Florida HEALTH Department of Health

FREDRIC MICHAEL BARR

License Number: ME35302

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/1984
License Expiration Date	01/31/2029

General Information

Primary Practice Address

FREDRIC MICHAEL BARR
1411 N FLAGLER DR, STE5800
SUITE 5800
WEST PALM BCH, FL 33401-3404

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

This practitioner currently holds staff privileges at the following hospital/medical/health institutions:

Institution Name	City	State
GOOD SAMARITAN HOSPITAL	WEST PALM BEACH	FLORIDA
ST. MARY'S HOSPITAL	WEST PALM BEACH	FLORIDA
COLUMBIA HOSPITAL	WEST PALM BEACH	FLORIDA

Email Address

Please contact at: **fmbarrmd@aol.com**

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
FLORIDA	MEDICAL PHYSICIAN
FLORIDA	MEDICAL DOCTOR
FLORIDA	MEDICAL DOCTOR
FLORIDA	MEDICAL DOCTOR
FLORIDA	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
HAHNEMANN UNIVERSITY	MD	7/1/1974 - 6/1/1978	06/01/1978

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 MIAMI/JACKSON MEMORIAL HOSPITAL	INTERNSHIP	TY - TRANSITIONAL YEAR	SU	MIAMI	FLORIDA	07/01/1978	06/30/1979
UNIVERSITY OF MIAMI/JACKSON MEMORIAL HOSPITAL	RESIDENCY	GS - SURGERY		MIAMI	FLORIDA	07/01/1979	06/30/1981
UNIVERSITY OF TEXAS MEDICAL BRANCH	RESIDENCY	PS - PLASTIC SURGERY			TEXAS	07/01/1981	06/30/1984

Academic Appointments

Graduate Medical Education

This practitioner has 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 PLASTIC SURGERY	PS - PLASTIC SURGERY	01/01/1986

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.

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:
CONSULTANT, FLORIDA AGENCY HEALTH CARE ADMINISTRATION
PAST ETHICS COMMITTEE GOOD SAMARITAN ST MARY'S HOSPITAL
PASTCENSORS AND MEDIATION- P B COUNTY MEDICAL SOCIETY
CONSULTANT, FLORIDA VOCATIONAL REHABILITATION
CONSULTANT, PALM BEACH CRIPPLED CHILDREN & ADULTS

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
PAST PRESIDENT	PALM BEACH COUNTY PLASTIC SURGERY SOCIETY
GRADUATE	PALM BEACH COUNTY LEADERSHIP PROGRAM
PAST PRESIDENT	PALM BEACH HEART ASSOCIATION
PAST TREASURER	FLORIDA PLASTIC SURGERY SOCIETY

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

PalmBeachPlastic&CosmeticSurgery.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.
SPANISH

Other Affiliations

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

Affiliation
AMERICAN MEDICAL ASSOCIATION
AMERICAN SOCIETY OF AESTHETIC PLASTIC SURGERY
AMERICAN SOCIETY OF PLASTIC & RECONSTRUCTIVE SURGEONS
SOUTHEASTERN SOCIETY OF PLASTIC & RECONSTRUCTIVE SURGEONS