



GREGORY FRANCIS BONNER MD

License Number: ME57540

Profession	Medical Doctor
License Status	Retired/
Year Began Practicing	01/01/1985
License Expiration Date	01/31/2024
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes

General Information

Primary Practice Address

GREGORY FRANCIS BONNER MD
CORAL RIDGE GASTRO ASSOC, LLC
2021 E COMMERCIAL BLVD.
FT LAUDERDALE, FL 33308

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

This practitioner currently holds staff privileges at the following hospital/medical/health institutions:

Institution Name	City	State
CLEVELAND CLINIC HOSPITAL	FT LAUDERDALE	FLORIDA
HOLY CROSS HOSPITAL, INC.	FT LAUDERDALE	FLORIDA

Email Address

Please contact at: gregorybonner@bellsouth.net

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
CONNECTICUT	MD
PENNSYLVANIA	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 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
UNIVERSITY OF PITTSBURGH MAIN	MD		01/01/1983

Other Health Related Degrees

This practitioner has completed the following other health related degrees:

School/University	City	State/Country	Dates Attended From	Dates Attended To	Degree Title
MILLERSVILLE UNIVERSITY	MILLERSVILLE	PENNSYLVANIA	01/01/0001	01/01/1978	BS BIOLOGY

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
THOMAS JEFFERSON UNIVERSITY	INTERNSHIP	IM - INTERNAL MEDICINE		***	PENNSYLVANIA	07/01/1983	06/30/1984
THOMAS JEFFERSON UNIVERSITY	RESIDENCY	IM - INTERNAL MEDICINE		***	PENNSYLVANIA	07/01/1984	06/30/1987
YALE NEW HAVEN HOSPITAL	RESIDENCY	IM - GASTROENTEROLOGY		***	CONNECTICUT	07/01/1987	06/30/1990

Academic Appointments

Graduate Medical Education

This practitioner has 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
AMERICAN BOARD OF INTERNAL MEDICINE	IM - GASTROENTEROLOGY	11/07/1989
AMERICAN BOARD OF INTERNAL MEDICINE	IM - INTERNAL MEDICINE	09/10/1986

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.

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:

The practitioner did not provide this mandatory information pertaining to final disciplinary action taken by a specialty board within the last 10 years

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](#).

The following liability actions have been reported as required under section 456.049, F. S., within the previous 10 years:

Incident Date	County	Judicial Case	Settlement Date	Amount	Policy Amount
12/31/2015	BROWARD	CACE-18-009677	02/10/2023	\$250,000.00	\$250,000.00
05/17/2020	BROWARD	CACE-22-010894	04/19/2024	\$250,000.00	\$250,000.00

Optional Information

Committees/Memberships

This practitioner has an affiliation with the following committees:
CHAIRMAN/ENDOSCOPY COMMITTEE/CLEVELAND CLINIC FLORIDA
LIBRARY COMMITTEE/CLEVELAND CLINIC FLORIDA
CHAIRMAN/INSTITUTIONAL REVIEW BOARD/CLEVELAND CLINIC FLORI
CHAIRMAN/RESEARCH PROGRAMS COMMITTEE/CLEVELAND CLINIC/FL

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
POSTDOCTORAL RESEARCH FELLOWSHIP	AMERICAN LIVER FOUNDATION
INTERN OF YEAR 1983-1984, DEPARTMENT OF INTERNAL MEDICINE	THOMAS JEFFERSON UNIVERSITY

Community Service/Award/Honor	Organization
CHAPTER MEDICAL ADVISOR	CROHN'S COLITIS FOUNDATION OF AMERICA/GOLD COAST CHAPTER

Publications

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

Title	Publication	Date
MEDICAL MANAGEMENT OF INFLAMMATORY BOWEL DISEASE.	AMERICAN FAMILY PHYSICIAN	01/01/1998
BILIARY BILE ACIDS IN PRIMARY BILIARY CIRRHOSIS: EFFECTS	HEPATOLOGY	01/01/1999
TOLERANCE OF NONSTEROIDAL ANTIINFLAMMATORY DRUGS IN PATIEN	AMERICAN JOURNAL OF GASTROENTEROLOGY	
GENDER BASED DIFFERENCES IN SYMPTOMS OF PATIENTS WITH	AMERICAN JOURNAL OF GASTROENTEROLOGY	01/01/1998
LIVING WITH INFLAMMATORY BOWEL DISEASE-A GUIDE FOR PATIENT	AMERICAN FAMILY PHYSICIAN	
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 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 ASSOCIATION FOR THE STUDY OF LIVER DISEASE
AMERICAN COLLEGE OF GASTROENTEROLOGY
AMERICAN COLLEGE OF PHYSICIANS
AMERICAN GASTROENTEROLOGICAL ASSOCIATION
AMERICAN MEDICAL ASSOCIATION
CROHN'S AND COLITIS FOUNDATION OF AMERICA