



UNYIME OKPOSONG NSEYO

License Number: ME91775

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	07/01/1977
License Expiration Date	01/31/2027
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes

General Information

Primary Practice Address

UNYIME OKPOSONG NSEYO
3201 SW 34TH ST
OCALA
OCALA, FL 34474

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
SHANDS AT LAKE SHORE	LAKE CITY	FLORIDA
SHANDS AT STARKE	STARKE	FLORIDA
ED FRASER MEMORIAL HOSPITAL	MACCLENNY	FLORIDA

Email Address

Please contact at: docunyime@gmail.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
VIRGINIA	MD
NEW YORK	MD
CALIFORNIA	MD
WEST VIRGINIA	MD
NEBRASKA	MD
SOUTH CAROLINA	MD
NEBRASKA	MEDICINE

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
UNIVERSITY OF MISSOURI	MD	8/1/1972 - 12/1/1976	12/18/1976

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 OREGON	EUGENE	OREGON	09/01/1968	06/01/1972	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
UNIVERSITY OF MICHIGAN	RESIDENCY	GS - SURGERY		ANN ARBOR	MICHIGAN	07/01/1978	01/01/1979
UNIVERSITY OF MICHIGAN HOSPITAL	INTERNSHIP	GS - SURGERY		ANN ARBOR	MICHIGAN	01/01/1977	01/01/1978
CHARLOTTE MEMORIAL HOSPITAL AND MEDICAL CENTER	RESIDENCY	U - UROLOGY		CHARLOTTE	NORTH CAROLINA	01/01/1979	01/01/1980
ALBANY MEDICAL COLLEGE AND AFFILIATED HOSPITAL	RESIDENCY	U - UROLOGY		ALBANY	NEW YORK	01/01/1980	01/01/1982
ROSWELL PARK CANCER INSTITUTE	FELLOWSHIP	U - UROLOGY	ONCOLOGY			07/01/1982	06/30/1984

Academic Appointments

Graduate Medical Education

This practitioner has 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 UROLOGY	U - UROLOGY	02/01/1984

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 an affiliation with the following committees:
Infections and Quality Control Committee
Shands Lake Shore Hos

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
PRES TRICOUNTYACS WEST VA 1996-1999	AMERICAN CANCER SOCIETY
PATRON	ALACHUA COUNTY PROSTATE CANCER ALLIANCE
FORMER BOARD MEMBER	NORTH FLORIDA CHAPTER AMERICAN CANCER SOCIETY

Publications

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

Title	Publication	Date
PHOTOSELECTIVE VAPORIZATION OF THE PROSTATE (PVP) FOR THE	JOURNAL OF UROLOGY VOL 6	10/01/2004
CD44 STANDARD FORM EXPRESSION AS A PREDICTOR OF PROGRESSIO	INTERNATIONAL UROLOGY AND NEPHROLOGY	01/01/2001
LASER VAPORIZATION OF THE PROSTATE IN THE MANAGEMENT OF UR	SPIE MEETING	01/01/2004
THE LIPOPHILIC EXTRACT OF HYPERICUM PERFORATUM L, EXERTS	INTERNATIONAL JOURNAL OF UROLOGY	10/01/2003
EFFECT OF PH ON MUTAGENICITY OF URINE FROM SMOKERS AND NON	ENVIRONMENTAL TOXICOLOGY AND PHARMACOLOGY	01/01/2002

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.

OTHER

Other Affiliations

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

Affiliation
AMERICAN ASSOCIATION FOR THE ADVANCEMENT OF SCIENCE
AMERICAN COLLEGE OF CLINICAL ONCOLOGY
AMERICAN COLLEGE OF SURGEONS
AMERICAN MEDICAL ASSOCIATION
AMERICAN UROLOGICAL ASSOCIATION