DONALD CHARLES LANZA MD

License Number: ME88591

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 01/01/1991
License Expiration 01/31/2026

Date

General Information

Primary Practice Address

DONALD CHARLES LANZA MD 550 94TH AVE SINUS & NASAL INSTITUTE OF FL. ST PETERSBURG, FL 33702

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
ST. ANTHONYS HOSPITAL	SAINT PETERSBURG	FLORIDA

Email Address

Please contact at: dclanza@sniflmd.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
OHIO	

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
SUNY HEALTH SCIENCE CENTER	MD	8/1/1981 - 5/1/1985	05/23/1985

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
FORDHAM UNIVERSITY	BRONX	NEW YORK	09/01/1975	05/01/1979	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
ALBANY MEDICAL CENTER	INTERNSHIP	GS - SURGERY		ALBANY	NEW YORK	07/01/1985	07/01/1987
ALBANY MEDICAL CENTER	RESIDENCY	OTO - OTOLARYNGOLOGY	,	ALBANY	NEW YORK	07/01/1987	07/01/1990
JOHNS HOPKINS MEDICAL INST	FELLOWSHIP	OTO - OTOLARYNGOLOGY	,	BALTIMORE	MARYLAND	07/01/1990	01/01/1991
HOSPITAL OF THE UNIVERSITY OF PENN	FELLOWSHIP	OTO - OTOLARYNGOLOGY	,	PHILADELPHIA	PENNSYLVANIA	01/01/1991	07/01/1991

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:

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 OTOLARYNGOLOGY	OTO - OTOLARYNGOLOGY	10/02/1990

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.

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
11/05/2020	PINELLAS	22-003380-CI	05/04/2023	\$350,000.00	\$1,000,000.00

Optional Information

Committees/Memberships

This practitioner has an affiliation with the following committees: AMERICAN RHINOLOGIC SOCIETY AMERICAN COLLEGE OF SURGEONS(FELLOW) AMERICAN MEDICAL ASSN.

FELLOW AMERICAN ACADEMY OTOLARYNGOLOGY

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
OTOLARYNGOLOGY	ALBANY MEDICAL CENTER

Publications

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

Title	Publication	Date
CLINICALLY SIGNIFICANT RHINOSINUSITIS CAN BE ASYMPTOMATIC	OTOLARYNGOL HEAD NECK SURG 2015 DEC 153 6 1077-8	12/15/2015
EVIDENCE THAT HUMAN PAPILLOMAVIRUS CAUSES INVERTED PAPILLOMA	INT FORUM ALLERGY RHINOL 2014 DEC 4 12 995-1001	12/15/2014
RHINOSINUSITIS INNATE IMMUNITY MANNOSE-BINDING LECTIN	ANN OTOL RHINOL LARYNGOL 2015 FEB 124 2 102-6	02/15/2015
ORAL ANTIFUNGAL THERAPY FOR FUSARIUM- ASSOCIATED CRS	INT FORUM ALLERGY RHINOL 2012 JAN-FEB 2 1 45-50	01/15/2012
FELLOWSHIP TRAINING IN RHINOLOGY ARS	INT FORUM ALLERGY RHINOL 2011 MAY-JUN 1 3 206-11	05/15/2011

Professional Web Page

www.sniflmd.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.

SPANISH

Other Affiliations

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