



PATRICIO GERARDO ROSSI

License Number: ME84396

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 07/01/1999
License Expiration 01/31/2028
Date

General Information

Primary Practice Address

PATRICIO GERARDO ROSSI
7424 LOS PINOS BLVD
CORAL GABLES, FL 33143

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
	FLORIDA CITY	FLORIDA
	WINTER HAVEN	FLORIDA
	PLANT CITY	FLORIDA
OAK HILL HOSPITAL	BROOKSVILLE	FLORIDA
REGIONAL HOSPITAL AT BAYONET POINT	HUDSON	FLORIDA
BRANDON REGIONAL HOSPITAL	BRANDON	FLORIDA
CITRUS MEMORIAL HOSPITAL	CITRUS	FLORIDA
TRINITY HOSPITAL	TRINITY	FLORIDA

Email Address

Please contact at: radusa@comcast.net

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
SOUTH CAROLINA	MEDICAL DOCTOR
KENTUCKY	MEDICAL DOCTOR
INDIANA	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
UNIVERSIDAD DE BUENOS AIRES	MD	3/1/1991 - 12/1/1997	12/10/1997

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
UNIVERSITY OF MIAMI	INTERNSHIP	GS - SURGERY		MIAMI	FLORIDA	06/01/1999	06/01/2000
JACKSON MEMORIAL HOSPITAL	RESIDENCY	DR - RADIOLOGY		MIAMI	FLORIDA	07/01/2000	06/30/2004

Academic Appointments

Graduate Medical Education

This practitioner has not 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
AMERICAN BOARD OF RADIOLOGY	RADIOLOGY - DIAGNOSTIC	

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.

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](#).

The following liability actions have been reported as required under section 456.049, F. S., within the previous 10 years:

Incident Date	County	Judicial Case	Settlement Date	Amount	Policy Amount
03/13/2013	DADE		12/13/2016	\$250,000.00	\$0.00

Optional Information

Committees/Memberships

This practitioner has an affiliation with the following committees:
AMERICAN ROENTGEN RAY SOCIETY

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
2004 FLORIDA RESIDENT OF THE YEAR AWARD	15TH ANNUAL FLORIDA MEDICAL BUSINESS AWARDS
2003 AWARD RECIPIENT-AMERICAN COLLEGE OF RADIOLOGY	J.T. RUTHERFORD INTERNSHIP PROGRAM IN GOVERNMENT RELATIONS
2003 ROENTGEN RESIDENT/FELLOW RESEARCH AWARD	RSNA RESEARCH AND EDUCATION FOUNDATION
2003 ROBERT SHAPIRO RESIDENT RESEARCH AWARD	UNIVERSIT OF MIAMI, SCHOOL OF MEDICINE
2004 FLORIDA RESIDENT OF THE YEAR AWARD	FLORIDA RADIOLOGICAL SOCIETY
2003 NOMINEE FOR RESIDENT OF THE YEAR	14TH ANNUAL FLORIDA MEDICAL BUSINESS AWARDS
2001 RESEARCH GRANT AWARD	SOCIETY OF URORADIOLOGY RESEARCH
DISTINGUISHED PHYSICIAN 2005	FLORIDA MEDICAL ASSOCIATION
DISTINGUISHED PHYSICIAN 2006	FLORIDA MEDICAL ASSOCIATION
DISTINGUISHED PHYSICIAN 2007	FLORIDA MEDICAL ASSOCIATION

Community Service/Award/Honor	Organization
2007 AMERICAS TOP RADIOLOGISTS	CONSUMERS RESEARCH COUNCIL OF AMERICA

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 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.

SPANISH

PORTUGUESE

Other Affiliations

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

Affiliation
AMERICAN ROENTGEN RAY SOCIETY