



## LAURA WASYLENKO BANCROFT

License Number: ME65440

Profession Medical Doctor  
License Status CLEAR/Active  
Year Began Practicing 01/01/1997  
License Expiration 01/31/2027  
Date

## General Information

### Primary Practice Address

LAURA WASYLENKO BANCROFT  
512 NOKOMIS AVE S  
LAURABANCROFTMD@GMAIL.COM  
VENICE, FL 34285

### 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
BAYFRONT MEDICAL CENTER	VENICE	FLORIDA

### Email Address

Please contact at: [lbancroft@raverad.com](mailto:lbancroft@raverad.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NORTH CAROLINA	MD FULL AND UNRESTRICTED
FLORIDA	MEDICAL DOCTOR

### 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 MISSOURI	BA/MD	9/1/1986 - 5/1/1992	05/01/1992

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
UNIVERSITY OF MIAMI/ JACSON MEMORIAL HOSPITAL	RESIDENCY	DR - DIAGNOSTIC RADIOLOGY		MIAMI	FLORIDA	07/01/1992	06/30/1996
MAYO CLINIC	FELLOWSHIP	DR - MUSCULOSKELETAL RADIOLOGY		JACKSONVILLE	FLORIDA	07/01/1996	06/30/1997

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 RADIOLOGY	RADIOLOGY - DIAGNOSTIC	

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:

- RADIOLOGIC SOCIETY OF NORTH AMERICA
- AMERICAN ROENTGEN RAY SOCIETY
- INTERNATIONAL SKELETAL SOCIETY
- AMERICAN COLLEGE OF RADIOLOGY
- SOCIETY OF SKELETAL RADIOLOGY
- ASSOCIATION OF UNIVERSITY RADIOLOGISTS
- INTERNATIONAL SOCIETY OF MAGNETIC RESONANCE IN MEDICINE
- FLORIDA RADIOLOGIC SOCIETY

**Professional or Community Service Awards**

This practitioner has not provided any professional or community service activities, honors, or awards.

**Publications**

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

Title	Publication	Date
CYCLOPS LESIONS THAT OCCUR IN THE ABSENCE OF PRIOR ANTERIOR	RADIOGRAPHICS	11/01/2007

