



SCOTT STEVEN STROLLA

License Number: PO2462

Profession Podiatric Physician
License Status PROBATION/Active
Year Began Practicing 01/01/1994
License Expiration 03/31/2026
Date

General Information

Primary Practice Address

SCOTT STEVEN STROLLA
13412 MANGROVE ISLE DR
WEST PALM BEACH, FL 33410

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
PALM BEACH GARDENS MEDICAL CENTER	PALM BEACH GARDENS	FLORIDA
GOOD SAMARITAN HOSPITAL	WEST PALM BEACH	FLORIDA
ST. MARY'S HOSPITAL	WEST PALM BEACH	FLORIDA
JUPITER MEDICAL CENTER	JUPITER	FLORIDA

Email Address

Please contact at: drstrolla@hotmail.com

Other State Licenses

This practitioner has not indicated any additional state licensures.

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
CALIFORNIA COLLEGE OF PODIATRI	DPM	1/1/1988 - 1/1/1992	05/01/1992

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
STANFORD MEDICAL CENTER	RESIDENCY	GS - SURGERY		PALO ALTO	CALIFORNIA	07/01/1992	06/30/1994
DEPARTMENT OF VETERAN AFFAIRS	RESIDENCY	GS - SURGERY		PALO ALTO	CALIFORNIA	07/01/1992	06/30/1994

Academic Appointments

Graduate Medical Education

The practitioner did not provide this mandatory information.

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 does not hold any certifications from specialty boards recognized by the Florida board which regulates the profession for which he/she is licensed.

Financial Responsibility

Financial Responsibility

I have obtained and will maintain an unexpired, irrevocable letter of credit, established pursuant to Chapter 675, F.S., in an amount not less than \$50,000 and in compliance with rule 64B18-14.0072(1)(c), Florida Administrative Code.

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:

For instructions on how to order copies of final disciplinary actions, please click [here](#).

[View Discipline Narratives](#)[View Board Actions](#)

Taken By	Date Of Action	Description of Disciplinary Action	Under Appeal
FLORIDA DEPARTMENT OF HEALTH	07/26/2024	PROBATION	NO

Type	Imposed	Due	Completed	Amt Due	Amt Recvd
TOLLING	8/27/2024			\$ 0.00	\$ 0.00
SUBSEQUENT ORDER	8/30/2024			\$ 0.00	\$ 0.00
SUPERVISOR'S REPORT	8/27/2024	11/26/2024		\$ 0.00	\$ 0.00
SUPERVISOR'S REPORT	8/27/2024	2/26/2025		\$ 0.00	\$ 0.00
SUPERVISOR'S REPORT	8/27/2024	5/26/2025		\$ 0.00	\$ 0.00
SUPERVISOR'S REPORT	8/27/2024	8/26/2025		\$ 0.00	\$ 0.00
SUPERVISOR'S REPORT	8/27/2024	11/26/2025		\$ 0.00	\$ 0.00
SUPERVISOR'S REPORT	8/27/2024	2/26/2026		\$ 0.00	\$ 0.00
SUPERVISOR'S REPORT	8/27/2024	5/26/2026		\$ 0.00	\$ 0.00
SUPERVISOR'S REPORT	8/27/2024	8/26/2026		\$ 0.00	\$ 0.00
FINE	8/27/2024	8/26/2026		\$ 5,000.00	\$ 0.00
NOTIFICATION OF EMPLOYMENT	8/27/2024			\$ 0.00	\$ 0.00
RESPONDENT REPORT	8/27/2024	11/26/2024		\$ 0.00	\$ 0.00
RESPONDENT REPORT	8/27/2024	2/26/2025		\$ 0.00	\$ 0.00
RESPONDENT REPORT	8/27/2024	5/26/2025		\$ 0.00	\$ 0.00
RESPONDENT REPORT	8/27/2024	8/26/2025		\$ 0.00	\$ 0.00
RESPONDENT REPORT	8/27/2024	11/26/2025		\$ 0.00	\$ 0.00
RESPONDENT REPORT	8/27/2024	2/26/2026		\$ 0.00	\$ 0.00
RESPONDENT REPORT	8/27/2024	5/26/2026		\$ 0.00	\$ 0.00
RESPONDENT REPORT	8/27/2024	8/26/2026		\$ 0.00	\$ 0.00
EMPLOYER-PROBATION ACKNOWLEDGE	8/27/2024	9/6/2024		\$ 0.00	\$ 0.00
COSTS	8/27/2024	8/26/2026		\$ 1,002.90	\$ 0.00
CE: LAWS AND RULES		8/26/2025		\$ 0.00	\$ 0.00
CE: ETHICS		8/26/2025		\$ 0.00	\$ 0.00

The information below is self reported by the practitioner. For Florida health care practitioner discipline, see information listed above.

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 \$5,000.00 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:
CHAIRMAN, INVESTIGATIONAL REVIEW COMMITTEE
LIBRARY COMMITTEE, GOOD SAMARITAN MEDICAL CENTER
PERFORMANCE IMPROVEMENT-PALM BEACH GARDENS MEDICAL CENTER

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
COMMUNITY LIFE SAVER	
COMMUNITY LEADERSHIP AWARD	
WHO'S WHO AMERICAN UNIVERSITIES & COLLEGES	

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 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:

Affiliation
PHI DELTA NATIONS/HONOR SOCIETY