



LAURA E MICHAEL

License Number: OS6874

Profession Osteopathic Physician
License Status Clear/Active
Year Began Practicing 01/01/1993
License Expiration 03/31/2026
Date

General Information

Primary Practice Address

LAURA E MICHAEL
11390 OLD ROSWELL ROAD
SUITE 100
ALPHARETTA, GA 30009

Medicaid

This practitioner DOES participate in the Medicaid program.

Staff Privileges

This practitioner has not indicated any staff privileges.

Email Address

Please contact at: ec.credentialing@bsci.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
ALABAMA	DOCTOR OF OSTEOPATHY
ALASKA	DOCTOR OF OSTEOPATHY
ARIZONA	DOCTOR OF OSTEOPATHY
ARKANSAS	DOCTOR OF OSTEOPATHY
CALIFORNIA	DOCTOR OF OSTEOPATHY
COLORADO	DOCTOR OF OSTEOPATHY
CONNECTICUT	DOCTOR OF OSTEOPATHY
DISTRICT OF COLUMBIA	DOCTOR OF OSTEOPATHY
FLORIDA	DOCTOR OF OSTEOPATHY
GEORGIA	DOCTOR OF OSTEOPATHY
HAWAII	DOCTOR OF OSTEOPATHY
IDAHO	DOCTOR OF OSTEOPATHY
ILLINOIS	DOCTOR OF OSTEOPATHY
INDIANA	DOCTOR OF OSTEOPATHY
KANSAS	DOCTOR OF OSTEOPATHY
LOUISIANA	DOCTOR OF OSTEOPATHY
MARYLAND	DOCTOR OF OSTEOPATHY
MASSACHUSETTS	DOCTOR OF OSTEOPATHY

State	Profession
MISSISSIPPI	DOCTOR OF OSTEOPATHY
MISSOURI	DOCTOR OF OSTEOPATHY
NEBRASKA	DOCTOR OF OSTEOPATHY
NEVADA	DOCTOR OF OSTEOPATHY
NEW HAMPSHIRE	DOCTOR OF OSTEOPATHY
NEW JERSEY	DOCTOR OF OSTEOPATHY
NEW MEXICO	DOCTOR OF OSTEOPATHY
NEW YORK	DOCTOR OF OSTEOPATHY
NORTH CAROLINA	DOCTOR OF OSTEOPATHY
OHIO	DOCTOR OF OSTEOPATHY
OKLAHOMA	DOCTOR OF OSTEOPATHY
RHODE ISLAND	DOCTOR OF OSTEOPATHY
SOUTH CAROLINA	DOCTOR OF OSTEOPATHY
TENNESSEE	DOCTOR OF OSTEOPATHY
TEXAS	DOCTOR OF OSTEOPATHY
UTAH	DOCTOR OF OSTEOPATHY
VIRGINIA	DOCTOR OF OSTEOPATHY
WEST VIRGINIA	DOCTOR OF OSTEOPATHY
WYOMING	DOCTOR OF OSTEOPATHY

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
NOVA SE UNIVERSITY HEALTH	DO	8/1/1989 - 6/1/1993	06/01/1993

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
INDIANA STATE UNIVERSITY	TERRE HAUTE	INDIANA	08/01/1974	06/01/1978	BS - MEDICAL TECHNOLOGY

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 FLORIDA COLLEGE OF	RESIDENCY	PTH - PATHOLOGY- ANATOMIC AND CLINICAL		GAINESVILLE	FLORIDA	07/01/1994	06/30/1998
UNIVERSITY OF FLORIDA COLLEGE OF SPECIALITY	OTHER PROGRAM	OTHER	GASTROINTESTINAL/LIVER PATHOLOGY	GAINESVILLE	FLORIDA	07/01/1998	06/30/1999

Academic Appointments

Graduate Medical Education

This practitioner has not 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 PATHOLOGY	PTH - PATHOLOGY	
AMERICAN OSTEOPATHIC BOARD OF PATHOLOGY	PTH - PATHOLOGY	

Financial Responsibility

Financial Responsibility

I do not have hospital staff privileges and I have obtained and maintain professional liability coverage in an amount not less than \$100,000 per claim, with a minimum annual aggregate of not less than \$300,000 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 selfinsurance as provided in s. 627.367, 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:

PRESIDENT OF AMERICAN OSTEOPATHIC COLLEGE OF PATHOLOGISTS

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

www.endochoice.com/pathology

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 OSTEOPATHIC ASSOCIATION
AMERICAN OSTEOPATHIC COLLEGE OF PATHOLOGISTS
COLLEGE OF AMERICAN PATHOLOGY
ROGER HAGGITT GASTROINTESTINAL SOCIETY