



## JOHN V MARRACCINI MD

License Number: ME36275

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/1980
License Expiration Date	01/31/2027
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

## General Information

### Primary Practice Address

JOHN V MARRACCINI MD  
8525 SW 92ND STREET  
SUITE 4B  
MIAMI, FL 33156

### Medicaid

This practitioner does NOT participate in the Medicaid program.

### Staff Privileges

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

Institution Name	City	State
DOCTORS HOSPITAL	CORAL GABLES	FLORIDA

### Email Address

Please contact at: [jvmarraccini@bellsouth.net](mailto:jvmarraccini@bellsouth.net)

### 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
HARVARD MEDICAL SCHOOL	MD	9/3/1974 - 6/1/1978	06/08/1978

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 Type	Specialty Area	Other Specialty Area	City	State or Country	Dates Attended From	Dates Attended To
UNIVERSITY OF MIAMI/JACKSON	INTERNSHIP	PTH - PATHOLOGY-ANATOMIC AND CLINICAL		MIAMI	FLORIDA	07/01/1978	06/30/1979
UNIVERSITY OF MIAMI/JACKSON	RESIDENCY	PTH - PATHOLOGY-ANATOMIC AND CLINICAL		MIAMI	FLORIDA	07/01/1979	06/30/1982
METRO DADE CO MEDICAL EXAMINER	FELLOWSHIP	PTH - FORENSIC PATHOLOGY		MIAMI	FLORIDA	07/01/1982	06/30/1983
UNIVERSITY OF MIAMI/JACKSON	FELLOWSHIP	FP - FAMILY MEDICINE		MIAMI	FLORIDA	02/09/1993	06/30/1993

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
VOLUNTARY ASSISTANT PROFESSOR DIVISION FAMILY MEDICINE DEPAR	FLORIDA INTERNATIONAL UNIV. COLLEGE OF MEDICINE	MIAMI	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 PATHOLOGY	PTH - PATHOLOGY-ANATOMIC AND CLINICAL	
AMERICAN BOARD OF PATHOLOGY	PTH - FORENSIC PATHOLOGY	

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](#).

The following liability actions have been reported as required under section 456.049, F. S., within the previous 10 years:

Incident Date	County	Judicial Case	Settlement Date	Amount	Policy Amount
02/02/2016	DADE		02/10/2017	\$250,000.00	\$250,000.00

## Optional Information

### Committees/Memberships

This practitioner has an affiliation with the following committees:  
SURGICAL CASE REVIEW COMMITTEE DOCTORS HOSPITAL  
INFECTION CONTROL COMMITTEE DOCTORS HOSPITAL

### Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
VOLUNTEER SERVICE AWARD	UNITED WAY

Community Service/Award/Honor	Organization
RECOGNIZED/LISTED	WHO'S WHO AMONG RISING YOUNG AMERICANS

## Publications

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

Title	Publication	Date
DIFFERENCES BETWEEN MULTISITE	JOURNAL OF FORENSIC SCIENCES	11/01/1990
FATAL PORTUGUESE MAN-O-WAR	ANNALS OF EMERGENCY MEDICINE	03/01/1989

## 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 FORENSIC SCIENCES
AMERICAN SOCIETY OF CLINICAL PATHOLOGISTS
DADE COUNTY MEDICAL ASSOCIATION
FLORIDA MEDICAL ASSOCIATION