Title	Publication	Date
COMPARTMENTAL ANATOMY RELEVANT TO BIOPSY PLANNING	SEMIN MUSCULOSKELET RADIOL	03/01/2007
MR IMAGING OF THE KNEE INCIDENTAL OSSEOUS LESIONS	MAGN RESON IMAGING CLIN N AM	02/01/2007
MR IMAGING OF INFECTIOUS PROCESSES OF THE KNEE	MAGN RESON IMAGING CLIN N AM	02/01/2007
COMPLICATIONS OF SPINAL INSTRUMENTATION	RADIOGRAPHICS	05/01/2007
EVALUATION OF COLLATERAL LIGAMENT INJURIES OF THE METACARPOP	CURR PROBL DIAGN RADIOL	01/01/2007
MRI APPEARANCE OF MYOCUTANEOUS FLAPS COMMONLY USED IN ORTHOP	AJR AM J ROENTGENOL	09/01/2006
BENIGN FATTY TUMORS CLASSIFICATION CLINICAL COURSE IMAGIN	SKELETAL RADIOL	10/01/2006
INJURIES OF THE FINGERS AND THUMB IN THE ATHLETE	CLIN SPORTS MED	07/01/2006
BONE GRAFT MATERIALS AND SYNTHETIC SUBSTITUTES	RADIOL CLIN NORTH AM	05/01/2006
POSTOPERATIVE IMAGING OF THE SHOULDER	RADIOL CLIN NORTH AM	05/01/2006
IMAGING CHARACTERISTICS OF BONE GRAFT MATERIALS	RADIOGRAPHICS	03/01/2006
MR IMAGING OF TUMORS AND TUMOR-LIKE LESIONS OF THE HIP	MAGN RESON IMAGING CLIN N AM	11/01/2005
OVERUSE INJURIES OF THE UPPER EXTREMITY IN THE COMPETITIVE A	CURR PROBL DIAGN RADIOL	07/01/2005
PRINCIPLES OF TUMOR IMAGING	EUR J RADIOL	12/01/2005
PRINCIPLES OF BONE AND SOFT TISSUE IMAGING	HAND CLIN	05/01/2004
CYSTS GEODES AND EROSIONS	RADIOL CLIN NORTH AM	01/01/2004
IMAGING CHARACTERISTICS OF SPINDLE CELL LIPOMA	AJR AM J ROENTGENOL	11/01/2003
MALIGNANT FATTY TUMORS CLASSIFICATION CLINICAL COURSE IMA	SKELETAL RADIOL	09/01/2003
WHIPPLE'S DISEASE WITH DESTRUCTIVE ARTHRITIS ABDOMINAL LYMP	J RHEUMATOL	06/01/2003
MR IMAGING OF FIBROMA OF THE TENDON SHEATH	AJR AM J ROENTGENOL	05/01/2003
POSTGRADUATE MUSCULOSKELETAL FELLOWSHIP TRAINING IN THE UNIT	SKELETAL RADIOL	06/01/2003
IMAGING CHARACTERISTICS OF CYSTIC ADVENTITIAL DISEASE OF THE	AJR AM J ROENTGENOL	03/01/2003
SOFT TISSUE TUMORS OF THE LOWER EXTREMITIES	RADIOL CLIN NORTH AM	09/01/2002
PRIMARY BONE TUMORS OF THE LOWER EXTREMITIES	RADIOL CLIN NORTH AM	09/01/2002
IMAGING OF FATTY TUMORS DISTINCTION OF LIPOMA AND WELL-DIFF	RADIOLOGY	07/01/2002
INTRAMUSCULAR MYXOMA CHARACTERISTIC MR IMAGING FEATURES	AJR AM J ROENTGENOL	05/01/2002
WOODEN FOREIGN BODIES IMAGING APPEARANCE	AJR AM J ROENTGENOL	03/01/2002
FRACTURE INTERPRETATION USING ELECTRONIC PRESENTATION A COM	J DIGIT IMAGING	02/01/2000
IMAGING OF THE TENDONS ABOUT THE PELVIS	AJR AM J ROENTGENOL	08/24/2010
BONE MARROW CHANGES ON MRI SELF-ASSESSMENT MODULE	AJR AM J ROENTGENOL	09/01/2009
IMAGING SPECTRUM OF BITES STINGS AND THEIR COMPLICATIONS	AJR AM J ROENTGENOL	09/01/2009
HISTORY OF ARTHROGRAPHY	RADIOL CLIN NORTH AM	05/01/2009

Title	Publication	Date
BENIGN AND MALIGNANT SOFT-TISSUE TUMORS POSTTREATMENT MR IM	RADIOGRAPHICS	01/01/2009
IMAGING OF SOFT TISSUE LESIONS OF THE FOOT AND ANKLE	RADIOL CLIN NORTH AM	11/01/2008
POSTOPERATIVE IMAGING OF THE TOTAL ANKLE ARTHROPLASTY	RADIOL CLIN NORTH AM	11/01/2008
MAGNETIC RESONANCE IMAGING OF THE SACRAL PLEXUS AND PIRIFORM	SKELETAL RADIOL	08/01/2008
MR IMAGING OF THE DIABETIC FOOT	MAGN RESON IMAGING CLIN N AM	02/01/2008
POSTOPERATIVE EVALUATION OF THE TOTAL ANKLE ARTHROPLASTY	AJR AM J ROENTGENOL	04/01/2008
IMAGING APPEARANCE OF DIFFUSE NEUROFIBROMA	AJR AM J ROENTGENOL	03/01/2008
HIP ULTRASOUND	SEMIN MUSCULOSKELET RADIOL	06/01/2007
MR IMAGING OF THE KNEE INCIDENTAL OSSEOUS LESIONS	RADIOL CLIN NORTH AM	11/01/2007
MR IMAGING OF INFECTIOUS PROCESSES OF THE KNEE	RADIOL CLIN NORTH AM	11/01/2007

### 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.