



## RICHARD DWIGHT TEN HULZEN

License Number: ME80332

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	Not Provided
License Expiration Date	01/31/2027
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes

## General Information

### Primary Practice Address

RICHARD DWIGHT TEN HULZEN  
MAYO CLINIC FLORIDA  
4500 SAN PABLO ROAD S.  
JACKSONVILLE, FL 32224

### 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
MAYO CLINIC	JACKSONVILLE	FLORIDA

### Email Address

Please contact at: [tenhulzen.richard@mayo.edu](mailto:tenhulzen.richard@mayo.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
MAYO MEDICAL SCHOOL	M.D.	9/1/1991 - 5/20/1995	05/20/1995

## 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
NEBRASKA WESLEYAN UNIVERSITY	LINCOLN	NEBRASKA	08/01/1987	05/30/1991	BS BIOLOGY

## 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
MAYO CLINIC	RESIDENCY	OPH - OPHTHALMOLOGY		ROCHESTER	MINNESOTA	07/01/1995	06/30/1999
WILLS EYE HOSPITAL	FELLOWSHIP	OPH - OPHTHALMOLOGY	GLAUCOMA	PHILADELPHIA	PENNSYLVANIA	07/01/1999	07/01/2000

## 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
ASSISTANT PROFESSOR	MAYO CLINIC	JACKSONVILLE	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 OPHTHALMOLOGY	OPH - OPHTHALMOLOGY	06/01/2001

## Financial Responsibility

### Financial Responsibility

I have hospital staff privileges and I have established an irrevocable letter of credit or escrow account in an amount of \$250,000/\$750,000, in accordance with Chapter 675, F. S., for a letter of credit and s. 625.52, F. S., for an escrow account.

## 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](#).**

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:

Duval County Ophthalmology Society (DCOS)  
American Academy of Ophthalmology (AAO)  
Florida Society of Ophthalmology (FSO)  
American Board of Ophthalmology (ABO)  
American Society of Cataract and Refractive Surgeons (ASCRS)  
American Glaucoma Society (AGS)  
Association for Research in Vision and Ophthalmology (ARVO)

### Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
OLYMPIC TORCHBEARER	ROCHESTER, MN 1996

### Publications

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

Title	Publication	Date
EFFECT OF FIXATION PRESSURE ON JXTACANALICULAR TISSUE...	INVEST OPHTHALMOL VIS SCI	01/01/1996
HEARING LOSS AND PHACOEMULSIFICATION	JOURNAL OF CATARACT AND REFRACTIVE SURGERY	04/01/2000
WHAT IS THE RISK OF DEVELOPING PIGMENTARY GLAUCOMA FROM PIGM	AM J OPHTHALMOL	07/01/2003
IMPACT OF HEARING LOSS AND UNIVERSAL FACE MASKING IN THE COVID-19 ERA.	MAYO CLINIC PROCEEDINGS	08/03/2020
ENDOPHTHALMITIS FOLLOWING COMBINED CATARACT EXTRACTION AND PLACEMENT OF AN ISTENT TRABECULAR BYPASS DEVICE	AM J OPHTHALMOL CASE REP	08/14/2020

### Professional Web Page

This practitioner has not provided any professional web page information.

### 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.

SIGN LANGUAGE  
OTHER

### Other Affiliations

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

Affiliation
AMERICAN ACADEMY OF OPHTHALMOLOGY (AAO)
AMERICAN BOARD OF OPHTHALMOLOGY (ABO)
AMERICAN GLAUCOMA SOCIETY (AGS)
AMERICAN SOCIETY OF CATARACT AND REFRACTIVE SURGERY (ASCRS)
ASSOCIATION FOR RESEARCH IN VISION AND OPHTHALMOLOGY (ARVO)
DUVAL COUNTY OPHTHALMOLOGY SOCIETY (DCOS)
FLORIDA SOCIETY OF OPHTHALMOLOGY (FSO)
MAYO FELLOWS ASSOCIATION (MFA)