



## LES D RUSKIN

License Number: CH5390

Profession	Chiropractic Physician
License Status	Clear/Active
Year Began Practicing	03/28/1986
License Expiration Date	03/31/2026

## General Information

### Primary Practice Address

LES D RUSKIN  
4623 DEVONSHIRE BLVD.  
PALM HARBOR, FL 34685

### Medicaid

This practitioner does NOT participate in the Medicaid program.

### Staff Privileges

This practitioner has not indicated any staff privileges. Chiropractic physicians typically do not hold staff privileges.

### Email Address

Please contact at: [druskin@tampabay.rr.com](mailto:druskin@tampabay.rr.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
	CHIROPRACTIC DOCTOR
	CHIROPRACTIC DOCTOR

## Education and Training

### Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
LIFE UNIV SCH OF CHIROPRACTIC D.C.		7/1/1982 - 3/1/1986	03/01/1986

### Other Health Related Degrees

This practitioner does not hold any additional health related degrees.

### Professional and Postgraduate Training

This practitioner has not completed any graduate medical education.

## 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 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
INTERNATIONAL CHIROPRACTIC ASSOCIATION	FP - FAMILY PRACTICE	
AMERICAN CHIROPRACTIC ASSOCIATION	FP - FAMILY PRACTICE	

## Financial Responsibility

### Financial Responsibility

I have obtained and will maintain professional liability coverage in an amount not less than \$100,000 per claim with a minimum annual aggregate of at least \$300,000 from an authorized insurer as defined under section 624.09, F.S., from an eligible surplus lines insurer as defined under s. 626.914(2), F.S., from the Joint Underwriting Association established under s.627.351(4), 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
UNLAWFUL SOLICITATION	05/01/1996	PINELLAS COUNTY FL	NO	NOT CORROBORATED	
FRAUD-INSURANCE CLAIM	02/18/1998	PINELLAS COUNTY SHERIFF'S OFFICE	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:

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 \$5,000.00 Within last 10 years.**

This profession is not required by F.S., to report bankruptcy and liability claims.

**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:

- AMERICAN COLLEGE OF SPORTS MEDICINE
- AMERICAN ACADEMY OF PAIN MANAGEMENT
- WHO'S WHO IN EXECUTIVES & PROFESSIONALS

**Professional or Community Service Awards**

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

Community Service/Award/Honor	Organization
OUTSTANDING YOUNG MEN OF AMERICA	
WHO'S WHO AMONG YOUNG AMERICAN PROFESSIONALS	
WHO'S WHO AMONG RISING YOUNG AMERICANS	
DIPLOMATE	NATIONAL BOARD OF CHIROPRACTIC EXAMINERS
WHO'S WHO IN THE SOUTH AND SOUTHEAST	
2000 NOTEABLE AMERICAN MEN	
PERSONALITIES OF AMER/FOR CONTRIBUTION TO PUBLIC HLTH CARE	

**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.bootranchchiro.com

**Languages Other Than English**

This practitioner has not indicated that any languages other than English are used to communicate with patients, or that any translation service is available for patients, at his/her primary place of practice.

**Other Affiliations**

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

Affiliation
AMERICAN RUNNING & FITNESS ASSOCIATION
FLORIDA CHIROPRACTIC ASSOCIATION
FLORIDA CHIROPRACTIC SOCIETY
FOUNDATION FOR CHIROPRACTIC EDUCATION & RESEARCH
LIFE UNIV., SCHOOL OF CHIROPRACTIC, ALUMNI ASSOCIATION
MICHIGAN CHIROPRACTIC COUNCIL
MICHIGAN CHIROPRACTIC SOCIETY
MICHIGAN STATE UNIVERSITY, ALUMNI ASSOCIATION
PINELLAS COUNTY CHIROPRACTIC SOCIETY