



## JORGE LUIS GOMEZ

License Number: ME67794

Profession Medical Doctor  
License Status CLEAR/Active  
Year Began Practicing 01/01/1990  
License Expiration 01/31/2027  
Date

## General Information

### Primary Practice Address

JORGE LUIS GOMEZ  
6200 SUNSET DRIVE  
SUITE 301  
MIAMI, FL 33143

### 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
MERCY HOSPITAL INC.	MIAM	FLORIDA
SOUTH MIAMI HOSPITAL	MIAMI	FLORIDA
BAPTIST HOSPITAL OF MIAMI	MIAMI	FLORIDA
KENDALL REGIONAL MEDICAL CENTER	KENDALL	FLORIDA
MOUNT SINAI MEDICAL CENTER	MIAMI BEACH	FLORIDA
HIALEAH HOSPITAL	HIALEAH	FLORIDA
NORTH SHORE HOSPITAL	MIAMI	FLORIDA
WEST KENDALL BAPTIST HOSPITAL	MIAMI	FLORIDA

### Email Address

Please contact at: [gome3733@bellsouth.net](mailto:gome3733@bellsouth.net)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NEW YORK	MEDICAL DOCTOR - NOT ACTIVE

### 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
CENTRAL CARIBBEAN UNIVERSITY	MD	7/1/1986 - 6/30/1990	06/30/1990

## 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
BRONX-LEBANON HOSPITAL	RESIDENCY	OBG - OBSTETRICS AND GYNECOLOGY		BRONX	NEW YORK	07/01/1990	06/30/1994
NEW YORK UNIVERSITY	FELLOWSHIP	OTHER	MATERNAL-FETAL MEDICINE	NEW YORK	NEW YORK	07/07/1994	06/30/1996

# 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 INSTRUCTOR	NEW YORK UNIVERSITY SCHOOL OF MEDICINE	NEW YORK	NEW YORK
VOLUNTARY CLINICAL ASSISTANT PROFESSOR	FLORIDA INTERNATIONAL UNIV. COLLEGE 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 OBSTETRICS & GYNECOLOG	OBG - OBSTETRICS AND GYNECOLOGY	
AMERICAN BOARD OF OBSTETRICS & GYNECOLOG	OTHER	

# 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:  
AMERICAN MEDICAL ASSOCIATION  
AMERICAN CONGRESS OF OBSTETRICIANS AND GYNECOLOGISTS  
AMERICAN INSTITUTE OF ULTRASOUND IN MEDICINE  
SOCIETY FOR MATERNAL-FETAL MEDICINE  
FLORIDA MEDICAL ASSOCIATION

### Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
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Community Service/Award/Honor	Organization
DEAN'S LIST	INTERAMERICAN UNIVERSITY:1984
HONOR PROGRAM	INTERAMERICAN UNIVERSITY:1984-86
OUTSTANDING LAPAROENDOSCOPIC RESIDENT SURGEON	THE SOCIETY OF LAPAROENDOSCOPIC SURGEONS 1993 & 1994
RESIDENT EDUCATION AWARD	BERLEX FOUNDATION 1993

## Publications

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

Title	Publication	Date
ANTEPARTUM CARE	CONNS CURRENT THERAPY	01/01/1997
ANTEPARTUM CARE	BOOK CHAPTER IN CONN'S CURRENT THERAPY	01/01/1997
CORRELATION BETWEEN MAXIMUM CERVICAL DILATION	OBSTETRICS AND GYNECOLOGY	01/01/1997

## Professional Web Page

[www.southfloridaperinatalmedicine.com](http://www.southfloridaperinatalmedicine.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
AMERICAN COLLEGE OF OBSTETRICS & GYNECOLOGY
AMERICAN INSTITUTE OF ULTRASOUND IN MEDICINE
AMERICAN MEDICAL ASSOCIATION
SOCIETY OF MATERNAL FETAL MEDICINE