



## ALEJANDRO POSADA MD

License Number: ME71956

Profession Medical Doctor  
License Status Clear/Active  
Year Began Practicing 01/01/1998  
License Expiration 01/31/2027  
Date

## General Information

### Primary Practice Address

ALEJANDRO POSADA MD  
3737 SW 8TH STREET  
SUITE 200  
CORAL GABLES, FL 33134

### 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
CORAL GABLES HOSPITAL	MIAMI	FLORIDA
DOCTORS HOSPITAL	MIAMI	FLORIDA
SOUTH FLORIDA CENTER-MIAMI	MIAMI	FLORIDA

### Email Address

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

### 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
PONTIFICIA UNIVERSIDAD JAVERIA	MD		06/27/1989

## 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-JACKSON MEMORIAL HOSPITAL	INTERNSHIP	GS - SURGERY		MIAMI	FLORIDA	06/01/1992	06/01/1993
UNIVERSITY OF MIAMI-JACKSON MEMORIAL HOSPITAL	RESIDENCY	ORS - ORTHOPAEDIC SURGERY		MIAMI	FLORIDA	06/01/1993	06/01/1997
HARVARD UNIVERSITY-MASSACHUSETTS GENERAL HOSPITAL	FELLOWSHIP	FP - SPORTS MEDICINE		BOSTON	MASSACHUSETTS	01/01/0001	01/01/0001

## 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 ORTHOPAEDIC SURGERY	ORS - ORTHOPAEDIC SURGERY	
AMERICAN BOARD OF ORTHOPAEDIC SURGERY	ORS - ORTHOPAEDIC SPORTS MEDICINE	

## 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.

### 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 not indicated any committees on which they serve for any health entity with which they are affiliated.

### Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
AOA MEDICAL HONOR SOC	

### Publications

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

Title	Publication	Date
ABNORMAL MR IMAGES IN ASYNATAMATIC SHOULDERS	J BONE JOINT SURG	01/01/1995
MINI-DELTOID SPLITTING ROTATOR CUFF REPAIR:DO RESULTS DETE	ARTHROSCOPY	01/01/2000
RECONSTRUCTION OF THE ANTERIOR CRUCIATE LIGAMENT WITH BONE	CLIN ORTHOP	01/01/1994

Title	Publication	Date
ARTHROSCOPIC STAPLING FOR PRIMARY REPAIR OF RUPTURED ANTER	AMERICAN JOURNAL OF ARTHROSCOPY	01/01/1991
CASE REPORT:ANOMALOUS FOREARM MUSCLES CAUSING BILATERALL C	JOURNAL OF THE SOUTHERN ORTHOPAEDIC ASSOCIATION	01/01/1993
ARTHROSCOPIC MANAGEMENT OF IMPINGEMENT SYNDROME (SPANISH)	URIBE J REVISTA COLOMBIANA DE ORTOPEDIA Y TRAUMATOLOGIA	01/01/1993

### Professional Web Page

alejandroposadamd.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

FRENCH

PORTUGUESE

### Other Affiliations

This practitioner has provided the following national, state, local, county, and professional affiliations:

#### Affiliation

AMERICAN ACADEMY OF ORTHOPAEDIC SURGEONS

ARTHROSCOPY ASSOCIATION OF NORTH AMERICA