FRANK I SINGLETON MD

License Number: ME53339

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 07/01/1979
License Expiration 01/31/2027

Date

General Information

Primary Practice Address

FRANK I SINGLETON MD UNIVERSITY OF MIAMI HOSPITAL 1400 NW 12TH AVENUE MIAMI, FL 33125

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
JACKSON SOUTH COMMUNITY HOSPITAL	MIAMI	FLORIDA
JACKSON NORTH MEDICAL CENTER	MIAMI	FLORIDA
KENDALL REGIONAL MEDICAL CENTER	MIAMI	FLORIDA
JACKSON MEMORIAL HOSPITAL	MIAMI	FLORIDA
UNIVERSITY OF MIAMI HOSPITAL	MIAMI	FLORIDA
MERCY HOSPITAL INC.	MIAMI	FLORIDA
AVENTURA HOSPITAL AND MEDICAL CENTER	MIAMI	FLORIDA
CORAL GABLES HOSPITAL	MIAMI	FLORIDA

Email Address

Please contact at: drfranksingleton@gmail.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NEW YORK	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
THE CITADEL	BS	8/1/1968 - 8/1/1972	08/01/1972
UNIVERSIDAD CENTRAL DEL ESTE	MD	3/1/1973 - 5/25/1977	06/30/1979

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		Other Specialty		State	Dates Attended	Dates Attended
Program Name	Program Type	Specialty Area	Other Specialty Area	City	Country		To
AQUADILLA DISTRICT HOSPITAL	INTERNSHIP	OTHER	ROTATING INTERNSHIP	AGUADILLA	PUERTO RICO	07/01/1977	06/30/1978
DIAGNOSIS AND TREATMENT CENTER	OTHER PROGRAM	EM - EMERGENCY MEDICINE	YEAR OF PUBLIC SERVICE	SAN SEBASTIAN		07/01/1978	06/30/1979
PONCE UNIVERSITY HOSPITAL	RESIDENCY	IM - INTERNAL MEDICINE		PONCE	PUERTO RICO	07/01/1979	06/30/1982
INTERFAITH MED CTR BROOKLYN JEWISH HOSPITAL	FELLOWSHIP	IM - HEMATOLOGY		BROOKLYN	NEW YORK	07/01/1982	06/30/1983
ROSWELL PARK CANCER INSTITUTE		IM - ONCOLOGY		BUFFALO	NEW YORK	07/01/1983	06/30/1985
INTERFAITH MED CTR BROOKLYN JEWISH HOSPITAL	FELLOWSHIP	IM - HEMATOLOGY		BROOKLYN	NEW YORK	07/01/1985	06/30/1986
ROSWELL PARK CANCER INSTITUTE	OTHER PROGRAM	IM - ONCOLOGY	BREAST CANCER POST-FELLOWSHIP ROTATION	BUFFALO	NEW YORK	07/01/1986	10/31/1986
ROSWELL PARK CANCER INSTITUTE	FELLOWSHIP	OTHER	THORACIC ONCOLOGY	BUFFALO	NEW YORK	11/01/1986	10/31/1987
ROSWELL PARK CANCER INSTITUTE	FELLOWSHIP	PTH - BLOOD BANKING/TRANSFUSION MEDICINE		BUFFALO	NEW YORK	01/16/1990	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
VOLUNTARY ASSOCIATE PROFESSOR OF FAMILY MEDICINE	UNIVERSITY OF MIAMI SCHOOL OF MEDICINE	MIAMI	FLORIDA
VOLUNTARY ASSISTANT PROFESSOR OF FAMILY MEDICINE AND COMMUNI	UNIVERSITY OF MIAMI SCHOOL OF MEDICINE	MIAMI	FLORIDA
CLINICAL ASSISTANT PROFESSOR DEPARTMENT OF MEDICINE	E STATE UNIVERSITY OF NEW YORK AT BUFFALO	BUFFALO	NEW YORK
VOLUNTARY ASSOCIATE PROFESSOR OF MEDICINE	UNIVERSITY OF MIAMI SCHOOL OF MEDICINE	MIAMI	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 INTERNAL MEDICINE	IM - ONCOLOGY	
AMERICAN BOARD OF INTERNAL MEDICINE	IM - INTERNAL MEDICINE	

Financial Responsibility

Financial Responsibility

Financial Exemption

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: COMMITTEE ON CANCER JACKSON HEALTH SYSTEM 2011

Professional or Community Service Awards

This practitioner has not provided any professional or community service activities, honors, or awards.

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

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

FELLOW AMERICAN COLLEGE OF PHYSICIANS

MEMBER AMERICAN SOCIETY OF CLINICAL ONCOLOGY

MEMBER AMERICAN SOCIETY OF HEMATOLOGY

MEMBER ASSN OF MILITARY SURGEONS OF THE US

MEMBER EUROPEAN SOCIETY FOR MEDICAL ONCOLOGY

MEMBER USAF RESERVE FLIGHT SURGEONS ASSN