



JIM FRANCOIS

License Number: PO3269

Profession	Podiatric Physician
License Status	Clear/Active
Year Began Practicing	Not Provided
License Expiration Date	03/31/2026

General Information

Primary Practice Address

JIM FRANCOIS
150 NW 168TH STREET
SUITE 303
NORTH MIAMI BEACH, FL 33169

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
NORTH SHORE MEDICAL CENTER	MIAMI	FLORIDA
JACKSON NORTH MEDICAL CENTER	NORTH MIAMI BEACH	FLORIDA
VILLA MARIA REHABILITATION HOSPITAL	NORTH MIAMI	FLORIDA
FAWCETT MEMORIAL HOSPITAL	PORT CHARLOTTEE	FLORIDA

Email Address

Please contact at: drjdef@jimfrancoisdpm.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
FLORIDA	PHYSICAL THERAPY

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
BARRY UNIVERSITY	DPM	8/30/2001 - 4/30/2005	04/30/2005

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
FAMU	TALLAHASSEE	FLORIDA	08/30/1994	08/01/1996	BS PHYSICAL THERAPY

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
HOLLYWOOD MEDICAL CENTER PODIATRIC MEDICINE AND SURGERY 36	RESIDENCY	PIR - PODIATRIC INTERNSHIP/RESIDENCY	PODIATRIC MEDICINE SURGERY	HOLLYWOOD	FLORIDA	07/01/2005	11/30/2006
MEMORIAL REGIONAL HOSPITAL SOUTH	RESIDENCY	PIR - PODIATRIC INTERNSHIP/RESIDENCY	PODIATRIC MEDICINE AND SURGERY	HOLLYWOOD	FLORIDA	12/01/2006	06/30/2008

Academic Appointments

Graduate Medical Education

This practitioner has 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 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

I have obtained and will maintain professional liability coverage in an amount not less than \$50,000 from an authorized insurer as defined under section 624.09, F.S., from an eligible surplus lines insurer as defined under s. 629.914(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 \$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](#).

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:

VICE CHAIR--SURGERY DEPARTMENT AT NORTH SHORE MEDICAL CENTER

CHIEF OF PODIATRY--NORTH SHORE MEDICAL CENTER

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
COMMUNITY HEALTH	DR DEBRA LYNN KALFAS MEMORIAL AWARD
OUTSTANDING HUMANITARIAN SERVICE	HAITIAN AMERICAN NURSES ASSOCIATION OF FLORIDA

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

www.jimfrancoisdpm.com

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.

CREOLE

FRENCH

SPANISH

Other Affiliations

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

Affiliation
ACFAS
APMA, FPMA