



FREDERICK JAMES LAUFER

License Number: ME60886

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 01/01/1985
License Expiration 01/31/2028
Date

General Information

Primary Practice Address

FREDERICK JAMES LAUFER
7050 BROOKHOLLOW W DR #4066
HOUSTON, TX 77240

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
HIGHLANDS REGIONAL MEDICAL CENTER	SEBRING	FLORIDA
BARNES KASSON COUNTY HOSPITAL	SUSQUEHANNA	PENNSYLVANIA
EL CENTRO HOSPITAL	EL CENTRO	CALIFORNIA
LIMA MEMORIAL HOSPITAL	LIMA	OHIO
NAPLES COMMUNITY HOSPITAL	NAPLES	FLORIDA
TAYLOR REGIONAL	CAMPBELLSVILLE	KENTUCKY
TWIN LAKES REGIONAL MEDICAL	LETICHFIELD	KENTUCKY
ADVENTIST MEDICAL CENTER-HANFORD	HANFORD	CALIFORNIA
ADVENTIST MEDICAL CENTER-REEDLEY	REEDLEY	CALIFORNIA
ATLANTA MEDICAL CENTER	ATLANTA	GEORGIA

Email Address

Please contact at: fredlaufer@hotmail.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
ALASKA	PHYSICIAN
VIRGINIA	MEDICINE SURGERY
CALIFORNIA	PHYSICIAN AND SURGEON
MASSACHUSETTS	PHYSICIAN
UTAH	PHYSICIAN
KENTUCKY	PHYSICIAN
MARYLAND	PHYSICIAN AND SURGEON

State	Profession
LOUISIANA	PHYSICIAN
NEW MEXICO	PHYSICIAN
IDAHO	PHYSICIAN AND SURGEON
ALABAMA	PHYSICIAN
COLORADO	PHYSICIAN
DISTRICT OF COLUMBIA	PHYSICIAN
GEORGIA	PHYSICIAN
IOWA	PHYSICIAN
ILLINOIS	PHYSICIAN
MICHIGAN	PHYSICIAN
MINNESOTA	PHYSICIAN
NORTH CAROLINA	PHYSICIAN
NEW YORK	PHYSICIAN
OHIO	PHYSICIAN
OKLAHOMA	PHYSICIAN
SOUTH CAROLINA	PHYSICIAN
TENNESSEE	PHYSICIAN
WISCONSIN	PHYSICIAN
WEST VIRGINIA	PHYSICIAN

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
SUNY HEALTH SCIENCE CENTER AT	MD	9/1/1980 - 5/1/1984	05/01/1984

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
MONMOUTH MEDICAL CENTER	INTERNSHIP	IM - INTERNAL MEDICINE		***	NEW JERSEY	07/01/1984	06/30/1985
ENGLEWOOD HOSPITAL	RESIDENCY	IM - INTERNAL MEDICINE		ENGLEWOOD	NEW JERSEY	07/01/1986	06/30/1988
BRONX-LEBANON HOSPITAL	RESIDENCY	DR - DIAGNOSTIC RADIOLOGY		BRONX	NEW YORK	07/01/1988	06/30/1992

Academic Appointments

Graduate Medical Education

The practitioner did not provide this mandatory information.

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 RADIOLOGY	DR - DIAGNOSTIC RADIOLOGY	
AMERICAN BOARD OF INTERNAL MEDICINE	IM - INTERNAL MEDICINE	

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 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 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 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 not provided any national, state, local, county, or professional affiliations.
