JOEL M WILENTZ M.D.

License Number: ME14840

Profession Medical Doctor
License Status RETIRED/
Year Began Practicing 01/01/1965
License Expiration 01/31/2021

Date

General Information

Primary Practice Address

JOEL M WILENTZ M.D. 20155 BOCA WEST DRIVE C304 BOCA RATON, FL 33434

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

This practitioner currently holds staff privileges at the following hospital/medical/health institutions:

Institution Name	City	State
AVENTURA HOSPITAL AND MEDICAL CENTER	AVENTURA	FLORIDA

Email Address

Please contact at: Iwilentz@gmail.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 not indicated whether 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 ZURICH	MD	1/1/1958 - 6/1/1963	06/01/1963

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
COLUMBIA UNIVERSITY	NEW YORK	NEW YORK	06/01/1952	06/01/1956	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
BROOKDALE HOSPITAL CENTER	INTERNSHIP	TY - TRANSITIONAL YEAR			NEW YORK	09/01/1963	08/01/1964
NEW YORK UNIVERSITY MEDICAL CENTER	RESIDENCY	D - DERMATOLOGY		NEW YORK	NEW YORK	10/01/1964	09/30/1966
MILITARY SERVICE	OTHER PROGRAM	D - DERMATOLOGY		WASHINGTON	DISTRICT OF COLUMBIA	01/01/1966	04/01/1968
MT SINAI HOSPITAL	RESIDENCY	D - DERMATOLOGY		NEW YORK	NEW YORK	07/01/1966	06/30/1969
MT SINAI HOSPITAL	OTHER PROGRAM	D - DERMATOLOGY		NEW YORK	NEW YORK	07/01/1969	06/30/1970

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
ADJUNCT PROFESSOR, P.A. PROGRAM	NOVA SOUTHEASTERN	FT LAUDERDALE	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 DERMATOLOGY	D - DERMATOLOGY	

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:

FORMER PRESIDENT BAMPAC

ADVISORY BOARD: PA PROGRAM NOVA SOUTHEASTERN UNIVERISTY

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
FORMER PRESIDENT	ARMDI ISRAELI RED CROSS
FORMER BOARD OF DIRECTORS	NEUROLOGICAL INJURY COMP ASSOCIATION STATE OF FLORIDA
BOARD OF GOVERNERS	NOVA SOUTHEASTERN UNIVERSITY
FORMER NATIONAL BOARD OF DIRECTORS	AFMADA-ARMDI
FORMER MEMBER OF BOARD OF NICA	STATE OF FLORIDA
FOUNDING VICE PRESIDENT AND MEMBER OF ORIGINATING GROUP	BROWARD COUNTY DERMATOLOGY SOCIETY

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.scacce.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

GERMAN

RUSSIAN

Other Affiliations

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

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Affiliation	
AMERICAN ACADEMY OF DERMATOLOGY	
AMERICAN SOCIETY FOR DERMATOLOGIC SURGERY	
ASSOCIATION OF MILITARY SURGEONS	
BROWARD COUNTY DERMATOLOGY SOCIETY	