



## VANCE MARION WRIGHT-BROWNE M.D.

License Number: ME70098

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	06/30/1996
License Expiration Date	01/31/2026
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

## General Information

### Primary Practice Address

VANCE MARION WRIGHT-BROWNE M.D.  
22395 EDGEWATER DRIVE  
PORT CHARLOTTE, FL 33980

### 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	PORT CHARLOTTE	FLORIDA
FAWCETT MEMORIAL HOSPITAL	PORT CHARLOTTE	FLORIDA

### Email Address

Please contact at: [Licensing@flcancer.com](mailto:Licensing@flcancer.com)

### Other State Licenses

This practitioner has not indicated any additional state licensures.

### 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
UNIV. OF THE WEST INDIES	M.D.	1/1/1982 - 1/1/1987	01/01/1987

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
UNIV OF TX COLLEGE OF MEDICINE-MD ANDERSON CANCER CENTER-UNI	FELLOWSHIP	IM - HEMATOLOGY AND ONCOLOGY		HOUSTON	TEXAS	07/01/1993	06/30/1996
ST FRANCIS HOSP MED CENTER-UNIV OF CT SCHOOL OF MED	RESIDENCY	IM - INTERNAL MEDICINE		HARTFORD	CONNECTICUT	06/30/1992	06/30/1993
UNIV OF CT SCHOOL OF MEDICINE	RESIDENCY	IM - INTERNAL MEDICINE		FARMINGTON	CONNECTICUT	06/01/1990	06/30/1992
SAINT FRANCIS HOSPITAL AND MEDICAL CENTER	INTERNSHIP	IM - INTERNAL MEDICINE		HARTFORD	CONNECTICUT	07/01/1989	06/30/1990
UNIV OF WEST INDIES SCHOOL OF MEDICINE	INTERNSHIP	IM - INTERNAL MEDICINE	ROTATING INTERNSHIP	KINGSTON	JAMAICA	09/01/1987	03/30/1989

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 INTERNAL MEDICINE	IM - HEMATOLOGY AND ONCOLOGY	11/01/1992

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:  
Virginia B. Andes- Executive Board 2016-Present

### Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
HAROLD N WILLARD AWARD-EXCELLENCE IN AMBULATORY CARE 91-92	
CHARLOTTE CO TOP ONCO AWARD 2010-2012 2014 2015,2016 2017 P	CHARLOTTE COUNTY
GULFSHORE LIFE TOP DOCTOR 2012	
THE PATIENTS CHOICE HONOREE 2008-2015	THE PATIENTS' CHOICE
CASTLE CONNOLLY TOP DOCTOR 2012-2015	CASTLE CONNOLLY

### Publications

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

Title	Publication	Date
CONTROVERSIES IN BREAST CANCER	MEDICAL ONCOLOGY	01/01/1996
CURRENT STATUS OF ADJUVANT THERAPY OF BREAST CANCER	THE CANCER JOURNAL	01/01/1996
PHYSIOLOGY PATHOPHYSIOLOGY OF DENDRITIC CELLS	HUMAN PATHOLOGY	01/01/1996
HIGH DOSE CHEMOTHERAPY IN THE TREATMENT OF BREAST CANCER		01/01/1996
SERUM CYTOKINE LEVELS IN INFECTIOUS MONONUCLEOSIS AT DIAG	LEUKEMIA AND LYMPHOMA	08/01/1998
THIS PRACTITIONER HAS AUTHORED SEVERAL OTHER PUBLICATIONS		

Professional Web Page

FLCANCER.COM

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 SOCIETY OF CLINICAL ONCOLOGISTS