# DAVID JASSIR

# License Number: ME75727

ProfessionMedical DoctorLicense StatusCLEAR/ActiveYear Began Practicing07/01/1996License Expiration01/31/2026DateDate

# **General Information**

# **Primary Practice Address**

DAVID JASSIR 4700 SHERIDAN ST #K SUITE K HOLLYWOOD, FL 33021

## 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
MEMORIAL REGIONAL HOSPITAL	HOLLYWOOD	FLORIDA
MEMORIAL HOSPITAL WEST	PEMBROKE PINES	FLORIDA
MEMORIAL SAME DAY SURGERY CENTER HOLLYWOOD, FLORIDA	HOLLYWOOD	FLORIDA
MEMORIAL HOSPITAL PEMBROKE	PEMBROKE PINES	FLORIDA
JOE DIMAGGIO CHILDREN'S HOSPITAL AT MEMORIAL	HOLLYWOOD	FLORIDA

## **Email Address**

Please contact at: jassirmd@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**

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Institution Name	Degree Title	Dates of Attendance	Graduation Date
UNIVERSITY OF MIAMI	MD	8/1/1991 - 5/1/1995	05/01/1995

## **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	RESIDENCY	GS - SURGERY		MIAM	FLORIDA	07/01/1996	06/30/1997
UNIVERSITY OF MIAMI JACKSON MEMORIAL HOSPITAL	RESIDENCY	OTO - OTOLARYNGOLOGY	(	MIAM	FLORIDA	07/01/1997	06/30/2001

# Academic Appointments

#### **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**

### **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**

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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 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
RESIDENT RESEARCH AWARD	CHANDLER SOCIETY
ALPHA OMEGA ALPHA	MEDICAL HONOR SOCIETY
OTOLARYNGOLOGY STUDENT OF THE YEAR	

WALTER B JOHNSON AWARD

#### Publications

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

Title	Publication	Date
SUPPRESSION/ENHANCEMENT OF DISTORTION- PRODUCT OTOACOUSTIC	HEAR RES	01/01/1999
COMPARISON OF TOPICAL ANTI-ISCHEMIC AGENTS IN SALVAGE OF	ARCH FACIAL PLAST SURG	01/01/1999
EFFECTS OF LOOP DIURETICS ON THE SUPPRESSION TUNING OF	J ACOUST SOC AM	01/01/1998
LOCUS OF GENERATION FOR THE 2FL-F2 VS 2F2-FL DISTORTION-	J ACOUST SOC AM	01/01/1998

Title	Publication	Date
SOUND OVER-EXPOSURE EFFECTS ON RABBIT DPOAE LATENCIES	ACOUSTIC SIGNAL PROCESSING IN CENTRAL AUDITORY SYSTEM	01/01/1997
DOSE-RESPONSE RELATIONSHIP OF TOPICALLY APPLIED MITOMYCIN C	OTOLARYNGOL HEAD NECK SURG 129 5 471-4 14595268	11/01/2003

## **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 FACIAL PLASTIC & RECONSTRUCTIVE SURG

AMERICAN ACADEMY OF OTOLARYNGOLOGY-HEAD & NECK SURGERY

AMERICAN MEDICAL ASSOCIATION

STF PRIV: MEMORIAL INTEGRATED SYSTEM, HOLLYWOOD FL