



## ROSS GLUCK STONE

License Number: ME42808

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/1977
License Expiration Date	01/31/2027
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

## General Information

### Primary Practice Address

ROSS GLUCK STONE  
120 JFK DR STE 124  
ATLANTIS, FL 33462-6679

### 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
COLUMBIA JFK MEDICAL CENTER	ATLANTIS	FLORIDA
COLUMBIA HOSPITAL	WEST PALM BEACH	FLORIDA
PALMS WEST HOSPITAL	LOXAHATCHEE	FLORIDA

### Email Address

Please contact at: [rgstonemd@aol.com](mailto:rgstonemd@aol.com)

### Other State Licenses

This practitioner has not indicated any additional state licensures.

### 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
COLUMBIA UNIVERSITY CENTRAL OF	MD	1/1/1973 - 1/1/1977	01/01/1977

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
HARVARD	INTERNSHIP	GS - SURGERY		*** MASSACHUSETTS	07/01/1977	06/30/1978
HARVARD	RESIDENCY	GS - SURGERY		*** MASSACHUSETTS	07/01/1978	06/30/1979
COLUMBIA	RESIDENCY	ORS - ORTHOPAEDIC SURGERY		*** NEW YORK	07/01/1979	06/30/1982
COLUMBIA	FELLOWSHIP	ORS - ORTHOPAEDIC SURGERY		*** NEW YORK	07/01/1982	06/30/1983

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 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 ORTHOPAEDIC SURGERY	ORS - ORTHOPAEDIC 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

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](#).**

The following liability actions have been reported as required under section 456.049, F. S., within the previous 10 years:

Incident Date	County	Judicial Case	Settlement Date	Amount	Policy Amount
06/09/2015	PALM BEACH	502016CA008302	04/12/2017	\$250,000.00	\$250,000.00
01/28/2017	PALM BEACH	50-2017-007742-	05/15/2018	\$250,000.00	\$250,000.00
01/28/2017	PALM BEACH		12/21/2018	\$185,000.00	\$250,000.00
04/04/2018	PALM BEACH	2020-CA-007106-	05/13/2022	\$250,000.00	\$250,000.00

**Optional Information**

**Committees/Memberships**

This practitioner has an affiliation with the following committees:  
CHAIRMAN/COLUMBIA HOSPITAL ORTHOPAEDIC SURGERY  
CHAIRMAN OF INSTITUTIONAL REVIEW BOARD-JFK MEDICAL CENTER  
CHAIRMAN-PALMS WEST HOSPITAL SURGERY DEPARTMENT

**Professional or Community Service Awards**

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

Community Service/Award/Honor	Organization
PHYSICIAN CHOICE AWARD	SOUTHERN MEDICAL ASSOCIATION
SENIOR RESIDENT AWARD	EASTERN ORTHOPAEDIC ASSOCIATION
OUTSTANDING MANUSCRIPT AWARD	ASSOCIATION FOR THE ADVANCEMENT OF MEDICAL INSTRUMENTATION
SCIENTIFIC POSTER RECOGNITION AWARD	SOUTHERN MEDICAL ASSOCIATION

Publications

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

Title	Publication	Date
SIMULTANEOUS MULTIPLE-MODALITY THERAPY FOR TENSION HEADACH	BIOMEDICAL INSTRUMENT & TECHNOLOGY	04/01/1997
COMBINED MECHANICAL RELIEF AND TENS TREATMENT FOR TENSION	AMERICAN JOURNAL OF PAIN MANAGEMENT	01/01/1996
MECHANICAL RELIEF DEVICE FOR CERVICAL SPINE STRAIN ASSOCIA	AMERICAN JOURNAL OF PAIN MANAGEMENT	01/01/1998

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
AMERICAN ACADEMY OF ORTHOPAEDIC SURGEONS
COLUMBIA-PRESBYTERIAN MEDICAL CENTER JOHN JONES SOCIETY
FLORIDA MEDICAL ASSOCIATION
HARVARD SURGICAL SERVICE ALUMNI ASSOCIATION
NORTH AMERICAN SPINE SOCIETY