program.

### Staff Privileges

This practitioner has not indicated any staff privileges.

Institution Name	City	State
	AVENTURA	FLORIDA
	MIAMI	FLORIDA
	MIAMI	FLORIDA

### Email Address

Please contact at: mfs4i@aol.com

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
GEORGIA	ACTIVE /ADMIN MEDICAL

### 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
CHICAGO MEDICAL SCHOOL	MD		01/01/1975
UNIVERSITY OF PITTSBURGH	BS		01/01/1971

Other Health Related Degrees

This practitioner does not hold any additional health related degrees.

School/University	City	State/Country	Dates Attended From	Dates Attended To	Degree Title
CHICAGO MEDICAL SCHOOL	CHICAGO	UNITED STATES	09/01/1971	06/30/1975	M.D. MEDICAL DOCTOR
MICHAEL REESE MEDICAL CENTER	CHICAGO	UNITED STATES	07/01/1975	06/30/1979	DIPLOMA IN OPHTHAMOLOGY
BARNES /WSA HINGTON MEDICAL CENTER		MISSOURI	07/01/1979	06/30/1980	DIPLOMA IN OPHTHAMOLOGY

Professional and Postgraduate Training

This practitioner has completed the following graduate medical education:

Program Name	Program Type	Specialty Area	Other Specialty Area	State or City	Country	Dates Attended From	Dates Attended To
MICHAEL REESE HOSPITAL	INTERNSHIP	IM - INTERNAL MEDICINE		***	ILLINOIS	06/01/1975	06/30/1976
MICHAEL REESE HOSPITAL	RESIDENCY	OPH - OPHTHALMOLOGY		***	ILLINOIS	07/01/1976	06/30/1979
BARNES HOSPITAL	FELLOWSHIP		RETINA	***	MISSOURI	07/01/1978	07/30/1980

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 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 OPHTHALMOLOGY	OPH - OPHTHALMOLOGY	

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

Community Service/Award/Honor	Organization
A.O.A-1975	CHICAGO MEDICAL SCHOOL
CHIEF RESIDENT/OPHTHALMOLOGY-1979	MICHAEL REESE HOSPITAL

### Publications

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

Title	Publication	Date
THIS PRACTITIONER HAS AUTHORED SEVERAL OTHER PUBLICATIONS		
ACUTE EFFECTS OF ALTERED PHOTOPERIODS ON THE ONSET OF OVUL	ENDOCRINOLOGY	01/01/1973
DELAYED OVULATION IN RATS EXPOSED TO CONTINUOUS LIGHT	ENDOCRINOLOGY	01/01/1974
PERSISTENCE OF A NON-PATENT HYALOID VESSEL	OPHTHALMOLOGY TIMES	02/01/1978
VASCULAR TUFTS IN RETROLENTAL FIBROPLASIA	OPHTHALMOLOGY	11/01/1980
REVIEW OF INDUCTION OF LABOR	CHICAGO MEDICAL SCHOOL QUARTERLY	01/01/1973

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

Affiliation
AMERICAN ACADEMY OF OPHTHALMOLOGY
AMERICAN MEDICAL ASSOCIATION
DADE COUNTY MEDICAL ASSOCIATION
MIAMI OPHTHALMOLOGY SOCIETY
PAUL CIBIS RETINAL SOCIETY