



GUILLERMO ANTONIO PASARIN

License Number: ME59295

Profession	Medical Doctor
License Status	CLEAR/Active
Year Began Practicing	01/01/1993
License Expiration Date	01/31/2027
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

General Information

Primary Practice Address

GUILLERMO ANTONIO PASARIN
2864 NE 24TH PLACE
N/A
FT LAUDERDALE, FL 33305

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
BROWARD GENERAL MEDICAL CENTER	FORT LAUDERDALE	FLORIDA
CORAL SPRINGS MEDICAL CENTER	CORAL SPRINGS	FLORIDA
FLORIDA MEDICAL CENTER	FORT LAUDERDALE	FLORIDA
HOLY CROSS HOSPITAL, INC.	FORT LAUDERDALE	FLORIDA
NORTH BROWARD MEDICAL CENTER	POMPANO BEACH	FLORIDA
NORTHWEST MEDICAL CENTER	MARGATE	FLORIDA
PLANTATION GENERAL HOSPITAL	PLANTATION	FLORIDA
UNIVERSITY MEDICAL CENTER	JACKSONVILLE	FLORIDA
WESTSIDE REGIONAL MEDICAL CENTER	PLANTATION	FLORIDA
JACKSON MEMORIAL HOSPITAL	MIAMI	FLORIDA

Email Address

Please contact at: nobrainer2@bellsouth.net

Other State Licenses

This practitioner has not indicated any additional state licensures.

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 MIAMI	MD	8/1/1982 - 5/1/1986	05/01/1986

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
UNIVERSITY OF MIAMI	MIAMI	FLORIDA	08/01/1978	05/01/1982	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
UNIVERSITY OF MIAMI/JACKSON MEMORIAL HOSPITAL	INTERNSHIP	GS - SURGERY		MIAMI	FLORIDA	07/01/1986	06/30/1987
UNIVERSITY OF MIAMI/JACKSON MEMORIAL HOSPITAL	RESIDENCY	NS - NEUROLOGICAL SURGERY		MIAMI	FLORIDA	07/01/1987	06/30/1989
UNIVERISTY OF MIAMI/JACKSON MEMORIAL HOSPITAL	OTHER PROGRAM	NS - NEUROLOGICAL SURGERY		MIAMI	FLORIDA	07/01/1989	06/01/1993

Academic Appointments

Graduate Medical Education

This practitioner has 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 CLINICAL ASSISTANT PROFESSOR, NEUROLOGICAL SURG	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 NEUROLOGICAL SURGERY	NS - NEUROLOGICAL SURGERY	

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
01/31/2020			01/26/2022	\$550,000.00	\$3,000,000.00

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

Community Service/Award/Honor	Organization
PRESIDENT'S HONOR ROLL	UNIVERSITY OF MIAMI

Publications

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

Title	Publication	Date
BENIGN HYPERGAMMAGLOBINEMIC PURPURA OF WALDENSTROM	AMERICAN JOURNAL OF MEDICINE	10/01/1986
EMERGENCY ROOM ASSESSMENT AND STABILIZATION:SPINE INJURY	HANDBOOK OF HEAD AND SPINE TRAUMA	01/01/1992
TEMPORAL LOBECTOMY FOR SEIZURES ASSOCIATED WITH A	SURGICAL NEUROLOGY	01/01/1992
POLYMER ADSORPTION ON PLATINUM:CHARACTERISTICS OF CURED LA	14TH CENTRAL REGIONAL MEETING OF THE AMERICAN CHEMICAL SOC	06/01/1982
THIS PRACTITIONER HAS AUTHORED SEVERAL OTHER PUBLICATIONS		

Professional Web Page

<http://www.browardneurosurgeons.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
ALPHA EPSILON DELTA PREMEDICAL HONOR SOCIETY
AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS
AMERICAN MEDICAL ASSOCIATION
AMERICAN MEDICAL STUDENTS ASSOCIATION
CONGRESS OF NEUROLOGICAL SURGEONS
FLORIDA NEUROSURGICAL SOCIETY
HISPANIC AMERICAN MEDICAL STUDENTS ASSOCIATION
INTERAMERICAN COLLEGE OF PHYSICIANS & SURGEONS
NATIONAL BOARD OF MEDICAL EXAMINERS-DIPLOMATE