ANGEL MARTY GARCIA MD

License Number: ME42709

Profession Medical Doctor

License Status CONDITIONAL/Active

Year Began Practicing 01/01/1984 License Expiration Date 01/31/2026

Controlled Substance Prescriber (for the Yes

Treatment of Chronic Non-malignant

Pain)

General Information

Primary Practice Address

ANGEL MARTY GARCIA MD 424 S. 19TH ST PALATKA, FL 32177

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: amg.mdwiz@gmail.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 has submitted payment of the assessment.

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
UNIV AUTO DE GUADALAJARA,FAC	M.D.		07/01/1979

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
WAYNE STATE UNIVERSITY AFFILIATED HOSPITALS	RESIDENCY	IM - INTERNAL MEDICINE		DETROIT	MICHIGAN	07/01/1981	06/30/1983
WAYNE STATE UNIVERSITY AFFILIATED HOSPITALS	RESIDENCY	IM - INTERNAL MEDICINE		DETROIT	MICHIGAN	07/01/1981	06/30/1983
MEMORIAL HERMAN BAPTIST HOSPITAL	ROTATING INTERNSHIP	IFP - INTERNAL MEDICINE/FAMILY PRACTICE	ROTATIONS: 3 MONTHS EACH OF OB-GYN, IM, PEDS & GEN. SURGERY	BEAUMONT	TEXAS	07/01/1979	06/30/1980
NOGALES RED CROSS EMERGENCY ROOM		EM - EMERGENCY MEDICINE		NOGALES	MEXICO	07/01/1980	06/30/1981

Academic Appointments

Graduate Medical Education

This practitioner has not 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 elected not to carry medical malpractice insurance however, I agree to satisfy any adverse judgments up to the minimum amounts pursuant to s. 458.320(5) (g)1, F. S. I understand that I must either post notice in a sign prominently displayed in my reception area or provide a written statement to any person to whom medical services are being provided that I have decided not to carry medical malpractice insurance. I understand that such a sign or notice must contain the wording specified in s. 458.320(5) (g), 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:

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

View Discipline Narratives

View Board Actions

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 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
MISSION CLINIC VOLUNTEER	OUR LADY QUEEN OF PEACE-DELRAY BEACH
BOARD CERITIFIED DIPLOMATE	AMERICAN BOARDS OF QUALITY ASSURANCE & UTILIZATION REVIEW

Community Service/Award/Honor	Organization
BOARD CERTIFIED DIPLOMATE	AMERICAN BOARDS FOR THE ADVANCEMENT OF MEDICINE
BOARD CERTIFIED DIPLOMATE	AMERICAN BOARDS OF CLINICAL SEXOLOGY
BOARD CERTIFIED DIPLOMATE	GLOBAL STEM CELL GROUP
CERTIFIED IN BOTOX THERAPEUTICS	ESTHETIC SKIN INSTITUTE INC
CERTIFIED IN DERMA FILLERS	ESTHETIC SKIN INSTITUTE INC
CERTIFIED IN MESOTHERAPY	ESTHETIC SKIN INSTITUTE INC

Publications

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

Title	Publication	Date
EVALUATION OF MEDICAL RECORDS FOR INSURABILITY	J OURNAL OF INSURANCE MEDICINE	09/01/1991
STANDARDIZED ELECTRONIC HEALTH RECORDS	MEDICAL RECORDS INSTITUTE	03/01/1996
CLINICAL RECORDS INTERFACED TO BILLING	MEDICAL RECORDS INSTITUTE	01/01/1999
EVALUATING MEDICAL REC CONFIDE	MEDICAL RECORDS INSTITUTE	03/01/1999

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.

SPANISH

Other Affiliations

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

		,				
Affiliation						
AMERICAN AC	ADEMY OF PAIN M	ANAGEMENT				
AMERICAN BO	ARD OF QAULITY	ASSURANCE AND I	JTILIZATION	REVIEW		
DIPLOMATE O	F AMERICAN BOA	RD OF CLINICAL SE	EXOLOGY			
GLOBAL STEN	CELL GROUP					