

License Number: ME126505

ProfessionMedical DoctorLicense StatusClear/ActiveYear Began Practicing01/01/2010License Expiration01/31/2026DateDate

General Information

Primary Practice Address

RYAN CHRISTOPHER TELFORD 4516 N ARMENIA AVENUE SDI RADIOLOGY TAMPA, FL 33603

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
ST. JOSEPH'S HOSPITAL	TAMPA	FLORIDA
SOUTH FLORIDA BAPTIST HOSPITAL	PLANT CITY	FLORIDA
ST. JOSEPH'S HOSPITAL	LUTZ	FLORIDA
ST. JOSEPH'S HOSPITAL	RIVERVIEW	FLORIDA

Email Address

Not Provided

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
ALABAMA	MEDICAL DOCTOR
GEORGIA	MEDICAL DOCTOR
GEORGIA	MEDICAL DOCTOR

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
UNIVERSITY OF SOUTH FLORIDA COLLEGE OF MEDICINE	MD	8/4/2008 - 5/6/2010	05/06/2010
UNIVERSITY OF FLORIDA COLLEGE OF MEDICINE	NO DEGREE	8/22/2006 - 8/4/2008	

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
UNIVERSITY OF ALABAMA AT BIRMINGHAM	FELLOWSHIP	' DR - NEURORADIOLOGY		BIRMINGHAM	ALABAMA	07/01/2015	06/30/2016
UNIVERSITY OF ALABAMA AT BIRMINGHAM	RESIDENCY	DR - DIAGNOSTIC RADIOLOGY		BIRMINGHAM	ALABAMA	07/01/2011	06/30/2015
UNIVERSITY OF ALABAMA AT BIRMINGHAM	INTERNSHIP	IM - INTERNAL MEDICINE		BIRMINGHAM	ALABAMA	06/24/2010	06/30/2011

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 RADIOLOGY	DR - NEURORADIOLOGY	
AMERICAN BOARD OF RADIOLOGY	DIAGNOSTIC IMAGING	

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: AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION OF UNIVERSITY RADIOLOGISTS RADIOLOGICAL SOCIETY OF NORTH AMERICA ALPHA OMEGA ALPHA MEDICAL HONOR SOCIETY FLORIDA RADIOLOGICAL SOCIETY FLORIDA MEDICAL ASSOCIATION American Board of Radiology

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
NEURORADIOLOGY AWARD	UNIVERSITY OF ALABAMA AT BIRMINGHAM
BREAST IMAGING AWARD	UNIVERSITY OF ALABAMA AT BIRMINGHAM
AWARD FOR EXCELLENT PATIENT CARE	MICHAEL PITT MD WANDA BERNREUTER MD
CERTIFICATE OF MERIT	ARRS 2014 EDUCATION EXHIBIT

Community Service/Award/Honor	Organization
BODY CT AWARD 2013	UNIVERSITY OF ALABAMA AT BIRMINGHAM
CARDIOPULMONARY RADIOLOGY AWARD	UNIVERSITY OF ALABAMA AT BIRMINGHAM
CUM LAUDE AWARD	ASNR 2013 POSTER PRESENTATION
CERTIFICATE OF MERIT	RSNA 2012 EDUCATION EXHIBIT
MUSCULOSKELETAL RADIOLOGY AWARD	HIGHLANDS HOSPITAL 2012
OUTSTANDING RESIDENT FELLOW AWARD	ALABAMA ACADEMY OF RADIOLOGY

Publications

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

Title	Publication	Date
HYPERTROPHIC OLIVARY DEGENERATION	NEUROGRAPHICS	09/04/2014
MR ANATOMY OF DEEP BRAIN NUCLEI WITH SPEIAL REF TO SPECIFIC	NEURORADIOLOGY	02/27/2014
NEUROPLASTICITY FOLLOWING LOCOMOTOR AND BACLOFEN THERAPY	JOURNAL OF NEUROTRAUMA	07/24/2007
EFFECTS OF LOCOMOTOR TRAINING ON SPINAL CORD INJURY	JOURNAL OF NEUROTRAUMA	10/23/2006
ITB TREATMENT ENHANCED ACUTE LOCOMOTOR TRAINING	JOURNAL OF NEUROTRAUMA	06/23/2006

Professional Web Page

WWW.SDIRAD.COM

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

Affiliation

BAYCARE HEALTH SYSTEMS

BAYCARE HOSPITAL WESLEY CHAPEL

SDI TELERADIOLOGY