



## GLENN WILLIAM STAMBO

License Number: ME76556

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/1991
License Expiration Date	01/31/2027
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes

## General Information

### Primary Practice Address

GLENN WILLIAM STAMBO  
7171 N DALE MABRY HIGHWAY  
TAMPA, FL 33614

### 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
ST. JOSEPH'S HOSPITAL	TAMPA	FLORIDA
PALMS OF PASADENA HOSPITAL	ST PETERSBURG	FLORIDA
ST. ANTHONYS HOSPITAL	ST PETERSBURG	FLORIDA
MEMORIAL HOSPITAL OF TAMPA	TAMPA	FLORIDA
PALM BEACH LAKES SURGERY CENTER	PALM BEACH GARDENS	FLORIDA
BETHESDA MEMORIAL HOSPITAL	BOYNTON BEACH	FLORIDA
SANTA ROSA MEDICAL CENTER	MILTON	FLORIDA
NORTH OKALOOSA MEDICAL CENTER	CRESTVIEW	FLORIDA
TWIN CITIES HOSPITAL	NICEVILLE	FLORIDA
MONROE COUNTY HOSPITAL	MONROEVILLE	ALABAMA
SOUTH BALDWIN MEDICAL CENTER	FOLEY	ALABAMA

### Email Address

Please contact at: [gstambo64@yahoo.com](mailto:gstambo64@yahoo.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
ALABAMA	MD
GEORGIA	MD
NEW YORK	MD

## 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
HAHNEMANN UNIVERSITY	MD	9/1/1987 - 6/1/1991	06/01/1991

### 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 CONNECTICUT SCHOOL OF MEDICINE	INTERNSHIP	IM - INTERNAL MEDICINE		FARMINGTON	CONNECTICUT	07/01/1991	06/30/1992
HARTFORD HOSPITAL	RESIDENCY	RADIOLOGY		HARTFORD	CONNECTICUT	07/01/1993	06/30/1997
UNIVERSITY OF MASSACHUSETTS MEDICAL CENTER	FELLOWSHIP	DR - VASCULAR AND INTERVENTIONAL RADIOLO		WORCESTER	MASSACHUSETTS	07/01/1997	06/30/1998

## 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 RADIOLOGY	DR - VASCULAR AND INTERVENTIONAL RADIOLO	11/01/1999
AMERICAN BOARD OF RADIOLOGY	DR - DIAGNOSTIC RADIOLOGY	11/03/1997

## 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](#).

The following liability actions have been reported as required under section 456.049, F. S., within the previous 10 years:

Incident Date	County	Judicial Case	Settlement Date	Amount	Policy Amount
09/06/2016	HILLSBOROUGH	17-CA-009856	02/01/2018	\$500,000.00	\$1,000,000.00

## 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 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
ANGIOGRAPHIC EMBOLIZATION OF VISCERAL ARTERY PSEUDO	ANNALS OF VASCULAR SURGERY	09/01/1996
PERCUTANEOUS DRAINAGE OF DIVERTICULAR ABSCESES	DIVERTICULAR DISEASE MANAGEMENT	10/01/1997
UTILIZATION OF THORACOCENTESIS FOR PLEURAL EFFUSIONS	SUBMITTED TO DEPARTMENT OF RADIOLOGY, HARTFORD, CT	05/01/1994
GLOMERULAR AND TUBULAR A1- AND A2 ADRENOCEPTORS IN THE RAT	JOURNAL OF CARDIOVASCULAR PHARMACOLOGY	01/01/1989
COIL EMBOLIZATION OF HEPATIC ANEURYSMS IN PAN	JOURNAL OF VASCULAR SURGERY	05/20/2004
TRANSHEPATIC PORTAL VEIN THROMBOLYSIS WITH PULSE SPRAY THROM	AMERICAN JOURNAL OF ROENTGENOLOGY	03/20/2005
ENDOVASCULAR TREATMENT OF VENA CAVA OBSTRUCTION WITH STENTS	SOUTHERN MEDICAL JOURNAL	10/17/2006
HEPATIC ANGIOSARCOMA PRESENTING A A BLEED TREATED WITH TACE	SARCOMA	10/25/2007
ENDOVASCULAR TREATMENT OF IVC OBSTRUCTION FROM HCC WITH STEN	RADIOGRAPHY	05/10/2008
ENDOVASCULAR TREATMENT OF RUPTURED ABDOMINAL AORTA FROM TUMO	ANNALS OF VASCULAR SURGERY	07/09/2008
DRUG ELUTING BEADS FOR HEPATIC NEOPLASMS	FIRE AND ICE TUMOR ABLATION	08/18/2007
BIL EKOS CATHETER THROMBOLYSIS OF BIL PE	SOUTHERN MEDICAL JOURNAL	05/01/2010
ENDOVASCULAR TREATMENT OF CHRONICALLY OCCLUDED LIMB OF ENDOG	RADIOGRAPHY	02/01/2011
CATHETER DIRECTED TENECTEPLASE	VASCULAR DISEASE MANAGEMENT	10/01/2011
CURRENT ENDOVASCULAR TREATMENTS FOR VENOUS THROMBOSIS	INTECH OPEN ACCESS PUBLISHER	01/01/2012
FLUORO GUIDED TRANSHEPATIC PUNCTURE FOR DIFF TIPS	RADIOGRAPHY	08/01/2012
DOES MODEN ISCHEMIC STROKE THERAPY IMPROVE OUTCOMES	JOURNAL OF STROKE AND CEREBROVASCULAR DISEASES	09/01/2013
ENDOVASCULAR TREATMENT OF AORTOENTERIC FISTULA	CHIRURGIA	12/01/2013

## Professional Web Page

This practitioner has not provided any professional web page information.

## 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 COLLEGE OF RADIOLOGY
AMERICAN ROENTGEN RAY SOCIETY
FLORIDA MEDICAL ASSOCIATION
HILLSBOROUGH COUNTY MEDICAL ASSOCIATION
RADIOLOGICAL SOCIETY OF NORTH AMERICA
SOCIETY OF CARDIOVASCULAR & INTERVENTIONAL RADIOLOGY

**Affiliation**

TAMPA BAY VASCULAR SOCIETY

WEST COAST FLORIDA RADIOLOGICAL SOCIETY

---