RICHARD GEORGE PIGEON

License Number: ME76624

Profession Medical Doctor
License Status CLEAR/Active
Year Began Practicing 08/26/1998
License Expiration Date 01/31/2027
Controlled Substance Prescriber (for the Yes

Treatment of Chronic Non-malignant

Pain)

General Information

Primary Practice Address

RICHARD GEORGE PIGEON
ORTHOPAEDIC ASSOC OF WEST FL
430 MORTON PLANT ST
CLEARWATER, FL 33756

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
MORTON PLANT HOSPITAL	CLEARWATER	FLORIDA
MORTON PLANT MEASE-N BAY HOSP	NEW PORT RICHEY	FLORIDA

Email Address

Please contact at: rpigeon@aya.yale.edu

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NEW YORK	PHYSICIAN
CONNECTICUT	PHYSICIAN

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
YALE UNIVERSITY	MD	8/20/1993 - 5/26/1997	05/26/1997

Other Health Related Degrees

This practitioner has completed the following other health related degrees:

School/University	City	State/Country	Dates Attended y From	Dates Attended To	Degree Title
UNIVERSITY OF NOTRE DAME	NOTRE DAME	INDIANA	08/24/1987	05/17/1992	PH.D. NATURAL SCIENCES
CALIFORNIA STATE POLYTECHNIC UNIVERSITY	POMONA	CALIFORNIA	09/01/1984	06/13/1987	BACHELOR OF ENGINEERING

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
HOSPITAL FOR SPECIAL SURGERY - WEILL MEDICAL COLLEGE CORNELL	FELLOWSHIP	ORS - ORTHOPAEDIC SURGERY OF THE SPINE		NEW YORK	NEW YORK	08/01/2002	07/30/2003
UNIVERSITY OF MIAMI/JACKSON	INTERNSHIP	GS - SURGERY		MIAMI	FLORIDA	06/24/1997	06/23/1998
UNIVERSITY OF MIAMI/JACKSON	RESIDENCY	ORS - ORTHOPAEDIC SURGERY		MIAMI	FLORIDA	07/01/1998	06/30/2002

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 OF THE SPINE	
AMERICAN BOARD OF ORTHOPAEDIC SURGERY	ORS - ORTHOPAEDIC SURGERY	

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.

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
GRADUATED CUM LAUDE 1997	YALE UNIVERSITY SCHOOL OF MEDICINE
VOTED TOP DOCTORS 2006-2024	CASTLE CONNOLLY
DIPLOMATE	AMERICAN BOARD OF ORTHOPAEDIC SURGERY
DIPLOMATE	AMERICAN BOARD OF MEDICAL EXAMINERS

Community Service/Award/Honor	Organization
ALPHA OMEGA ALPHA HONOR MEDICAL SOCIETY	YALE UNIVERSITY SCHOOL OF MEDICINE
AMERICAS TOP ORTHOPAEDISTS 2007-2024	CONSUMERS RESEARCH COUNCIL OF AMERICA
AMERICAS TOP SURGEONS 2008-2024	CONSUMERS RESEARCH COUNCIL OF AMERICA
BEST DOCTORS 2011-2024	US NEWS AND WORLD REPORT
PATIENTS CHOICE PHYSICIAN AWARD 2012-2024	PATIENTS CHOICE

Publications

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

Title	Publication	Date
QUANTITATIVE KINETIC ANALYSIS OF SILICON NITRIDATION	JOURNAL OF MATERIALS SCIENCE	01/01/1993
CLASSIFICATION SYSTEM FOR ADOLESCENT IDIOPATHIC SCOLIOSIS	JOURNAL OF BONE AND JOINT SURGERY	06/01/2002
NOT ALL SPONDYLOLISTHESIS GRADING INSTRUMENTS ARE RELIABLE	CLINICAL ORTHOPAEDICS AND RELATED RESEARCH	05/01/2005
TRANSPEDICULAR LUMBAR WEDGE RESECTION OSTEOTOMY FOR FIXED	SPINE	02/15/2006

Professional Web Page

https://www.orthowestfl.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

Other Affiliations

This practitioner has provided the following national, state, local, county, and professional affiliations:
Affiliation
ALPHA OMEGA ALPHA HONOR MEDICAL SOCIETY
AMERICAN ACADEMY OF ORTHOPEDIC SURGEONS
AMERICAN MEDICAL ASSOCIATION
FLORIDA MEDICAL ASSOCIATION
FLORIDA ORTHOPAEDIC SOCIETY
HOSPITAL FOR SPECIAL SURGERY ALUMNI ASSOCIATION
NORTH AMERICAN SPINE SOCIETY
OMEGA CHI EPSILON CHEMICAL ENGINEERING HONOR SOCIETY
TAU BETA PI ENGINEERING HONOR SOCIETY