



## BELUR S SREENATH

License Number: ME38516

Profession Medical Doctor  
License Status Clear/Active  
Year Began Practicing 01/01/1981  
License Expiration 01/31/2026  
Date

## General Information

### Primary Practice Address

BELUR S SREENATH  
3901 66TH STREET NORTH  
SUITE 201  
ST PETERSBURG, FL 33709

### 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
NORTHSIDE HOSPITAL	ST PETERSBURG	FLORIDA
ST. PETERSBURG GENERAL HOSPITAL	ST PETERSBURG	FLORIDA
LARGO MEDICAL CENTER	LARGO	FLORIDA
MORTON PLANT HOSPITAL	CLEARWATER	FLORIDA
ST. ANTHONYS HOSPITAL	ST PETERSBURG	FLORIDA
BAYFRONT MEDICAL CENTER	ST PETERSBURG	FLORIDA

### Email Address

Please contact at: [leigh-cdc@tampabay.rr.com](mailto:leigh-cdc@tampabay.rr.com)

### 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 is exempt from paying assessment.

## Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
BANDALORE MED. COLLEGE, BANGAL	MD	1/1/1967 - 1/1/1974	01/01/1974

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
HOSPITAL OF ST RAPHAEL	INTERNSHIP	IM - INTERNAL MEDICINE		NEW HAVEN	CONNECTICUT	10/01/1975	06/30/1977
HOSPITAL OF ST RAPHAEL	RESIDENCY	IM - INTERNAL MEDICINE		NEW HAVEN	CONNECTICUT	07/01/1977	06/01/1979
HOSPITAL OF ST. RAPHAEL	OTHER PROGRAM	IM - INTERNAL MEDICINE		NEW HAVEN	CONNECTICUT	07/01/1978	06/01/1979
ST. VINCENT'S HOPITAL	FELLOWSHIP	IM - GASTROENTEROLOGY		NEW HAVEN	CONNECTICUT	07/01/1979	06/30/1981
YALE NEW HAVEN HOSPITAL	FELLOWSHIP	IM - GASTROENTEROLOGY		NEW HAVEN	CONNECTICUT	07/01/1979	06/30/1981

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 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 INTERNAL MEDICINE	IM - INTERNAL MEDICINE	
AMERICAN BOARD OF INTERNAL MEDICINE	IM - GASTROENTEROLOGY	

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:**

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:  
PHARMACY COMMITTEE/NORTH SIDE HOSPITAL, ST. PETERSBURG

**Professional or Community Service Awards**

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

Community Service/Award/Honor	Organization
CHIEF OF MEDICINE	NORTH SIDE HOSPITAL
MEDICAL DIRECTOR	BAY AREA ENDOSCOPY

**Publications**

This practitioner has not provided any publications that he/she authored in peer-reviewed medical literature within the last ten years.

**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.

KANNADA

TAMIL

Other Affiliations

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

Affiliation
AMERICAN COLLEGE OF GASTROENTEROLOGY
AMERICAN GASTROENTEROLOGICAL ASSOCIATION
AMERICAN SOCIETY OF GASTROINTESTINAL ENDOSCOPY
CROHN'S COLITIS FOUNDATION