JORG ALEXANDER BOBER

License Number: PO3294

ProfessionPodLicense StatusClearYear Began Practicing02/2License Expiration Date03/3Controlled Substance Prescriber (for the
Treatment of Chronic Non-malignantYesPain)Pod

Podiatric Physician Clear/Active 02/20/2007 03/31/2026 Yes

General Information

Primary Practice Address

JORG ALEXANDER BOBER 1409-9G KINGSLEY AVENUE ORANGE PARK, FL 32073-4579

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
BAPTIST MEDICAL CENTER-SOUTH	JACKSONVILLE	FLORIDA
ORANGE PARK MEDICAL CENTER	ORANGE PARK	FLORIDA
BAPTIST MEDICAL CENTER	JACKSONVILLE	FLORIDA
MEMORIAL HOSPITAL JACKSONVILLE	JACKSONVILLE	FLORIDA
SHANDS AT JACKSONVILLE	JACKSONVILLE	FLORIDA
ST. LUKE'S HOSPITAL	JACKSONVILLE	FLORIDA

Email Address

Please contact at: Drjbober@gmail.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
CALIFORNIA	LVN / EMT - IA

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
DES MOINES UNIVERSITY	DPM		05/29/2004

Other Health Related Degrees

This practitioner has completed the following other health related degrees:

			Dates Attended	Dates Attended	
School/University	City	State/Country	/ From	То	Degree Title
TVI		NEW MEXICO	08/30/1993	08/30/1995	BS - BIOCHEMISTRY
UNIV. OF NEW MEXICO	ALBUQUERQUE	E NEW MEXICO	01/01/0001	01/01/0001	BS - PSYCHOLOGY & BIOLOGY

Professional and Postgraduate Training

This practitioner has completed the following graduate medical education:

			Other			Dates	Dates
	Program	n	Specialty		State or	Attended	Attended
Program Name	Туре	Specialty Area	Area	City	Country	From	То
UF & SHANDS MEDICAL CTR. ORTHO DEPT.		PIR - PODIATRIC INTERNSHIP/RESIDENCY		JACKSONVILLE	FLORIDA	07/30/2004	06/30/2007

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
DPM	UNIVERSITY OF FLORIDA COLLEGE OF MEDICIN	JACKSONVILLE	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 PODIATRIC SURGERY	FOOT AND ANKLE SURGERY	

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 the following criminal offenses:

Description of Offense	Date	State or Jurisdiction	Under Appeal	Status	Date Of Corroboration
CARRIYING A CONCEALED	12/23/2003	3 BLACK HAWK COUNTY, IOWA	NO	NOT CORROBORATED	

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

Community Service/Award/Honor	Organization
ACHE AMERICAN COLLEGE OF HEALTH CARE EXECUTIVES	DMU

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.nfapc.net

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 not provided any national, state, local, county, or professional affiliations.