



## PAUL STEVEN COLLINS

License Number: ME38136

Profession	Medical Doctor
License Status	CLEAR/Active
Year Began Practicing	01/01/1984
License Expiration Date	01/31/2026
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

## General Information

### Primary Practice Address

PAUL STEVEN COLLINS  
960 7TH AVENUE NORTH  
ST PETERSBURG, FL 33705

### 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. PETERSBURG	FLORIDA
ST. ANTHONYS HOSPITAL	ST. PETERSBURG	FLORIDA

### Email Address

Please contact at: [jade@baysurgicalspecialists.com](mailto:jade@baysurgicalspecialists.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
FLORIDA	MEDICAL
UTAH	PHYSICIAN & SURGEON

### 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	MD	7/1/1976 - 7/1/1979	07/01/1979

Other Health Related Degrees

This practitioner does not hold any additional health related degrees.

School/University	City	State/Country	Dates Attended From	Dates Attended To	Degree Title
UNIVERSITY OF SOUTH FLORIDA	TAMPA	UNITED STATES	07/01/1976	06/15/1979	M.D. MEDICAL DOCTOR

Professional and Postgraduate Training

This practitioner has completed the following graduate medical education:

Program Name	Program Type	Specialty Area	Other Specialty Area	State or City Country	Dates Attended From	Dates Attended To
WALTER REED ARMY MEDICAL CENTER	INTERNSHIP	TY - TRANSITIONAL YEAR		DISTRICT OF COLUMBIA	07/01/1979	06/30/1980
WALTER REED ARMY MEDICAL CENTER	RESIDENCY	GS - SURGERY		DISTRICT OF COLUMBIA	07/01/1980	06/30/1984
WALTER REED ARMY MEDICAL CENTER	FELLOWSHIP	GS - VASCULAR SURGERY		DISTRICT OF COLUMBIA	07/01/1986	06/30/1987

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 SURGERY	GS - VASCULAR SURGERY	

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

Proceedinas & 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 provided the following professional or community service activities, honors, or awards:

Community Service/Award/Honor	Organization
WHO'S WHO IN THE WORLD	
WHO'S WHO IN MEDICINE & HEALTHCARE	
WHO'S WHO IN THE SOUTH & SOUTHWEST	
NOMINEE, GENERAL GRAVES B ERSKINE AWARD	WALTER REED ARMY MEDICAL CENTER
PRESIDENT'S AWARD	SOUTHERN ASSOCIATION FOR VASCULAR SURGERY
PHYSICIANS RECOGNITION AWARD	AMERICAN MEDICAL ASSOCIATION

## Publications

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

Title	Publication	Date
VASCULAR REHABILITATION: BENEFITS OF A STRUCTURED EXERCIS	YEARBOOK OF VASCULAR SURGERY	01/01/1993
LOWER EXTREMITY LYMPHOCELE DEVELOPMENT AFTER SAPHENOUS VEI	MILITARY MEDICINE	01/01/1991
MAFUCCI SYNDROME: A REPORT OF FOUR CASES	YEARBOOK OF VASCULAR SURGERY	01/01/1994
DESCENDING THORACIC ANEURYSM RUPTURE WITH A KNOWN ABDOMINA	MILITARY MEDICINE	01/01/1991
AN EASY METHOD FOR DIAGNOSING LYMPHEDEMA	ANNALS OF VASCULAR SURGERY	01/01/1990

Professional Web Page

www.baysurgicalspecialists.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.

GERMAN  
SPANISH

Other Affiliations

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

Affiliation
FLORIDA VASCULAR SOCIETY
INTERNATIONAL SOCIETY FOR CARDIOVASCULAR SURGERY
INTERNATIONAL SOCIETY FOR ENDO VASCULAR SURGERY
PERIPHERAL VASCULAR SURGICAL SOCIETY
PINELLAS COUNTY MEDICAL SOCIETY
SOUTHEASTERN SURGICAL CONGRESS-FELLOW
SOUTHERN ASSOCIATION FOR VASCULAR SURGERY