



LAZARO OSCAR BRAVO JR

License Number: ME108231

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 07/01/2002
License Expiration 01/31/2027
Date

General Information

Primary Practice Address

LAZARO OSCAR BRAVO JR
13340 METRO PARKWAY
SUITE 400
FORT MYERS, FL 33966

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
LEHIGH REGIONAL MEDICAL CENTER	LEEHIGH ACRES	FLORIDA
GULF COAST MEDICAL CENTER	FORT MYERS	FLORIDA
LEE MEMORIAL HOSPITAL-HEALTHPARK	FORT MYERS	FLORIDA
PHYSICIANS REGIONAL HOSPITAL	NAPLES	FLORIDA
SELECT SPECIALTY HOSPITAL	FORT MYERS	FLORIDA

Email Address

Please contact at: Themosticles32@gmail.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
OHIO	MEDICAL
NEW MEXICO	MEDICAL
WYOMING	MEDICAL

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
UNIVERSIDAD CENTRAL DEL ESTE	MD	4/1/1979 - 2/1/1983	02/03/1983

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
UNIVERSIDAD CENTRAL DEL CARIBE	RESIDENCY	IM - INTERNAL MEDICINE		BAYAMON	PUERTO RICO	07/01/1997	06/01/1998
THE JEWISH HOSPITAL	RESIDENCY	IM - INTERNAL MEDICINE		CINCINNATI	OHIO	07/01/1998	12/01/2000
WILFORD HALL MEDICAL CENTER	FELLOWSHIP	IM - PULMONARY DISEASE AND CRITICAL CARE		HOUSTON	TEXAS	07/01/2002	06/01/2005

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 does not currently hold faculty appointments at any medical/health related institutions of higher learning.

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	08/19/2003
AMERICAN BOARD OF INTERNAL MEDICINE	IM - PULMONARY DISEASE AND CRITICAL CARE	

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:

MEDICAL EXECUTIVE COMMITTEE
PHARMACY AND THERAPEUTICS
CRITICAL CARE
CHIEF OF MEDICINE
BOARD OF TRUSTEES
AMERICAN COLLEGE OF CHEST PHYSICIANS
AMERICAN COLLEGE OF PHYSICIANS
SOCIETY OF CRITICAL CARE
AMERICAN ACADEMY OF SLEEP MEDICINE
AMERICAN COLLEGE OF BRONCHOLOGY

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
FACULTY OF THE YEAR	FAMILY PRACTICE RESIDENCY PROGRAM TRAVIS AFB
BEST UTILIZATION OF CPOE	LEHIGH REGIONAL MEDICAL CENTER

Publications

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

Title	Publication	Date
ESOPHAGEAL DUPLICATION CYST PRESENTING AS CHRONIC COUGH	HEST MEETING ABSTRACTS 2003 124 263S-264S	07/01/2003
OCHROCONIS GALLOPAVUM AND MYCOBACTERIUM AVIUM INTRACELLULARE	CHEST MEETING ABSTRACTS 2004 126 975S	02/01/2004
TIDAL VOLUME MEASUREMENTS DURING HIGH FREQUENCY OSCILLATORY	PROCEEDINGS AMERICAN THORACIC SOCIETY ABSTRACTS 2005 2 A25	08/05/2005
HIGH-FREQUENCY OSCILLATORY VENTILATION LESSONS LEARNED FROM	CRIT CARE MED 2005 NO 3 SUPPL	03/06/2005
BRONCHIOLITIS OBLITERANS ORGANIZING PNEUMONIA SECONDARY TO C	EUROPEAN JOURNAL OF RADIOLOGY EXTRA 2008	06/06/2008

Professional Web Page

<http://www.leehealth.org>

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.