



## SCOTT BARRETT SELLINGER M.D.

License Number: ME51896

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/1991
License Expiration	01/31/2026
Date	

## General Information

### Primary Practice Address

SCOTT BARRETT SELLINGER M.D.  
2000 CENTRE POINTE BLVD  
TALLAHASSEE, FL 32308

### 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
TALLAHASSEE MEMORIAL HOSPITAL	TALLAHASSEE	FLORIDA
CAPITAL REGIONAL MEDICAL CENTER	TALLAHASSEE	FLORIDA
SOUTHEASTERN SURGERY CENTER	TALLAHASSEE	FLORIDA

### Email Address

Please contact at: [nancy.fabiano@auihealth.com](mailto:nancy.fabiano@auihealth.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
GEORGIA	MD

### 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
UNIVERSITY OF FLORIDA	MD		01/01/1986

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
UNIVERSITY OF FLORIDA AFFILIATED HOSPITALS	INTERNSHIP	GS - SURGERY		***	FLORIDA	07/01/1986	06/30/1987
UNIVERSITY OF FLORIDA AFFILIATED HOSPITALS	RESIDENCY	GS - SURGERY		***	FLORIDA	07/01/1987	06/30/1988
SHANDS HOSPITAL AT UNIVERSITY OF FLORIDA	RESIDENCY	U - UROLOGY		****	FLORIDA	07/01/1988	06/30/1991

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 currently holds faculty appointments at the following medical/health related institutions of higher learning:

Title	Institution	City	State
COURTESY CLINICAL ASSISTANT PROFESSOR	UNIVERSITY OF FLORIDA COLLEGE OF MEDICIN	GAINESVILLE	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 UROLOGY	U - UROLOGY	

Financial Responsibility

Financial Responsibility

I have hospital staff privileges and I have 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, F. S., from a surplus lines insurer as defined under s. 626.914(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 \$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:  
SURGICAL CASE REVIEW COMM,'93-94/TALLAHASSEE COMM HOSPITAL  
TISSUE AND TRANSFUSION COMM,1994/TALLAHASSEE COMM HOSPITAL  
PHARMACY & THERAPEUTICS COMM,'95/TALLAHASSEE COMM HOSPITAL  
EXECUTIVE COMM,'97-98/FLORIDA UROLOGICAL ASSOCIATION  
EXECUTIVE COMM SURGERY,'93-PR./TALLAHASSEE MEMORIAL HOSP.  
CHAIR OF UROLOGY 1993-PRES TALLAHASSEE MEMORIAL HOSPITAL  
Surgical Case Review Committee / Tallahassee Mem. 99-00  
Blood Utilization Committee / Tallahassee Memorial 92-05  
Chief of Urology / Tallahassee Memorial 93-98  
Executive Committee Surgery 1993-1995

**Professional or Community Service Awards**

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

Community Service/Award/Honor	Organization
	FLORIDA MEDICAL POLITICAL ACTION COMMITTEE (FLAMPAC)
	CHILDREN FIRST COMMITTEE (1994)

Community Service/Award/Honor	Organization
MEDICAL EDITOR,1993-95	WTXL CHANNEL 27
HOST "THE COUNTRY DOCTOR" (1992)	WHKX RADIO IN TALLAHASSEE,FL
WITCO CHEMICAL COMPANY AWARD	SYRACUSE UNIVERSITY 1980
AMERICAN CHEMICAL SOCIETY AWARD	SYRACUSE,UNIVERSITY 1981
AMERICAN INSTITUTE OF CHEMISTS AWARD	SYRACUSE,UNIVERSITY 1982

### Publications

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

Title	Publication	Date
INSULIN BINDING IN FOUR REGIONS OF DEVELOPING RAT BRAIN	JOURNAL NEUROCHEMISTRY	01/01/1984

### Professional Web Page

WWW.ADVANCEDUROLOGYINSTITUTE.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.

SPANISH

### Other Affiliations

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

Affiliation
AMERICAN COLLEGE OF SURGEONS
AMERICAN UROLOGICAL ASSOCIATION
CAPITAL MEDICAL SOCIETY
FLORIDA MEDICAL ASSOCIATION
FLORIDA UROLOGICAL SOCIETY
SOUTHEASTERN SECTION OF/AMERICAN UROLOGICAL ASSOCIATION