



## TIMOTHY ALAN BONSAK

License Number: ME68441

Profession Medical Doctor  
License Status Clear/Active  
Year Began Practicing 01/01/1984  
License Expiration 01/31/2027  
Date

## General Information

### Primary Practice Address

TIMOTHY ALAN BONSAK  
4516 NORTH ARMENIA AVENUE  
TAMPA, FL 33603

### 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
ST. JOSEPH'S HOSPITAL	TAMPA	FLORIDA
ST. JOSEPH'S HOSPITAL	LUTZ	FLORIDA
ST. JOSEPH'S HOSPITAL	RIVERVIEW	FLORIDA
SOUTH FLORIDA BAPTIST HOSPITAL	PLANT CITY	FLORIDA

### Email Address

Not Provided

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
GEORGIA	MD
MASSACHUSETTS	MD
ALABAMA	MEDICAL DOCTOR
SOUTH CAROLINA	MEDICAL DOCTOR
TEXAS	MEDICAL DOCTOR
NEW YORK	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
EMORY UNIVERSITY	MD	1/1/1979 - 1/1/1983	05/01/1983

## 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
FITZSIMONS ARMY MEDICAL CENTER	INTERNSHIP	PD - PEDIATRICS		AURORA	COLORADO	07/01/1983	06/30/1984
FITZSIMONS ARMY MEDICAL CENTER	RESIDENCY	PD - PEDIATRICS		AURORA	COLORADO	07/01/1984	06/30/1986
EMORY UNIVERSITY SCHOOL OF MEDICINE	RESIDENCY	DR - RADIOLOGY	DIAGNOSTIC RADIOLOGY	ATLANTA	GEORGIA	07/01/1990	06/30/1994
HARVARD UNIVERSITY, BOSTON CHILDREN'S HOSPITAL	FELLOWSHIP	DR - PEDIATRIC RADIOLOGY		BOSTON	MASSACHUSETTS	07/01/1994	06/30/1995

# 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 PEDIATRICS	PD - PEDIATRICS	
AMERICAN BOARD OF RADIOLOGY	RADIOLOGY - DIAGNOSTIC	
AMERICAN BOARD OF RADIOLOGY	DR - PEDIATRIC RADIOLOGY	

# 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 College of Radiology  
American Roentgen Ray Society  
Southern Pediatric Radiology Society  
The Society for Pediatric Radiology  
American Academy of Pediatrics  
Berlin International Medical Society  
John A. Kirkpatrick Society  
Radiological Society of North America

### Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
CUM LAUDE	DAVIDSON COLLEGE
CUM LAUDE	EMORY UNIVERSITY SCHOOL OF MEDICINE
MEDICAL SCHOOL CLASS PRESIDENT	EMORY UNIVERSITY SCHOOL OF MEDICINE
WHO'S WHO IN AMERICAN UNIVERSITIES	EMORY UNIVERSITY SCHOOL OF MEDICINE
SANOFI WINTHROP RSNA SCHOLAR	RSNA

Publications

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

Title	Publication	Date
CRANIAL MRI OF THE NEUROFIBROMATOSES	APPLIED RADIOLOGY	03/01/1994
PEDIATRIC CASE OF THE DAY	RADIOGRAPHICS	11/01/1996
OSTEOFIBROUS DYSPLASIA	SOUTHERN PEDIATRIC RADIOLOGY SOCIETY, 16TH ANNUAL SCIENTIFIC CONGRESS	10/02/1994
US OF NON-THYROIDAL NECK MASSES IN CHILDREN	POSTER PRESENTATION INTERNATIONAL SOCIETY OF PEDIATRIC RADIOLOGY	05/25/1996
PREDICTING THE ABSENCE OF VESICoureTERAL REFLUX IN CHILDREN	THE SOCIETY OF URO RADIOLOGY, ZURICH, SWITZERLAND	06/14/1996
PEDIATRIC CASE OF THE DAY	RADIOGRAPHICS	11/01/1996

Professional Web Page

www.SDIRAD.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 RADIOLOGY
AMERICAN ROENTGEN RAY SOCIETY
BAYCARE HOSPITAL WESLEY CHAPEL
BERLIN INTERNATIONAL MEDICAL SOCIETY
JOHN A KIRKPATRICK SOCIETY
RADIOLOGICAL SOCIETY OF NORTH AMERICA
SOUTHERN PEDIATRIC RADIOLOGY SOCIETY
THE SOCIETY FOR PEDIATRIC RADIOLOGY