



BEATA CATHERINE CASANAS

License Number: OS8196

Profession	Osteopathic Physician
License Status	CLEAR/Active
Year Began Practicing	01/01/2000
License Expiration Date	03/31/2026
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

General Information

Primary Practice Address

BEATA CATHERINE CASANAS
TAMPA GENERAL HOSPITAL
1 TAMPA GENERAL CIRCLE, G-318
TAMPA, FL 33606

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
THE TAMPA GENERAL HOSPITAL	TAMPA	FLORIDA
KINDRED HOSPITAL	TAMPA	FLORIDA
H. LEE MOFFITT CANCER CTR & RESEARCH INST	TAMPA	FLORIDA
ADVENT HEALTH	TAMPA	FLORIDA

Email Address

Please contact at: beata@usf.edu

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 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
NOVA SOUTHEASTERN UNIVERSITY	DO	8/1/1995 - 5/1/1999	05/01/1999

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
UNIVERSITY OF SOUTH FLORIDA	TAMPA	FLORIDA	01/01/1991	01/01/1993	BS - BACHELOR OF SCIENCE

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
PALMETTO GENERAL HOSPITAL	ROTATING INTERNSHIP	FAMILY PRACTICE		HIALEAH	FLORIDA	07/01/1999	06/30/2000
UNIVERSITY OF SOUTH FLORIDA	RESIDENCY	IM - INTERNAL MEDICINE		TAMPA	FLORIDA	07/01/2000	06/30/2003
UNIVERSITY OF SOUTH FLORIDA	FELLOWSHIP	IM - INFECTIOUS DISEASE		TAMPA	FLORIDA	07/01/2003	06/30/2005

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
ADVISOR	UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M	TAMPA	FLORIDA
FACULTY MENTOR	UNIVERSITY OF FLORIDA COLLEGE OF MEDICIN	TAMPA	FLORIDA
FACULTY VOLUNTEER PRECEPTOR	UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M	TAMPA	FLORIDA
ASSOCIATE PROFESSOR OF MEDICINE	UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M	TAMPA	FLORIDA
MEDICAL DIRECTOR HILLSBOROUGH COUNTY HEALTH DEPT	UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M	TAMPA	FLORIDA
PROGRAM DIRECTOR INFECTIOUS DISEASE FELLOWSHIP	UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M	TAMPA	FLORIDA

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 INTERNAL MEDICINE	IM - INFECTIOUS DISEASE	
AMERICAN BOARD OF INTERNAL MEDICINE	IM - INTERNAL MEDICINE	

Financial Responsibility

Financial Responsibility

I have hospital staff privileges and I have obtained and maintain 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 FS, from a surplus lines insurer as defined under s.626.914(2)FS, from a risk retention group as defined under s.627.942 FS, from the Joint Underwriting Association established under s.627.351(4)FS, or through a plan of self-insurance as provided in s.627.357 FS, or through a plan of self-insurance which meets the conditions specified for satisfying financial responsibility in s.766.110 FS.

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:

The practitioner did not provide this mandatory information pertaining to final disciplinary action taken by a specialty board within the last 10 years

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:
C.H.A.R.T SCHOLARS PROGRAM

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
CONTRIBUTION TO ID AWARD, THE INDIAN PRACTITIONER	AOA, AMA, GOLDEN KEY, NATIONAL HONORS SOCIETY
RESIDENT OF THE MONTH AWARD	VA HOSPITAL IN TAMPA
CHART SCHOLARS PROGRAM	
THE 1ST DR. PETER MAMUNES AWARD	BROWARD GENERAL HOSPITAL
ALPHA OMEGA ALPHA	MEDICAL HONORS SOCIETY
SCHOLAR 13TH CLASS OF THE PUBLIC HEALTH LEADERSHIP INSITUTE	FLORIDA PUBLIC HEALTH LEADERSHIP INSTITUTE
SILVER PERFORMANCE AWARD	UNIVERSITY OF SOUTH FLORIDA COM
INFECTIOUS DISEASE AWARD	THE INDIAN PRACTITIONER GROUP MUMBAI INDIA

Publications

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

Title	Publication	Date
MYCOBACTERIUM TUBERCULOSIS: CROHN'S DISEASE	THE INDIAN PRACTITIONER	03/01/2001
TUBERCULOSIS OTITIS, INFECTIONS IN MEDICINE	IN PRESS	
READING THE RED FACE, INFECTIONS IN MEDICINE	IN PRESS	
RAPIDLY GROWING MYCOBACTERIUM INFECTIONS IN CANCER PATIENTS	INFECTIOUS DISEASES IN CLINICAL PRACTICE	06/10/2014

Professional Web Page

www.IDFellowship.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.

RUSSIAN
GERMAN
POLISH
CZECHOSLOVAKIAN

Other Affiliations

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

Affiliation
AMERICAN COLLEGE OF PHYSICIANS
AMERICAN OSTEOPATHIC ASSOCIATION
INFECTIOUS DISEASE SOCIETY OF AMERICA