



BAHRAM KAM HABIBI

License Number: CH7527

Profession Chiropractic Physician
License Status Revoked/
Year Began Practicing 06/15/1996
License Expiration 03/31/2018
Date

General Information

Primary Practice Address

BAHRAM KAM HABIBI
6765 SUNSET STRIP
SUITE 1
SUNRISE, FL 33313

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

This practitioner has not indicated any staff privileges. Chiropractic physicians typically do not hold staff privileges.

Email Address

Please contact at: doctorkam@yahoo.com

Other State Licenses

This practitioner has not indicated any additional state licensures.

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
LIFE CHIROPRACTIC COLLEGE - WEST	DC	3/1/1992 - 3/1/1996	03/01/1996

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
LIFE UNIVERSITY	OTHER PROGRAM	CHIROPRACTIC INTERNSHIP/RESIDENCY		ATLANTA	GEORGIA	03/01/1992	03/01/1996

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

Financial Responsibility

I have obtained and will maintain professional liability coverage in an amount not less than \$100,000 per claim with a minimum annual aggregate of at least \$300,000 from an authorized insurer as defined under section 624.09, F.S., from an eligible surplus lines insurer as defined under s. 626.914(2), F.S., from the Joint Underwriting Association established under s.627.351(4), 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:

For instructions on how to order copies of final disciplinary actions, please click [here](#).

[View Discipline Narratives](#)

[View Board Actions](#)

Taken By	Date Of Action	Description of Disciplinary Action	Under Appeal
FLORIDA DEPARTMENT OF HEALTH	05/23/2022	PROBATION	NO
FLORIDA DEPARTMENT OF HEALTH	02/12/2021	REVOCATION	NO

Type	Imposed	Due	Completed	Amt Due	Amt Recvd
FIRST APPEARANCE	6/29/2016			\$ 0.00	\$ 0.00
LAST APPEARANCE	6/29/2016			\$ 0.00	\$ 0.00
COSTS	6/29/2016	6/28/2018	5/23/2022	\$ 9,277.09	\$ 9,277.09
MONITOR APPEARANCE	6/29/2016			\$ 0.00	\$ 0.00
CURRICULUM VITAE	6/29/2016			\$ 0.00	\$ 0.00
CHANGE OF SUPERVISOR	6/29/2016			\$ 0.00	\$ 0.00
ETHICS & BOUNDARIES EXAMINATIO	6/29/2016	6/28/2017		\$ 0.00	\$ 0.00

Type	Imposed	Due	Completed	Amt Due	Amt Recvd
PRE-APPROVAL OF SUPERVISOR/MON	6/29/2016			\$ 0.00	\$ 0.00
FINE	6/29/2016	6/28/2018	5/23/2022	\$ 15,000.00	\$ 15,000.00
CONTINUING EDUCATION	6/29/2016			\$ 0.00	\$ 0.00
INDIRECT SUPERVISION	6/29/2016			\$ 0.00	\$ 0.00
MONITOR	6/29/2016			\$ 0.00	\$ 0.00
MONITOR REPORTS	6/29/2016			\$ 0.00	\$ 0.00
TOLLING	6/29/2016			\$ 0.00	\$ 0.00
RESPONDENT REPORT	6/29/2016			\$ 0.00	\$ 0.00
CE: RECORD KEEPING, DOCUMENTA		12/28/2016		\$ 0.00	\$ 0.00
COSTS	6/24/2020	7/23/2020		\$ 383.64	\$ 0.00

The information below is self reported by the practitioner. For Florida health care practitioner discipline, see information listed above.

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 \$5,000.00 Within last 10 years.

This profession is not required by F.S., to report bankruptcy and liability claims.

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 not provided any professional or community service activities, honors, or awards.

Publications

This practitioner has not provided any publications that he/she authored in peer-reviewed medical literature within the last ten years.

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
FLORIDA CHIROPRACTIC ASSOCIATION