MA-LI WONG

License Number: ME98288

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 01/01/1987
License Expiration 01/31/2027

Date

General Information

Primary Practice Address

MA-LI WONG 505 IRVING AVE 3302 SYRACUSE, NY 13210

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

This practitioner has not indicated any staff privileges.

Email Address

Please contact at: maliwong7@gmail.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

| State | Profession |
|--------------|------------|
| PENNSYLVANIA | MD |
| CONNECTICUT | MD |
| TEXAS | MD |
| CALIFORNIA | 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 |
|---|--------------|----------------------|-----------------|
| FACULDADE DE MEDICINA DA UNIVERSIDADE, BRAZIL | MD | 2/1/1977 - 12/1/1982 | 12/19/1982 |

Other Health Related Degrees

The practitioner did not provide this mandatory information.

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 |
|--------------------------------|-----------------|-------------------|-------------------------|---------------|---------------------|---------------------------|-------------------------|
| MONTEFIORE MED CTR | RESIDENCY | P - PSYCHIATRY | | BRONX | NEW YORK | 07/01/1986 | 06/30/1990 |
| CLINICAL NEUROENDOCRINOLOGY | FELLOWSHIP | P - PSYCHIATRY | | BETHESDA | MARYLAND | 07/01/1989 | 06/30/1990 |
| AFFAIRS MED CTR | RESIDENCY | OTHER | | WEST HAVEN | CONNECTICUT | 07/01/1990 | 06/30/1991 |

Academic Appointments

Graduate Medical Education

The practitioner did not provide this mandatory information.

Academic Appointments

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

| Title | Institution | City | State |
|---|--|-------|---------|
| PROFESSOR AND VICE-CHAIR TRANSLATIONAL RESEARCH | H UNIVERSITY OF MIAMI SCHOOL OF MEDICINE | MIAMI | FLORIDA |
| DIRECTOR CENTER ON PHARMACOGENOMICS | UNIVERSITY OF MIAMI SCHOOL OF MEDICINE | MIAMI | FLORIDA |

Specialty Certification

Specialty Certification

The practitioner did not provide this mandatory information.

Financial Responsibility

Financial Responsibility

Financial Exemption 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:

UNIV MIAMI GCRC ADVISORY COMMITTEE UNIV

UNIV MIAMI NEUROSCIENCE PROGRAM FACULTY

THE ENDOCRINE SOCIETY

SOCIETY FOR NEUROSCIENCE

AMERICAN ASSOC FOR ADVANCEMENT OF SCI

INTL SOCIETY FOR PHARMACOGENOMICS

U MIAMI INSTITUTE FOR MED DISCOVERY AND HEALTH DISPARITIES

Professional or Community Service Awards

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

| Community Service/Award/Honor | Organization |
|-------------------------------|--|
| HENRY L MOSES AWARD | MONTEFIORE MED CENTER STAFF ALUMI ASSOC NY |
| NIH FARE AWARD | NIH |

Publications

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

| Title | Publication | Date |
|--|------------------------------|------------|
| CASPASE-1 DEF REDUCES INFLAMMATION INDUCED BRAIN TRANSCRIP | PROC NATL ACAD SCI USA | 04/24/2007 |
| PHOSPHODIESTERASE GENES ARE ASSOC WITH SUSCEPTIBILITY ETC | PROC NATL ACAD SCI USA | 10/10/2006 |
| RESEARCH AND TREATMENT APPROACHES TO DEPRESSION | NATURE REVIEWS NEUROSCIENCES | 05/01/2001 |

| Title | Publication | Date |
|---------------------------------|------------------------|------------|
| PRONOUCES AND SUSTAINED CENTRAL | PROC NATL ACAD SCI USA | 01/04/2000 |
| HYPERMORADRENERGIC | | |

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.

PORTUGUESE

Other Affiliations

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