



## RICHARD LEE CRANK JR

License Number: OS10553

Profession                      Osteopathic Physician  
License Status                CLEAR/Active  
Year Began Practicing      Not Provided  
License Expiration          03/31/2026  
Date

## General Information

### Primary Practice Address

RICHARD LEE CRANK JR  
1345 WEST BAY DR SUITE 301  
LARGO, FL 33770

### 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
LARGO MEDICAL CENTER	LARGO	FLORIDA

### Email Address

Please contact at: [rcrank@atsu.edu](mailto:rcrank@atsu.edu)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
MISSOURI	PHYSICIAN AND SURGEON
MISSOURI	PHYSICIAN AND SURGEON

### 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
KIRKSVILLE COLLEGE OF OSTEOPATHIC MEDICI	DO	8/1/2000 - 6/1/2004	06/01/2004

## 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 OF TOLEDO	TOLEDO	OHIO	01/01/1999	05/01/2000	BS BIOLOGY

## 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
CHICAGO COLLEGE OF OSTEOPATHIC MEDICINE	INTERNSHIP	AOA APPROVED INTERNSHIP		OLYMPIA FIELDS	ILLINOIS	06/21/2004	06/20/2005
ST. JAMES HOSPITAL & HEALTH CENTERS	RESIDENCY	ORS - ORTHOPAEDIC SURGERY		OLYMPIA FIELDS	ILLINOIS	07/01/2005	06/30/2009
FLORIDA ORTHOPEDIC INSTITUTE	FELLOWSHIP	ORS - ADULT RECONSTRUCTIVE ORTHOPAEDICS		TEMPLE TERRACE	FLORIDA	08/01/2009	01/31/2010
ORLANDO REGIONAL MEDICAL CENTER	FELLOWSHIP	ORS - ORTHOPAEDIC TRAUMA		ORLANDO	FLORIDA	02/01/2010	07/31/2010

## 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:

Title	Institution	City	State
FACULTY	UNIVERSITY OF SOUTH FLORIDA COLLEGE OF M	LARGO	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
AMERICAN OSTEOPATHIC BOARD OF ORTHOPEDIC	ORS - ORTHOPAEDIC SURGERY

## Financial Responsibility

### Financial Responsibility

I have hospital staff privileges and I have obtained and maintain 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 FS, from a surplus lines insurer as defined under s.626.914(2)FS, from a risk retention group as defined under s.627.942 FS, from the Joint Underwriting Association established under s.627.351(4)FS, or through a plan of self-insurance as provided in s.627.357 FS, or through a plan of self-insurance which meets the conditions specified for satisfying financial responsibility in s.766.110 FS.

# 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:  
American Osteopathic Academy of Orthopedics CME chair

### Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
	AMERICAN OSTEOPATHIC ASSOCIATION
	AMERICAN OSTEOPATHIC ACADEMY OF ORTHOPEDICS

**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**

[www.largoorthopedics.com](http://www.largoorthopedics.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.

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