



## THOMAS G FIALA MD

License Number: ME74474

Profession Medical Doctor  
License Status Clear/Active  
Year Began Practicing 07/01/1988  
License Expiration 01/31/2028  
Date

## General Information

### Primary Practice Address

THOMAS G FIALA MD  
220 E CENTRAL PARKWAY  
SUITE 2020  
ALTAMONTE SPGS, FL 32701

### Medicaid

This practitioner does NOT participate in the Medicaid program.

### Staff Privileges

This practitioner currently holds staff privileges at the following hospital/medical/health institutions:

Institution Name	City	State
ORLANDO REGIONAL SOUTH SEMINOLE HOSPITAL	ALTAMONTE SPRINGS	FLORIDA
ORLANDO REGIONAL HEALTHCARE SYSTEM	ORLANDO	FLORIDA

### Email Address

Please contact at: [drfiala@drfiala.com](mailto:drfiala@drfiala.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
QUEEN'S UNIVERSITY	MD	9/1/1984 - 5/28/1988	05/28/1988

## 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 CALIFORNIA	FELLOWSHIP	PS - PLASTIC SURGERY	FACIAL AESTHETIC SURGERY	SAN FRANCISCO	CALIFORNIA	07/01/1996	06/30/1997
UNIVERSITY OF MICHIGAN	RESIDENCY	PS - PLASTIC SURGERY		ANN ARBOR	MICHIGAN	07/01/1994	06/30/1996
QUEEN'S UNIVERSITY	RESIDENCY	GS - SURGERY		KINGSTON ONTARIO	CANADA	07/01/1992	06/30/1994
MASSACHUSETTS GENERAL HOSPITAL	FELLOWSHIP	PS - PLASTIC SURGERY	MICROVASCULAR SURGERY	BOSTON	MASSACHUSETTS	07/01/1991	06/30/1992
MASSACHUSETTS GENERAL HOSPITAL	RESIDENCY	GS - SURGERY		BOSTON	MASSACHUSETTS	07/01/1990	06/30/1991
UNIVERSITY OF CALIFORNIA-LOS ANGELES	RESIDENCY	GS - SURGERY		LOS ANGELES	CALIFORNIA	07/01/1989	06/30/1990
UNIVERSITY OF ALBERTA	INTERNSHIP	TY - TRANSITIONAL YEAR		EDMONTON, ALBERTA	CALIFORNIA	07/01/1988	06/30/1989

## 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 PLASTIC SURGERY	PS - PLASTIC SURGERY	01/01/2099

## 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 an affiliation with the following committees:  
PAST PRESIDENT - FLORIDA SOCIETY OF PLASTIC SURGEONS  
FLORIDA SOCIETY OF PLASTIC SURGEONS - Board of Trustees  
SAFETY Committee-American Society for Aesthetic Plastic Surg  
In-service exam comm. - American Society of Plastic Surgeons

## Professional or Community Service Awards

This practitioner has not provided any professional or community service activities, honors, or awards.

## Publications

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

Title	Publication	Date
DOCTOR HAS SEVERAL OTHER PUBLICATIONS		
USE OF THE MITEK FIXATION DEVICE IN ENDOSCOPIC BROWLIFTING	PLASTIC RECONSTR. SURG.	01/01/1998
LIFTING THE MALAR FAT PAD FOR CORR. OF PROMINENT NASOLAB..	PLAST. RECONSTR. SURG.	01/01/1997
USE OF LUMBAR PERIOSTEAL TURN-OVER FLAPS IN MYELOMENINGO..	NEUROSURGERY	01/01/1996

## Professional Web Page

[www.plasticsurgeryinflorida.com](http://www.plasticsurgeryinflorida.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 FOR AESTHETIC PLASTIC SURGERY
AMERICAN SOCIETY FOR LASER MEDICINE & SURGERY
AMERICAN SOCIETY OF PLASTIC SURGEONS
FELLOW - ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA
FLORIDA SOCIETY OF PLASTIC SURGEONS
SOUTHEASTERN SOCIETY OF PLASTIC & RECONSTRUCTIVE SURGEONS