



NADER HAROUN SHEHATA

License Number: ME82312

Profession	Medical Doctor
License Status	Deceased/
Year Began Practicing	11/02/1998
License Expiration	01/31/2023
Date	

General Information

Primary Practice Address

NADER HAROUN SHEHATA
701 W HALLANDALE BEACH BLVD #1
HALLANDALE BEACH, FL 33009

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

This practitioner has not indicated any staff privileges.

Email Address

Please contact at: drnader99@hotmail.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 not indicated whether he/she has submitted payment of the assessment.

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
ASSIOUT MEDICAL SCHOOL	MD	9/1/1976 - 12/5/1981	12/05/1981

Other Health Related Degrees

This practitioner has completed the following other health related degrees:

School/University	City	State/Country	Dates Attended From	Dates Attended To	Degree Title
ECFMG CERTIFICATE	PHILADELPHIA	PENNSYLVANIA	10/01/1996	06/01/1997	MS IN MEDICINE
ASSIOUT MEDICAL SCHOOL	ASSIOUT	EGYPT	12/01/1989	01/01/1990	CLINICAL MEDICINE OF THE TROPICS

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
ASSIUT MEDICAL SCHOOL	INTERNSHIP	TY - TRANSITIONAL YEAR		ASSIUT	EGYPT	03/01/1982	02/28/1983
ASSIUT MEDICAL SCHOOL	RESIDENCY	IM - INFECTIOUS DISEASE		ASSIUT	EGYPT	07/01/1986	12/01/1989
FLORIDA RESTRICTED LICENSE-MD	OTHER PROGRAM	IFP - INTERNAL MEDICINE/FAMILY PRACTICE	GENERAL PRACTICE	MIAMI	FLORIDA	11/10/1998	12/10/2000
FLORIDA UNRESTRICTED LICENSE-MD	OTHER PROGRAM	IFP - INTERNAL MEDICINE/FAMILY PRACTICE	GENERAL PRACTICE	MIAMI	FLORIDA	12/10/2000	04/24/2001
AMERICAN COLLEGE OF GENERAL MEDICINE	OTHER PROGRAM	IFP - INTERNAL MEDICINE/FAMILY PRACTICE	BE GENERAL PRACTICE	ATLANTA	GEORGIA	07/01/2001	02/16/2004

Academic Appointments

Graduate Medical Education

This practitioner has 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
	IFP - INTERNAL MEDICINE/FAMILY PRACTICE	
	IFP - INTERNAL MEDICINE/FAMILY PRACTICE	

Financial Responsibility

Financial Responsibility

I have elected not to carry medical malpractice insurance however, I agree to satisfy any adverse judgments up to the minimum amounts pursuant to s. 458.320(5) (g)1, F. S. I understand that I must either post notice in a sign prominently displayed in my reception area or provide a written statement to any person to whom medical services are being provided that I have decided not to carry medical malpractice insurance. I understand that such a sign or notice must contain the wording specified in s. 458.320(5) (g), 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 an affiliation with the following committees:
AMERICAN ACADEMY OF GENERAL PRACTICE

Professional or Community Service Awards

This practitioner has provided the following professional or community service activities, honors, or awards:

Community Service/Award/Honor	Organization
FT LAUDERDALE INDIGENT POPULATION AND MEDICAID	SOUTH FLORIDA MEDICAL GROUP OF LAUDERDALE

Publications

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

Title	Publication	Date
PEGYLATED INTERFERON IN TREATMENT OF HEPATITIS C	JOURNAL OF AAGP	12/01/2002

Professional Web Page

www.dermafl.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.

ARABIC

Other Affiliations

This practitioner has not provided any national, state, local, county, or professional affiliations.