



## GUSTAVO FERRER-GONZALEZ

License Number: ME104425

Profession Medical Doctor  
License Status Clear/Active  
Year Began Practicing 07/17/2003  
License Expiration 01/31/2027  
Date

## General Information

### Primary Practice Address

GUSTAVO FERRER-GONZALEZ  
17900 SW 57TH ST  
SOUTHWEST RANCHES, FL 33331

### 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
KINDRED HOSPITAL	HOLLYWOOD	FLORIDA
AVENTURA HOSPITAL AND MEDICAL CENTER	AVENTURA	FLORIDA

### Email Address

Please contact at: [Execassist@pulmonary-institute.com](mailto:Execassist@pulmonary-institute.com)

### Other State Licenses

This practitioner has not indicated any additional state licensures.

### 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
HIGHER INSTITUTE OF MEDICAL SCIENCES OF SANTIAGO DE CUBA, GUANTANAM	MD	9/1/1988 - 7/1/1994	07/30/1994

Other Health Related Degrees

This practitioner does not hold any additional health related degrees.

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
TEXAS TECH UNIVERSITY	RESIDENCY	IM - INTERNAL MEDICINE		EL PASO	TEXAS	07/01/2003	07/01/2006
THE GEORGE WASHINGTON UNIVERSITY	FELLOWSHIP	IM - PULMONARY DISEASE AND CRITICAL CARE		WASHINGTON	DISTRICT OF COLUMBIA	07/01/2006	07/01/2009

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
ASSITANT PROFESSOR OF MEDICINE	FLORIDA ATLANTIC UNIVERSITY	WESTON	FLORIDA
AFFILIATED ASSISTANT PROFESSOR OF MEDICINE	FLORIDA INTERNATIONAL UNIV. COLLEGE OF MEDICINE	WESTON	FLORIDA
ADJUNCT CLINICAL FACULTY	BARRY UNIVERSITY	WESTON	FLORIDA
AFFILIATED ASSISTANT PROFESSOR OF MEDICINE	ST. GEORGE UNIVERSITY SCHOOL OF MEDICINE	WESTON	FLORIDA
ASSOCIATE CLINICAL PROFESSOR	NOVA SOUTHEASTERN UNIVERSITY	DAVIE	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 INTERNAL MEDICINE	IM - INTERNAL MEDICINE	09/01/2006
AMERICAN BOARD OF INTERNAL MEDICINE	IM - PULMONARY DISEASE	11/01/2008
AMERICAN BOARD OF INTERNAL MEDICINE	IM - CRITICAL CARE MEDICINE	

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:

SOCIETY OF CRITICAL CARE MEDICINE

AMERICAN COLLEGE OF CHEST PHYSICIANS

NATIONAL HISPANIC MEDICAL ASSOCIATION

### Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
BEST RESIDENT AS A TEACHER MARCH 2004	TEXAS TECH UNIVERSITY
PATIENTS CHOICE AWARD 2012	HTTP WWW PATIENTSCHOICE ORG
TOP PULMONOLOGIST 2012	U S NEWS IN PARTNERSHIP WITH CASTLE CONN
BEST DOCTORS 2013	US NEWS & WORLD REPORT
TOP DOCTORS 2013	CASTLE CONNOLLY

### Publications

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

Title	Publication	Date
CERVICAL SPINE MANIPULATION AN ALTERNATIVE MEDICAL PRO	SOUTHERN MEDICAL JOURNAL 2007 VOLUME 100 2 201-210	04/04/2007
2- HOOKWORM DETECTED BY CAPSULE ENDOSCOPY	JOURNAL OF GASTROINTESTINAL ENDOSCOPY 2005 VOLUME 62 5 78	11/01/2005
SUPERIOR VENA CAVA SYNDROME	EL PASO PHYSICIANS 2005 VOLUME 28 5 12-13	10/01/2005
ECONOMIC AND SOCIAL IMPACT OF THE NATIONAL TUBERCULOSIS CONT	SAÚDE PÚBLICA RIO DE JANEIRO 16 3 687-699 JUL-SET 200	07/01/2000
OUTCOMES OF MULTIDRUG-RESISTANT TUBERCULOSIS AMONG BINATIONA	AM J TROP MED HYG 2010 NOV 83 5 1056-8	11/01/2010
AIRBAG PNEUMONITIS	CASE REPORT MED	11/01/2010
ENDOBONCHIAL ULTRASONOGRAPHY VS CONVENTIONAL TRANSBRONCHIAL	CHEST	01/01/2010
Q HOW SHOULD ONE INVESTIGATE A CHRONIC COUGH	CLEVE CLIN J MED 2011 FEB 78 2 84-5 89	02/01/2011

### Professional Web Page

www.icehealthnet.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
AVENTURA HOSPITAL AND MEDICAL CENTER PULMONARY FELLOWSHIP