# ALBERT BROWN DPM

# License Number: PO548

ProfessionPodiatric PhysicianLicense StatusDeceased/Year Began Practicing01/01/1950License Expiration03/31/2022DateDate

# **General Information**

## **Primary Practice Address**

ALBERT BROWN DPM 5714 GUAVA DRIVE TAMARAC, FL 33319

## Medicaid

This practitioner does NOT participate in the Medicaid program.

# **Staff Privileges**

This practitioner has not indicated any staff privileges.

Email Address Please contact at: al@dralbrown.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
DR WILLIAM SCHOLL COLLEGE OF P	DPM	1/6/1946 - 2/28/1949	02/28/1949

## **Other Health Related Degrees**

This practitioner has completed the following other health related degrees:

School/University	City	State/Country	Dates Attended From	Dates Attended To	Degree Title
WAYNE STATE UNIVERSITY	DETROIT	MICHIGAN	09/01/1936	06/01/1940	B.S.P. BACHELOR OF SCIENCE IN PHARMACY

## **Professional and Postgraduate Training**

This practitioner has completed the following graduate medical education:

	Program	Specialty			State or	Dates Attended	Dates
Program Name	Туре	Area	Other Specialty Area	City	Country	From	Attended To
BARRY UNIVERSITY	OTHER	OTHER	MINIMAL INVASIVE	MIAMI	FLORIDA	01/01/0001	10/03/2002
COLLEGE OF PODIATRY	PROGRAM		FOOT SURGERY	SHORES			

# 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**

#### **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:

For instructions on how to order copies of final disciplinary actions, please click here. View Discipline Narratives

Taken By	Date Of Action	Description of Disciplinary Action	Under Appeal
FLORIDA DEPARTMENT OF HEALTH	11/27/2018	OBLIGATION(S) SATISFIED	NO

# The information below is self reported by the practitioner. For Florida health care practitioner discipline, see information listed above.

#### 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.

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
08/25/2017	BROWARD		10/09/2019	\$65,000.00	\$100,000.00

# **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
MORTON'S NEUROMA TO EXCISE OR NOT TO EXCISE	PODIATRY TODAY	05/01/2005

#### **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.

YIDDISH GERMAN FRENCH SPANISH ITALIAN

### **Other Affiliations**

This practitioner has provided the following national, state, local, county, and professional affiliations:

#### Affiliation

ACADEMY OF AMBULATORY FOOT AND ANKLE SURGERY

AMERICAN PODIATRIC MEDICAL ASSOCIATION

BROWARD COUNTY PODIATRIC ASSOCIATION

CERT: AMBULATORY FOOT SURGERY

DIPLOMATE, AMERICAN BOARD OF AMBULATORY FOOT SURGERY

FATHER OF MODERN FOOT SURGERY 1975

FELLOW, ACADEMY OF AMBULATORY FOOT SURGERY

HALL OF FAME, SURGERY 1985

PROFESSOR OF SURGERY, 2001