# MARIAN ELAINE SERRA MD

# License Number: ME113788

ProfessionMedical DoctorLicense StatusRetired/Year Began Practicing01/01/1981License Expiration01/31/2024DateDate

# **General Information**

## **Primary Practice Address**

MARIAN ELAINE SERRA MD 1356 DOVETAIL CT KAMAS, UT 84036

#### 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: justadoc@hotmail.com

#### **Other State Licenses**

This practitioner has indicated the following additional state licensure:

State	Profession
ARIZONA	PHYSICIAN
ARKANSAS	UNLIMITED
CALIFORNIA	PHYSICIAN/SURGEON G
CONNECTICUT	PHYSICIAN/SURGEON
DELAWARE	PHYSICIAN M.D.
GEORGIA	LAPSED
IDAHO	PHYSICIAN/SURGEON
KENTUCKY	PHYSICIAN
MINNESOTA	PHYSICIAN/SURGEON
MISSISSIPPI	MEDICAL DOCTOR
MISSOURI	PHYSICIAN/SURGEON
MONTANA	MEDICAL DOCTOR
NEVADA	MEDICAL DOCTOR
NEW HAMPSHIRE	PHYSICIAN
NEW JERSEY	MEDICAL DOCTOR
NEW MEXICO	MEDICAL DOCTOR
NORTH CAROLINA	MEDICAL DOCTOR
NORTH DAKOTA	MEDICAL DOCTOR
OKLAHOMA	MEDICAL DOCTOR

State	Profession
OREGON	ADMINISTRATIVE MEDICINE
TENNESSEE	MEDICAL DOCTOR
TEXAS	ADMINISTRATIVE MEDICINE
UTAH	PHYSICIAN/SURGEON
VIRGINIA	MEDICINE/SURGERY

# 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
RENSSELAER POLYTECHNIC INSTITUTE	BACHELOR D	8/1/1973 - 6/1/1977	06/01/1977
MOUNT SINAI SCHOOL OF MEDICINE	MD	8/1/1977 - 5/29/1981	05/29/1981

## **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	Program		Other Specialty		State or	Dates Attended	Dates
Name	Туре	Specialty Area	Area	City	Country	From	Attended To
EMORY UNIVERSITY	INTERNSHIP	IM - INTERNAL MEDICINE		ATLANTA	GEORGIA	07/01/1981	07/01/1982
EMORY UNIVERSITY	RESIDENCY	EM - EMERGENCY MEDICINE		ATLANTA	GEORGIA	07/01/1982	06/01/1984

# 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 EMERGENCY MEDICINE	EM - EMERGENCY MEDICINE	12/23/2005

## **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 not indicated any committees on which they serve for any health entity with which they are affiliated.

#### **Professional or Community Service Awards**

This practitioner has not provided any professional or community service activities, honors, or awards.

#### **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**

This practitioner has not provided any professional web page information.

#### Languages Other Than English

This practitioner has not indicated that any languages other than English are used to communicate with patients, or that any translation service is available for patients, at his/her primary place of practice.

#### **Other Affiliations**

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