



## HIND KETTANI

License Number: ME137027

Profession	Medical Doctor
License Status	CLEAR/Active
Year Began Practicing	01/01/2005
License Expiration Date	01/31/2026
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

## General Information

### Primary Practice Address

HIND KETTANI  
ADVENT HEALTH MEDICAL GROUP  
PIONEER HEALTH OUTPATIENT NEUROLOGY  
TAMPA, FL 33613

### 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. LUCIE MEDICAL CENTER	PORT ST LUCIE	FLORIDA

### Email Address

Please contact at: [hindket@gmail.com](mailto:hindket@gmail.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NEW YORK	NEUROLOGY

### 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
HASSAN INSTITUTE OF MEDICAL SCIENCES	MD	9/1/1993 - 6/30/2000	06/01/2001
UNIVERSITE HASSAN II AIN CHOCK-CASABLANCA	MD	9/1/1993 - 6/1/2001	06/01/2001

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
NASSAU UNIVERSITY MEDICAL CENTER	INTERNSHIP	MN - INTERNAL MEDICINE/NEUROLOGY		NEW YORK	UNITED STATES	07/01/2005	06/30/2006
SAINT VINCENT MEDICAL CENTER	RESIDENCY	NEUROLOGY		NEW YORK	NEW YORK	07/01/2006	06/30/2009
VANDERBILT UNIVERSITY	FELLOWSHIP	N - CLINICAL NEUROPHYSIOLOGY		NASHVILLE	TENNESSEE	07/01/2009	06/30/2010

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	CORNELL UNIVERSITY MEDICAL COLLEGE	NEW YORK	NEW YORK

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 PSYCHIATRY AND NEUROLO	NEUROLOGY	10/12/2009
AMERICAN BOARD OF PSYCHIATRY AND NEUROLO	N - CLINICAL NEUROPHYSIOLOGY	12/20/2013

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 Epilepsy Society
- AMERICAN Academy of Neurology
- Board of Epilepsy Florida

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
ACTIVE BOARD MEMBER	EPILEPSY FLORIDA

Publications

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

Title	Publication	Date
&#8203;IMPACT OF EPILEPSY IN PATIENT WITH EPILEPSY AND INTELLECTUAL IMPAIRMENT OR DISABILITY AND IMPROVING CARE BY MAINTAINING A SEIZURE DAIRY. HIND KETTANI MD, MUSAB ZORLU MD	AMERICAN EPILEPSY SOCIETY MEETING	12/05/2018
SENSITIVITY OF PRESYST SEIZURE DETECTION FOR DIFFERENT ELECTROGRAPHIC SEIZURES PATTERNS IN PATIENTS WITH STATUS EPILEPTICUS. POSTER ACNS &#8203;&#8203;MUSAB ZORLU MD, DAVID CHUANG MD, HIND KETTANI MD, REZA ZARNEGAR DO.	AMERICAN EPILEPSY SOCIETY MEETING	04/04/2018
&#8203;SYNOPSIS OF NEUROLOGICAL AND PSYCHIATRIC COMPLICATIONS OF SYSTEMIC DISEASE, WEISBROT DM, ETTINGER AB, GALLIMORE C, EDS.,	PUBLISHED BY CAMBRIDGE UNIVERSITY PRESS.	12/02/2017
J. HAREWOOD MD, F. PUELLO MD, H. KETTANI MD, THE VOICES ARE REAL-A CASE REPORT OF CAVERNOUS ANGIOMA PSYCHOSIS	PRESENTATION, POSTER PRESENTATION 14TH ANNUAL DOCTORS¿ RECOGNITION SYMPOSIUM, POSTER PRESENTATIONS AND PHYSICIANS¿ EXPOSITION, BRONX NY MAY 2017	05/05/2017
&#8203;WITHDRAWAL SEIZURES AFTER ACUTE DISCONTINUATION OF LAMOTRIGINE AND LEVETIRACETAM- SEVERITY AND TEMPORAL PATTERN.HIND KETTANI, M.D., YANNA SONG, M.S., NABIL J. AZAR, M.D. DEPARTMENT OF NEUROLOGY, VANDERBILT UNIVERSITY, NASHVILLE, TN	AMERICAN EPILEPSY SOCIETY MEETING	12/05/2010
&#8203;LIMBIC AURAS ARE ASSOCIATED WITH IDIOPATHIC GENERALIZED EPILEPSY &#8203;&#8203;P. ANEJA, H. KETTANI, E. PASSARO, P. MULLIN. EPILEPSIA OCTOBER 2007 VOL. 48 ISSUE S6. PRESENTED AT THE AMERICAN EPILEPSY SOCIETY ANNUAL MEETING	AMERICAN EPILEPSY SOCIETY MEETING	12/04/2007

## Professional Web Page

Premierneurologycenter.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.

FRENCH

ARABIC

## Other Affiliations

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

Affiliation
ST LUCIE MEDICAL CENTER