



## PAUL K WINNER

License Number: OS5407

Profession                      Osteopathic Physician  
License Status                Clear/Active  
Year Began Practicing      07/01/1988  
License Expiration          03/31/2028  
Date

## General Information

### Primary Practice Address

PAUL K WINNER  
4631 N. CONGRESS AVE.  
STE. 200  
WEST PALM BEACH, FL 33407

### 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
COLUMBIA HOSPITAL	W PALM BCH	FLORIDA
PALM BEACH GARDENS MEDICAL CENTER	PALM BEACH GARDENS	FLORIDA

### Email Address

Please contact at: [pwinner777@aol.com](mailto:pwinner777@aol.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NEW YORK	DO
CONNECTICUT	DO
NEW JERSEY	DO

### 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
NY COLL OF OSTEO MED, OLD WEST	DO		

## 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
MONTEFIORE M C-H&L	RESIDENCY	PD - PEDIATRICS		***	NEW YORK	07/01/1982	06/30/1983
BRONX MUNICIPAL HOS	RESIDENCY	PD - PEDIATRICS		BRONX	NEW YORK	07/01/1983	06/30/1984
BRONX MUNICIPAL HOS	RESIDENCY	N - CHILD NEUROLOGY		BRONX	NEW YORK	07/01/1984	06/30/1985
MONTEFIORE M C-H&L	RESIDENCY	N - CHILD NEUROLOGY		***	NEW YORK	07/01/1985	06/30/1987
CORNELL UNIVERSITY HOSPITAL FOR SPECIAL SURGERY	FELLOWSHIP	N - NEUROLOGY	NEUROMUSCULAR FELLOW	***	NEW YORK	07/01/1987	06/30/1988

## 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
ASSISTANT CLINICAL PROF OF MEDICINE	NOVA SOUTHEASTERN	FT LAUDERDALE	FLORIDA
ASSISTANT PROFESSOR OF NEUROLOGY	NOVA SOUTHEASTERN	FT. LAUDERDALE	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 PSYCHIATRY AND NEUROLO	N - NEUROLOGY	

## Financial Responsibility

### Financial Responsibility

I have hospital staff privileges and I have obtained and maintain 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 FS, from a surplus lines insurer as defined under s.626.914(2)FS, from a risk retention group as defined under s.627.942 FS, from the Joint Underwriting Association established under s.627.351(4)FS, or through a plan of self-insurance as provided in s.627.357 FS, or through a plan of self-insurance which meets the conditions specified for satisfying financial responsibility in s.766.110 FS.

# 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.

#### 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:  
PROFESSIONAL ADVISORY BOARD/EPILEPSY ASSOC. OF PALM BEACH  
CO-DIRECTOR/MUSCULAR DYSTROP. ASSOCIATION  
CHAIRMAN/PEDIATRIC COMMITTEE  
AMERICAN ASSOC FOR THE STUDY OF HEADACHES  
FLORIDA SOCIETY OF NEUROLOGY  
CHILD NEUROLOGY SOCIETY

### Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
SOUTH FLORIDA TOP DOCTORS	SOUTH FLORIDA MAGAZINE/10-97
BEST ABSTRACT PRESENTATION	AMERICAN ACADEMY OF FAMILY PRACTITIONERS

### Publications

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

Title	Publication	Date
OFFICE BASED TREATMENT OF ACUTE MIGRAINE WITH HEADACHE DHE		01/01/1993
A PROFILE OF MENSTRUAL MIGRAINE SUFFERS	VI CONGRESS OF THE INTERNATIONAL HEADACHE SOCIETY	08/01/1993
REDUCED INCIDENCE OF NAUSEA AND VOMITING AFTER ADMINISTRATION	VI CONGRESS OF THE INTERNATIONAL HEADACHE SOCIETY	08/01/1993
MIGRAINE TREATMENT IN OFFICE PRACTICE: A PHYSICIAN PROFILE	HEADACHE	01/01/1993
A DOUBLE-BLIND STUDY OF DIHYDROERGOTAMINE VERSUS SUMITRIPTAN	AMERICAN ACADEMY OF FAMILY PHYSICIANS	09/01/1994

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.

ITALIAN

### Other Affiliations

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

Affiliation
AMERICAN ASSOCIATION OF THE STUDY OF HEADACHES
FLORIDA ASSOCIATION FOR THE STUDY OF HEADACHES