THOMAS MARTIN ANDREWS MD

License Number: ME61480

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 01/01/1992
License Expiration 01/31/2026

Date

General Information

Primary Practice Address

THOMAS MARTIN ANDREWS MD 601 5TH STREET SOUTH SUITE C740 SAINT PETERSBURG, FL 33701

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
ALL CHILDREN'S HOSPITAL	ST PETERSBURG	FLORIDA
ST. JOSEPH'S HOSPITAL	TAMPA	FLORIDA
BAYFRONT MEDICAL PLAZA SAME DAY SURGERY	ST. PETERSBURG 'ACTIVE MEDICAL STAFF'	FLORIDA

Email Address

Please contact at: tandrews@pohns.net

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
OHIO	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
MEDICAL COLLEGE OF OHIO AT TOL	MD		01/01/1985
WRIGHT STATE UNIVERSITY	MS	1/1/1979 - 1/1/1981	
OHIO STATE UNIVERSITY	BS	1/1/1976 - 1/1/1979	

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
WRIGHT STATE UNIVERSITY	DAYTON	OHIO	01/01/1979	01/31/1981	MS MICROBIOLOGY

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 HOSPITAL, IN	RESIDENCY	GS - SURGERY		***	OHIO	07/01/1985	06/30/1987
UNIVERSITY HOSPITAL, IN	RESIDENCY	OTO - OTOLARYNGOLOGY		***	OHIO	07/01/1987	06/30/1991
CHILDREN'S HOSPITAL MEDICAL CENTER	RESIDENCY	OTO - PEDIATRIC OTOLARYNGOLOGY		***	OHIO	07/01/1991	06/30/1992
UNIVERSITY OF CINCINNAT	RESIDENCY	OTO - OTOLARYNGOLOGY	HEAD AND NECK SURGERY	CINCINNATE	OHIO	01/01/1987	01/01/1991
GREAT ORMAN ST HOSPITAL FOR SICK CHILDREN	FELLOWSHIP	OTO - PEDIATRIC OTOLARYNGOLOGY		LONDON	UNITED KINGDOM	01/01/1992	01/01/0001

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
CLINICAL ASSISTANT PROFESSOR/DEPARTMENT OF OTOLARYNGOLOGY	UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M	TAMPA	A FLORIDA
CLINICAL ASSISTANT PROFESSOR/DEPARTMENT OF PEDIATRICS	UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M	TAMPA	A 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 OTOLARYNGOLOGY	OTO - OTOLARYNGOLOGY	

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 an affiliation with the following committees: COMMITTEE ON PEDIATRIC OTOLARYNGOLOGY, AAO-HNS

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
SPECIAL EXPERT WITNESS	AGENCY FOR HEALTHCARE ADMINISTRATION STATE OF FLORIDA
CHAIRMAN 1991-92	RESIDENT PHYSICIAN SECTION OF AMERICAN MEDICAL ASSOCIATION
PRESIDENT 1994-96	GULFCOAST ENT SOCIETY
"BUCKEYE" OUTSTANDING STUDENT LEADER	OHIO STATE UNIVERSITY
BOARD VICE PRESIDENT, 1979-1980	CIRCLE-K INTERNATIONAL
PRESIDENT AND CEO, 1980-1981	CIRCLE K INTERNATIONAL
OUTSTANDING YOUNG MEN IN AMERICA 1979-1983	

INTERNATIONAL YOUTH IN ACHIEVEMENT 1981

Publications

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

Title	Publication	Date
ABNORMALITIES OF THE BONY THORAX CAUSING TRACHEOBRONCIAL	INT. JOURNAL PEDIATRIC OTOLARYNOLOGY	01/01/1990
ALTERNATIVE MANAGEMENT FOR LARYNGEAL AND TRACHEOBROCHIAL	OTOLARYNGOL HEAD/NECK SURGERY	01/01/1990
MEMINGIOMA OF THE PARANASAL SINUS	ARCHIVES OF OTOLARYNGOLOGY HEAD/NECK SURGERY	01/01/1991
COMPLICATIONS OF ADENOTONSILLECTOMY IN CHILDREN UNDER 3	AMERICAN JOURNAL OF OTOLARYNGOLOGY	01/01/1991
THE ROLE OF COMPUTED TOMOGRAPHY IN THE DIAGNOSOS OF SUBPRE	CLINICAL PEDIATRICS	01/01/1992

Professional Web Page

www.pediatric-ent.com

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:

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Affiliation	
AMERCIAN SOCIETY OF PEDIATRIC OTOLARYNGOLOGY	
AMERICAN ACADEMY OF OTOLARYNGOLOGY/HEAD AND NECK SURGERY	
AMERICAN ACADEMY OF PEDIATRICS, SECTION OF OTOLARYNGOLOGY	
AMERICAN COLLEGE OF SURGEONS	
AMERICAN MEDICAL ASSOCIATION	
BRITISH ASSOCIATION OF PEDIATRIC OTOLARYNGOLOGY	
FLORIDA CLEFT PALATE ASSOCIATION	
FLORIDA SOCIETY OF OTOLARYNGOLOGY/HEAD AND NECK SURGERY	
HILLSBOROUGH COUNTY PEDIATRIC SOCIETY	
PINELLAS COUNTY MEDICAL SOCIETY	
PINELLAS COUNTY PEDIATRIC SOCIETY	
SOCIETY FOR EAR NOSE AND THROAT ADVANCES IN CHILDREN	