



## ELISE FORTIN RIDDLE MD

License Number: ME93814

Profession Medical Doctor  
License Status Clear/Active  
Year Began Practicing 07/01/1994  
License Expiration 01/31/2027  
Date

## General Information

### Primary Practice Address

ELISE FORTIN RIDDLE MD  
1222 SOUTH ORANGE AVENUE, 2ND  
2ND FLOOR, MP 817  
ORLANDO, FL 32806

### 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
ORLANDO REGIONAL MEDICAL CENTER-ORANGE	ORLANDO	FLORIDA

### Email Address

Not Provided

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NEVADA	MD
OKLAHOMA	MD
ARKANSAS	MD
TEXAS	MD

### 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 ARKANSAS MD	MD	7/1/1990 - 5/1/1994	05/21/1994

## 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
ARKANSAS TECH UNIVERSITY	RUSSELLVILLE	ARKANSAS	06/01/1987	06/01/1990	BS CHEMISTRY

## 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
UAMS ARKANSAS CHILDREN'S HOSPITAL	RESIDENCY	PD - PEDIATRICS		LITTLE ROCK	ARKANSAS	07/01/1994	06/01/1997
BAYLOR TEXAS CHILDREN'S HOSPITAL	FELLOWSHIP	PD - PEDIATRIC CARDIOLOGY		HOUSTON	TEXAS	07/01/1997	06/01/2000

## 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 currently holds faculty appointments at the following medical/health related institutions of higher learning:

Title	Institution	City	State
CLINICAL INSTRUCTOR	UNIVERSITY OF CENTRAL FLORIDA COLLEGE OF MEDICINE	ORLANDO	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 PEDIATRICS	PD - PEDIATRIC CARDIOLOGY	08/01/2004

## 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](#).**

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:

VICE CHAIRMAN DEPARTMENT OF PEDIATRICS ARNOLD AND WINNIE PAL  
STATE OF FLORIDA AHCA PCTAP MEMBER

MEDICAL STAFF LEADERSHIP COMMITTEE, ARNOLD PALMER HOSPITAL

MEDICAL STAFF LEADERSHIP COMMITTEE, WINNIE PALMER HOSPITAL

MEDICAL EXECUTIVE COMMITTEE, ORLANDO HEALTH

DIRECTOR, FETAL CARDIOLOGY & FETAL ECHOCARDIOGRAPHY, APH WPH

### Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
ALPHA OMEGA ALPHA PRESENTER YOUNG INVESTIGATORS	AOA AND AAP
GLOSGOW MEMORIAL AWARD AND BARTON AWARD	UAMS
DONALD E.HILL AWARD FOR EXCELLENCE IN RESEARCH	UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES
BEST DOCTORS IN ORLANDO	BEST DOCTORS
TOP DOCTOR	TOP DOCTORS

Community Service/Award/Honor	Organization
AMERICA'S TOP CARDIOLOGISTS	CONSUMER RESEARCH COUNCIL OF AMERICA
BEST DOCTORS IN AMERICA	BEST DOCTORS

### Publications

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

Title	Publication	Date
ASSOCIATION OF NITRIC OXIDE DOSE METHEMOGLOBIN LEVELS	AMERICAN JOURNAL OF CARDIOLOGY	08/15/2002
BLASTOMYCOSIS IN CHILDREN	CLINICAL INFECTIOUS DISEASES	03/22/1996

### Professional Web Page

<https://www.arnoldpalmerhospital.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 provided the following national, state, local, county, and professional affiliations:

Affiliation
AMERICAN SOCIETY OF ECHOCARDIOGRAPHY
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