



## JOHN SPENCER CHIKEZIEM ARCHINIHU

License Number: ME68139

Profession	Medical Doctor
License Status	Denied - Renewal/
Year Began Practicing	07/01/1994
License Expiration Date	01/31/2016
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

## General Information

The practitioner has not verified the information contained in this profile.

### Primary Practice Address

JOHN SPENCER CHIKEZIEM ARCHINIHU  
14367 ROCKLEDGE GROVE COURT  
ORLANDO, FL 32828  
ATTN: JOHN SPENCER C. ARCHINIHU

### Medicaid

This practitioner does NOT participate in the Medicaid program.

### Staff Privileges

This practitioner has not indicated any staff privileges.

### Email Address

Please contact at: keziem@yahoo.com

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
ILLINOIS	MD
ARKANSAS	MD
WISCONSIN	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 not indicated whether he/she has submitted payment of the assessment.

## Education and Training

The practitioner has not verified the information contained in this profile.

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
UNIVERSIDAD TECNOLOGICA DE SAN	MD	1/1/1982 - 1/1/1985	01/01/1985

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
SOUTH ILLINOIS UNIVERSITY SCHOOL OF MEDICINE	RESIDENCY	FP - FAMILY MEDICINE		CARBONDALE	ILLINOIS	07/01/1991	06/30/1994

Academic Appointments

The practitioner has not verified the information contained in this profile.

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

The practitioner has not verified the information contained in this profile.

Specialty Certification

This practitioner does not hold any certifications from specialty boards recognized by the Florida board which regulates the profession for which he/she is licensed.

Financial Responsibility

The practitioner has not verified the information contained in this profile.

Financial Responsibility

I have elected not to carry medical malpractice insurance however, I agree to satisfy any adverse judgments up to the minimum amounts pursuant to s. 458.320(5) (g)1, F. S. I understand that I must either post notice in a sign prominently displayed in my reception area or provide a written statement to any person to whom medical services are being provided that I have decided not to carry medical malpractice insurance. I understand that such a sign or notice must contain the wording specified in s. 458.320(5) (g), F.S.

Proceedings and Actions

The practitioner has not verified the information contained in this profile.

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 the following criminal offenses:

Description of Offense	Date	State or Jurisdiction	Under Appeal	Status	Date Of Corroboration
OPERATING A NON-REGISTERED PAIN MANAGEMENT CLINIC/ADJ WTH	01/06/2015	ORANGE COUNTY FL	NO	CORROBORATED	

### 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:

For instructions on how to order copies of final disciplinary actions, please click [here](#).

[View Discipline Narratives](#)

[View Board Actions](#)

Taken By	Date Of Action	Description of Disciplinary Action	Under Appeal
FLORIDA DEPARTMENT OF HEALTH	02/16/2016	OBLIGATIONS IMPOSED	NO

Type	Imposed	Due	Completed	Amt Due	Amt Recvd
FINE	2/16/2016			\$ 5,000.00	\$ 914.81
PAYMENT PLAN	12/19/2016			\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	1/18/2017	4/4/2022	\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	2/18/2017	4/12/2022	\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	3/18/2017	4/14/2022	\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	4/18/2017	5/13/2022	\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	5/18/2017	6/22/2022	\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	6/18/2017	7/13/2022	\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	7/18/2017	9/19/2022	\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	9/18/2017		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	10/18/2017		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	11/18/2017		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	12/18/2017		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	2/18/2018		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	3/18/2018		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	4/18/2018		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	5/18/2018		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	6/18/2018		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	7/18/2018		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	8/18/2018		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	9/18/2018		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	10/18/2018		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	11/18/2018		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	12/18/2018		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	1/18/2019		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	1/18/2018		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	2/18/2019		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	3/18/2019		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	4/18/2019		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	5/18/2019		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	6/18/2019		\$ 0.00	\$ 0.00

