JOEL THOMAS HARDIN

License Number: ME127618

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 01/01/1987
License Expiration 01/31/2026

Date

General Information

Primary Practice Address

JOEL THOMAS HARDIN EMORY HEALTHCARE 1365 CLIFTON RD NE ATLANTA, GA 30322

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
EMORY UNIVERSITY HOSPITAL	ATLANTA	GEORGIA
EMORY UNIVERSITY HOSPITAL MIDTOWN	ATLANTA	GEORGIA
EMORY ST. JOSEPH'S HOSPITAL	ATLANTA	GEORGIA

Email Address

Please contact at: joel.hardin@emory.edu

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
GEORGIA	PHYSICIAN
MISSOURI	MEDICAL DOCTOR
NORTH DAKOTA	MEDICAL DOCTOR
ILLINOIS	MEDICAL DOCTOR
NEW JERSEY	MEDICAL DOCTOR
MINNESOTA	MEDICAL DOCTOR
PENNSYLVANIA	MEDICAL DOCTOR
NEW YORK	MEDICAL DOCTOR
ALABAMA	MEDICAL DOCTOR
TENNESSEE	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	Dates of	Graduation
	Title	Attendance	Date
UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER COLLEGE OF MEDICINE	MD	9/1/1983 - 6/12/1987	06/12/1987

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
ST. LOUIS CHILDREN'S HOSPITAL	RESIDENCY	PD - PEDIATRICS		ST. LOUIS	MISSOURI	07/01/1987	06/30/1990
ST. LOUIS CHILDREN'S HOSPITAL	FELLOWSHIP	PD - PEDIATRIC CARDIOLOGY		ST. LOUIS	MISSOURI	07/01/1990	06/30/1993

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

ASSISTANT PROFESSOR OF INTERNAL MEDICINE EMORY UNIVERSITY SCHOOL OF MEDICINE ATLANTA GEORGIA

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 PEDIATRICS	PD - PEDIATRIC CARDIOLOGY	08/09/1994
AMERICAN BOARD OF INTERNAL MEDICINE	CAR - CARDIOVASCULAR MEDICINE	12/17/2015

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

Title	Publication	Date
THE USE OF ECMO HFOV AND SURFACTANT FOR MANAGEMENT OF INTRAO	J CARDIOTHORAC VASC ANESTH	04/01/2011
ABIOMED BIVENTRICULAR ASSIST DEVICE AS A BRID TO TRANSPLAN	GE PEDIATR CARDIOL	11/01/2010
ENTEROVIRAL SEPSIS AND ISCHEMIC CARDIOMYOPATHY IN A NEONATE	ASAIO J	09/01/2008
SINGLE-VENTRICLE PALLIATION FOR HIGH-RISK NEONATES THE EMER	THORAC CARDIOVASC SURG	01/01/2006

Professional Web Page

www.emoryhealthcare.org/jhardin

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:

This presenter has provided the following hadional, state, local, southly, and professional anniations.
Affiliation
FELLOW AMERICAN COLLEGE OF CARDIOLOGY
FELLOW AMERICAN HEART ASSOCIATION
MEMBER ADULT CONGENITAL HEART DISEASE ASSOCATION
MEMBER FLORIDA MEDICAL ASSOCIATION
MEMBER INTERNATIONAL SOCIETY FOR ADULT CONGENITAL HEART DIS