STANLEY ALLAN ORDMAN

License Number: ME81312

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing Not Provided
License Expiration 01/31/2026

Date

General Information

Primary Practice Address

STANLEY ALLAN ORDMAN 6801 DIANA COURT BALTIMORE, MD 21209

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

This practitioner currently holds staff privileges at the following hospital/medical/health institutions:

Institution Name	City	State
NEW HORIZONS HEALTH SYSTEMS, INC	OWENTON	KENTUCKY
WOOSTER COMMUNITY HOSPITAL	WOOSTER	OHO
CASEY COUNTY HOSPITAL	LIBERTY	KENTUCKY
SHANDS AT LAKE SHORE	LAKE CITY	FLORIDA
TAYLOR REGIONAL HOSPITAL	CAMPBELLSVILLE	KENTUCKY
NAPLES COMMUNITY HOSPITAL	NAPLES	FLORIDA
LIMA MEMORIAL HOSPITAL	LIMA	OHIO
TWIN LAKES REGIONAL MEDICAL CENTER	LEITCHFIELD	KENTUCKY
DONALSONVILLE HOSPITAL	DONALSONVILLE	GEORGIA
LAKE BUTLER HOSPTIAL	LAKE BUTLER	FLORIDA
HIGHLANDS REGIONAL MEDICAL CENTER	SEBRING	FLORIDA
WESTLAKE REGIONAL HOSPITAL	COLUMBIA	KENTUCKY
ATLANTA MEDICAL CENTER SOUTH CAMPUS	EAST POINT	GEORGIA
WASHINGTON ADVENTIST HOSPITAL	TAKOMA PARK	MARYLAND
ADVENTIST MEDICAL CENTER-REEDLEY	REEDLEY	CALIFORNIA
ADVENTIST MEDICAL CENTER - HANFORD	HANFORD	CALIFORNIA
HI-DESERT MEDICAL CENTER	JOSHUA TREE	CALIFORNIA
MCLAREN CENTRAL MICHIGAN	MOUNT PLEASANT	MICHIGAN
EL CENTRO REGIONAL MEDICAL CENTER	EL CENTRO	CALIFORNIA

Email Address

Please contact at: sao91@aol.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NORTH CAROLINA	MEDICAL DOCTOR
INDIANA	MEDICAL DOCTOR
GEORGIA	MEDICAL DOCTOR
WEST VIRGINIA	MEDICAL DOCTOR
KENTUCKY	MEDICAL DOCTOR
MICHIGAN	MEDICAL DOCTOR
CALIFORNIA	MEDICAL DOCTOR
NEW YORK	MEDICAL DOCTOR
OHIO	MEDICAL DOCTOR
SOUTH CAROLINA	MEDICAL DOCTOR
TENNESSEE	MEDICAL DOCTOR
MARYLAND	MEDICAL DOCTOR

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
TEMPLE UNIV. SCHOOL MEDICINE	MD		05/18/1989

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 MARYLAND DENTAL SCHOOL	BALTIMORE	MARYLAND	09/07/1976	08/29/1980	D.D.S. DENTAL

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
JERSEY SHORE MEDICAL CENTER	INTERNSHIP	TY - TRANSITIONAL YEAR		NEPTUNE	NEW JERSEY	07/01/1989	07/30/1990
WALTER REED ARMY MED CTR.	RESIDENCY	DR - RADIOLOGY		WASHINGTON	DISTRICT OF COLUMBIA	07/01/1995	06/30/1997
FITZSIMONS ARMY MEDICAL CENTER	RESIDENCY	DR - DIAGNOSTIC RADIOLOGY		AURORA	COLORADO	07/01/1992	06/30/1995

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 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 RADIOLOGY	DR - DIAGNOSTIC RADIOLOGY	11/03/1997

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