



ROBERTO FABIAN TUCHMAN MD

License Number: ME57485

Profession Medical Doctor
License Status Retired/
Year Began Practicing Not Provided
License Expiration 01/31/2023
Date

General Information

Primary Practice Address

ROBERTO FABIAN TUCHMAN MD
5731 THOROUGHbred LANE
SOUTHWEST RANCHES, FL 33330

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
BROWARD GENERAL MEDICAL CENTER	FT LAUDERDALE	FLORIDA
MIAMI CHILDREN'S HOSPITAL	MIAMI	FLORIDA

Email Address

Please contact at: rtuchman@me.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NEW YORK STATE	MD MEDICINE

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 not indicated whether he/she has submitted payment of the assessment.

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
NEW YORK UNIV.SCHOOL OF MEDICI	M.D.	1/1/1977 - 1/1/1981	01/30/1981
HAMPSHIRE COLLEGE	B.A.	1/1/1973 - 1/1/1977	01/30/1977

Other Health Related Degrees

The practitioner did not provide this mandatory information.

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
BOSTON CITY HOSPITAL	INTERNSHIP	PD - PEDIATRICS		BOSTON	UNITED STATES	01/01/1981	01/01/1982
BOSTON CITY HOSPITAL	RESIDENCY	PD - PEDIATRICS		BOSTON	UNITED STATES	01/01/1982	01/01/1983
MONTEFIORE MEDICAL CENTER	RESIDENCY	PD - PEDIATRICS		BOSTON	UNITED STATES	01/01/1983	01/01/1984
ALBERT EINSTEIN COLLEGE OF MED MONTEFIORE MED CTR	RESIDENCY	N - NEUROLOGY		NEW YORK	UNITED STATES	01/01/1986	01/01/1989
ALBERT EINSTEIN COLLEGE OF MED MONTEFIORE MED CTR	FELLOWSHIP	N - CHILD NEUROLOGY		NEW YORK	UNITED STATES	01/01/1986	01/01/1989
ALBERT EINSTEIN COLLEGE OF MED MONTEFIORE MED CTR	FELLOWSHIP	PEDIATRIC NEUROLOGY	EPILEPSY AND CLINICAL NEUROPHYSIOLOGY	NEW YORK	UNITED STATES	01/01/1989	01/01/1990

Academic Appointments

Graduate Medical Education

The practitioner did not provide this mandatory information.

Academic Appointments

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

Title	Institution	City	State
ASSOCIATE PROFESSOR OF NEUROLOGY	UNIVERSITY OF MIAMI SCHOOL OF MEDICINE	MIAMI	FLORIDA
CLINICAL PROFESSOR NEUROLOGY AND PSYCHIATRY	FLORIDA INTERNATIONAL UNIV. COLLEGE 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 PSYCHIATRY AND NEUROLO	N - CHILD NEUROLOGY	
AMERICAN BOARD OF PEDIATRICS	PD - PEDIATRICS	01/01/1986

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.

The practitioner did not provide this mandatory information.

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

Publications

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

Title	Publication	Date
OPSOCLONUS-MYOCLONUS SYNDROME:CORRELATION OF RADIOGRAPH...	NEURORADIOLOGY	01/01/1989
CARBON MONOXIDE POISONING:BILATERAL LESIONS IN THE THAL...	PEDIATRIC RADIOLOGY	01/01/1990
AUTISM: DELINEATING THE SPECTRUM	INTERNATIONAL PEDIATRICS	01/01/1991
JOURNAL OF CHILD NEUROLOGYANNALS OF PHARMACOLOGY		

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
MIAMI CHILDREN HOSPITAL
STAFF PRIV