# PAUL RICHARD CARNEY

## License Number: ME76167

ProfessionMedicalLicense StatusCLEARYear Began Practicing01/01/1License Expiration Date01/31/2Controlled Substance Prescriber (for the<br/>Treatment of Chronic Non-malignantYesPain)Pain

Medical Doctor CLEAR/Active 01/01/1991 01/31/2026 Yes

# **General Information**

#### **Primary Practice Address**

PAUL RICHARD CARNEY UNIVERSITY OF MISSOURI HEALTH DEPARTMENT OF PEDIATRICS COLUMBIA, MO 65201

#### **Medicaid**

This practitioner DOES participate in the Medicaid program.

### **Staff Privileges**

This practitioner has not indicated any staff privileges.

| Institution Name | City        | State          |
|------------------|-------------|----------------|
|                  | GAINESVILLE | FLORIDA        |
|                  | UNC HEALTH  | NORTH CAROLINA |

## **Email Address**

Please contact at: paul.carney1@gmail.com

## **Other State Licenses**

This practitioner has indicated the following additional state licensure:

| State          | Profession     |
|----------------|----------------|
| NORTH CAROLINA | MEDICAL DOCTOR |

## 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 |
|---------------------------|--------------|----------------------|-----------------|
| UNIVERSIDAD DE VALPARAISO | MD           | 1/1/1983 - 12/1/1990 | 12/01/1990      |

### **Other Health Related Degrees**

This practitioner does not hold any additional health related degrees.

| School/University       | City               | State/Country | Dates Attended From | Dates Attended To | Degree Title |
|-------------------------|--------------------|---------------|---------------------|-------------------|--------------|
| JOHN CARROLL UNIVERSITY | UNIVERSITY HEIGHTS | OHIO          | 09/01/1974          | 06/30/1980        | BS CHEMISTRY |

## **Professional and Postgraduate Training**

This practitioner has completed the following graduate medical education:

| Program Name                            | Program<br>Type | Specialty Area                  | Other Specialty Area                         | City      | State or<br>Country | Dates<br>Attended<br>From | Dates<br>Attended<br>To |
|---|-----------------|---------------------------------|--|-----------|---------------------|---------------------------|-------------------------|
| UNIVERSITY<br>HOSPITALS OF<br>CLEVELAND | RESIDENCY       | PD - PEDIATRICS                 |  | CLEVELAND | OHIO                | 07/01/1992                | 06/30/1994              |
| UNIVERSITY OF<br>MICHIGAN               | FELLOWSHIP      | OTHER                           | PEDIATRIC<br>NEUROLOGY                       | ANN ARBOR | MICHIGAN            | 07/01/1994                | 06/30/1997              |
| UNIVERSITY OF<br>MICHIGAN HOSPITAL      | FELLOWSHIP      | N - CLINICAL<br>NEUROPHYSIOLOGY | PEDIATRIC EPILEPSY<br>AND SLEEP<br>DISORDERS | ANN ARBOR | MICHIGAN            | 07/01/1996                | 06/30/1998              |

# Academic Appointments

#### **Graduate Medical Education**

This practitioner has had the responsibility for graduate medical education within the last 10 years.

#### **Academic Appointments**

This practitioner currently holds faculty appointments at the following medical/health related institutions of higher learning:

| Title     | Institution                              | City        | State          |
|-----------|--|-------------|----------------|
| PROFESSOR | UNIVERSITY OF NORTH CAROLINA AT CHAPEL H | CHAPEL HILL | NORTH CAROLINA |

# **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 PSYCHIATRY AND NEUROLO | NEUROLOGY     |                |

# **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:

The following discipline has been reported as required under 456.041(5), F.S. within the previous 10 years.

| Date Of Action | Related To Professional Competence | Related To Delivery of Services |
|----------------|------------------------------------|---------------------------------|
| 11/26/2018     | NO                                 | NO                              |

# 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 Clinical Neurophysiology Society National Institutes of Health American Epilepsy Society Epilepsy Foundation of 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   |
|--|--|
| BEST DOCTORS IN AMERICA HONORARY AWARD                     | BEST DOCTORS   |
| FACULTY RESEARCH PRIZE IN CLINICAL SCIENCE FOR OUTSTANDING | UNIVERSITY OF FLORIDA  |
| WILDER EPILEPSY RESEARCH CHAIR                             | UNIVESITY OF FLORIDA   |
| HONORARY FELLOW OF THE SOCIETY FOR PEDIATRIC RESEARCH      | SPR  |
| WILLIAM PIERSKALLA BEST PAPER AWARD                        | INSTITUTE FOR OPERATIONS RESEARCH AND THE MANAGEMENT SCIENCE |
| HONORARY MEMBER  | CHILEAN CHILD ADOLESCENT PSYCHIATRY NEUROLOGY<br>SOCIETY     |

#### **Publications**

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

| Title   | Publication   | Date       |
|---|---|------------|
| CELL POLARITY CHANGES AND MIGRATION DURING EARLY DEVELOPME    | ANAT REC  | 01/01/1989 |
| STUDIES ON CELL MIGRATION AND AXON GUIDANCE IN THE DEVELOP    | J COMP NEUROL   | 01/01/1983 |
| THIS PRACTITIONER HAS AUTHORED SEVERAL OTHER PUBLICATIONS     |   |            |
| HIPPOCAMPAL SLEEP SPINDLES<br>REVISITED:PHYSIOLOGIC OR EPILEP | CLINICAL NEUROPHYS  | 01/01/1999 |
| JUVENILE MYASTHENIA GRAVIS:TREATMENT WITH                     | PED NEUROL  | 01/01/1998 |
| JAMES D GEYER PAUL R CARNEY TROY T PAYNE<br>MICHAEL AL        | ATLAS OF DIGITAL POLYSOMNOGRAPHY 1ST ED<br>LIPPINCOTT-WILLIAM | 01/26/2000 |
| PAUL R CARNEY JAMES D GEYER RICHARD BERRY                     | CLINICAL SLEEP DISORDERS                                      | 01/01/2005 |
| NEUROLOGY FOR THE BOARDS 3RD ED LIPPINCOTT-WILLIAMS WILK      | JAMES D GEYER JANICE M KEATING DANIEL C POTTS PAUL            | 01/25/2006 |
| ATLAS OF DIGITAL POLYSOMNOGRAPHY 2ND ED<br>LIPPINCOTT-WILLIA  | JAMES D GEYER PAUL R CARNEY TROY T PAYNE                      | 02/02/2009 |
| READING EEGS A PRACTICAL APPROACH 1ST ED<br>LIPPINCOTT-WILLI  | L JOHN GREENFIELD JAMES D GEYER PAUL R CARNEY                 | 12/01/2009 |

#### **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 SPANISH

#### **Other Affiliations**

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

Affiliation

AMERICAN ACADEMY OF PEDIATRICS

AMERICAN EPILEPSY SOCIETY

AMERICAN PEDIATRIC SOCIETY

AMERICAN SLEEP DISORDERS SOCIETY

FEDERATION OF AMERICAN SOCIETY OF EXPERIMENTAL BIOLOGY