



DENNIS KEITH LEDFORD

License Number: ME39340

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/1986
License Expiration Date	01/31/2026
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

General Information

Primary Practice Address

DENNIS KEITH LEDFORD
13000 BRUCE B DOWNS BLVD
VAR111D
TAMPA, FL 33612

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
ALL CHILDREN'S HOSPITAL	ST PETERSBURG	FLORIDA
THE TAMPA GENERAL HOSPITAL	TAMPA	FLORIDA
H. LEE MOFFITT CANCER CTR & RESEARCH INST	TAMPA	FLORIDA
UNIVERSITY COMMUNITY HOSPITAL	TAMPA	FLORIDA

Email Address

Please contact at: dledford@usf.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 is exempt from paying assessment.

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
UNIV OF TENN, MEMPHIS, COLL OF	MD		

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
REGIONAL MEDICAL CENTER AT	INTERNSHIP	IM - INTERNAL MEDICINE		***	TENNESSEE	01/01/1977	12/31/1977
REGIONAL MEDICAL CENTER AT	RESIDENCY	IM - INTERNAL MEDICINE		***	TENNESSEE	01/01/1978	06/30/1979
NEW YORK UNIVERSITY	FELLOWSHIP	IM - RHEUMATOLOGY	IMMUNOLOGY	***	NEW YORK	07/01/1979	06/30/1981
UNIVERSITY OF SOUTH FLORIDA COLLEGE OF MEDICINE	FELLOWSHIP	AI - ALLERGY AND IMMUNOLOGY		TAMPA	FLORIDA	07/01/1982	06/30/1984

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
ASSOCIATE PROFESSOR OF MEDICINE	UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M	TAMPA	FLORIDA
DIRECTOR OF TRAINING PROGRAM IN CLINICAL AND LAB IMMUNOLOG	UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M	TAMPA	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 ALLERGY AND IMMUNOLOGY	AI - ALLERGY AND IMMUNOLOGY	
AMERICAN BOARD OF INTERNAL MEDICINE	IM - INTERNAL MEDICINE	
AMERICAN BOARD OF ALLERGY AND IMMUNOLOGY	AI - CLINICAL AND LABORATORY IMMUNOLOGY	
AMERICAN BOARD OF INTERNAL MEDICINE	IM - RHEUMATOLOGY	

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:

NATIONAL PROGRAM COMMITTEE, AAAI
NATIONAL PROGRAM COMMITTEE-ACAAI
CHAIRMAN COMMITTEE-AAAI

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
DISTINGUISHED VISITING PROFESSOR	UNIVERSITY OF MISSISSIPPI MEDICAL SCHOOL
VOLUNTEER	HILLBOROUGH COUNTY HEALTH CLINIC
OUTSTANDING SPEAKER AWARD	MARION COUNTY MEDICAL SOCIETY
OUTSTANDING FACULTY OF THE YEAR TEACHING AWARD	UNIVERSITY OF FLORIDA

Publications

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

Title	Publication	Date
HOUSE DUST ALLERGY IN FLORIDA, MITE SURVEY IN HOUSEHOLDS O	ALLERGY PROCEEDINGS	01/01/1990
IMMUNOLOSKA STRANA KARDIOVASKULARNE BOLESTI	JAMA JUHOSLOVENSICO IZDANJE BEOGRAD	01/01/1988
CAN ALLERGIES AFFECT CLASSROOM PERFORMANCE?	PRIVATE SCHOOLS MAGAZINE	01/01/1989
SERUM IGE AND HUMAN IMMUNODEFICIENCY VIRUS (HIV) INFECTION	JOURNAL OF ALLERGY AND CLINICAL IMMUNOLOGY	01/01/1990
IMMUNOLOGIC ASPECTS OF CARDIOVASCULAR DISEASE	JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION	01/01/1992

THIS PRACTITIONER HAS AUTHORED SEVERAL OTHER PUBLICATIONS

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.
KOREAN

Other Affiliations

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

Affiliation
AMERICAN ACADEMY OF ALLERGY, ASTHMA, AND IMMUNOLOGY
AMERICAN BOARD OF RHEUMATOLOGY CERTIFIED
AMERICAN COLLEGE OF ASTHMA, ALLERGY, AND IMMUNOLOGY
AMERICAN COLLEGE OF PHYSICIANS
AMERICAN MEDICAL ASSOCIATION