Type	Imposed	Due	Completed	Amt Due	Amt Recvd
MONTHLY PAYMENT	12/19/2016	8/18/2017		\$ 0.00	\$ 0.00
COSTS	2/16/2016		2/5/2016	\$ 424.19	\$ 424.19
MONTHLY PAYMENT	12/19/2016	9/18/2022		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	10/18/2022		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	11/18/2022		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	12/18/2022		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	1/18/2023		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	2/18/2023		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	3/18/2023		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	4/18/2023		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	5/18/2023		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	6/18/2023		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	7/18/2023		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	8/18/2023		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	9/18/2023		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	10/18/2023		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	11/18/2023		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	12/18/2023		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	1/18/2024		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	2/18/2024		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	3/18/2024		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	4/18/2024		\$ 0.00	\$ 0.00
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MONTHLY PAYMENT	12/19/2016	6/18/2024		\$ 0.00	\$ 0.00
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MONTHLY PAYMENT	12/19/2016	8/18/2024		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	9/18/2024		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	10/18/2024		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	11/18/2024		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	12/18/2024		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	1/18/2025		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	2/18/2025		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	3/18/2025		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	4/18/2025		\$ 0.00	\$ 0.00
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MONTHLY PAYMENT	12/19/2016	8/18/2025		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	9/18/2025		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	10/18/2025		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	11/18/2025		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	12/18/2025		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	1/18/2026		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	2/18/2026		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	3/18/2026		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	4/18/2026		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	5/18/2026		\$ 0.00	\$ 0.00

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MONTHLY PAYMENT	12/19/2016	6/18/2026		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	7/18/2026		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	8/18/2026		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	9/18/2026		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	10/18/2026		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	11/18/2026		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	12/18/2026		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	1/18/2027		\$ 0.00	\$ 0.00
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MONTHLY PAYMENT	12/19/2016	7/18/2027		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	8/18/2027		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	9/18/2027		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	10/18/2027		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	11/18/2027		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	12/18/2027		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	1/18/2028		\$ 0.00	\$ 0.00
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MONTHLY PAYMENT	12/19/2016	9/18/2028		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	10/18/2028		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	11/18/2028		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	5/18/2034		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	6/18/2034		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	7/18/2034		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	8/18/2034		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	9/18/2034		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	10/18/2034		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	11/18/2034		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	12/18/2034		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	1/18/2035		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	2/18/2035		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	3/18/2035		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	4/18/2035		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	5/18/2035		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	6/18/2035		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	7/18/2035		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	8/18/2035		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	9/18/2035		\$ 0.00	\$ 0.00

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Type	Imposed	Due	Completed	Amt Due	Amt Recvd
MONTHLY PAYMENT	12/19/2016	9/18/2039		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	10/18/2039		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	11/18/2039		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	12/18/2039		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	1/18/2040		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	2/18/2040		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	10/18/2019		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	7/18/2019		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	8/18/2019		\$ 0.00	\$ 0.00
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MONTHLY PAYMENT	12/19/2016	1/18/2020		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	2/18/2020		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	3/18/2020		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	4/18/2020		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	5/18/2020		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	6/18/2020		\$ 0.00	\$ 0.00
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MONTHLY PAYMENT	12/19/2016	10/18/2020		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	11/18/2020		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	12/18/2020		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	1/18/2021		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	2/18/2021		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	3/18/2021		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	4/18/2021		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	5/18/2021		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	6/18/2021		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	7/18/2021		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	8/18/2021		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	9/18/2021		\$ 0.00	\$ 0.00
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MONTHLY PAYMENT	12/19/2016	11/18/2021		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	12/18/2021		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	1/18/2022		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	2/18/2022		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	3/18/2022		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	4/18/2022		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	5/18/2022		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	6/18/2022		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	7/18/2022		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	8/18/2022		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	3/18/2029		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	12/18/2028		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	1/18/2029		\$ 0.00	\$ 0.00

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Type	Imposed	Due	Completed	Amt Due	Amt Recvd
MONTHLY PAYMENT	12/19/2016	2/18/2033		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	3/18/2033		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	4/18/2033		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	5/18/2033		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	6/18/2033		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	7/18/2033		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	8/18/2033		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	9/18/2033		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	10/18/2033		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	11/18/2033		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	12/18/2033		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	1/18/2034		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	2/18/2034		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	3/18/2034		\$ 0.00	\$ 0.00
MONTHLY PAYMENT	12/19/2016	4/18/2034		\$ 0.00	\$ 0.00

**The information below is self reported by the practitioner. For Florida health care practitioner discipline, see information listed above.**

#### **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**

**The practitioner has not verified the information contained in this profile.**

#### **Committees/Memberships**

This practitioner has an affiliation with the following committees:

GOVERNMENT AFFAIRS COMMITTEE

AMERICAN SOCIETY OF ADDICTION MEDICINE

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
FELLOWSHIP	AMERICAN ACADEMY OF FAMILY PHYSICIANS

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 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 ACADEMY OF FAMILY PHYSICIANS
AMERICAN MEDICAL ASSOCIATION
FLORIDA ACADEMY OF FAMILY PHYSICIANS
WORLD ORGANIZATION OF FAMILY PHYSICIAN