



## HOI VAN DO

License Number: ME45208

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	02/01/1985
License Expiration Date	01/31/2027
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

## General Information

### Primary Practice Address

HOI VAN DO  
5414 TOWN AND COUNTRY BLVD  
TAMPA, FL 33615

### Medicaid

This practitioner does NOT participate in the Medicaid program.

### Staff Privileges

This practitioner has not indicated any staff privileges.

### Email Address

Please contact at: [hoivando@gmail.com](mailto:hoivando@gmail.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
SAIGON UNIV. MEDICAL SCHOOL	M.D.	9/1/1961 - 9/1/1968	09/01/1968
E.C.F.M.G.			07/01/1981
CALIFORNIA FLEX			06/01/1982

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
AMERICAN ASSOCIATION OF MEDICAL REVIEW OFFICERS	CHAPEL HILL	NORTH CAROLINA	05/17/2024	05/19/2024	

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
SAIGON UNIV GENERAL HOSPITAL AMA-SPONSORED	INTERNSHIP	GS - SURGICAL CRITICAL CARE	EMERGENCY	SAIGON	VIET NAM	10/01/1968	09/01/1969
SAIGON UNIV.CANTHO GENERAL HOSPITAL	FELLOWSHIP	MEM - INTERNAL MEDICINE/EMERGENCY MEDICI		CANTHO	VIET NAM	06/01/1978	06/01/1979
CERTIFICATE OF USING CYNOSURE LASER SYSTEM	OTHER PROGRAM	OTHER	COSMETIC	ORLANDO	FLORIDA	03/10/2007	04/07/2007
LIPOSUCTION UNDER LOCAL ANESTHESIA	OTHER PROGRAM	PS - PLASTIC SURGERY	COSMETIC SURGERY	BAYONNE	NEW JERSEY	05/01/2010	05/02/2010
FRAXEL LASER	OTHER PROGRAM	D - DERMATOLOGY	LASER TREATMENT	TAMPA	FLORIDA	01/11/2010	01/12/2010
SCLEROTHERAPY HANDS-ON TRAINING	OTHER PROGRAM	VAS - VASCULAR MEDICINE	AESTHETIC SKIN	FORT LAUDERDALE	FLORIDA	08/23/2009	08/24/2009
COSMETIC BREAST SURGERY	OTHER PROGRAM	PS - PLASTIC SURGERY	COSMETIC	BAYONNE	NEW JERSEY	10/29/2010	10/31/2010
MEDLITE C6 LASER	OTHER PROGRAM	OTHER		TAMPA	FLORIDA	10/18/2010	10/19/2010
OFFICE LIPOSUCTION FAT GRAFTING AND ABDOMINOPLASTY UNDER LOC	OTHER PROGRAM	PS - PLASTIC SURGERY		BAYONNE	NEW JERSEY	09/10/2010	09/11/2010
ACOMS CHEEKS LIDS AND BROWS ADVANCED ESTHETIC SURGERY TECH	OTHER PROGRAM	PLASTIC SURGERY WITHIN THE HEAD AND NECK		NEW ORLEANS	LOUISIANA	02/08/2014	02/09/2014

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 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 do not have hospital staff privileges and I have obtained and maintain professional liability coverage in an amount not less than \$100,000 per claim, with a minimum annual aggregate of not less than \$300,000 from an authorized insurer as defined under s. 624.09, F. S., from a surplus lines insurer as defined under s. 626.914(2).

## 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:  
VIETNAM MED. ASSOC. OF USA/VIETNAM PHYS./PHAR. & DENT FLA.  
BOARD OF DIRECTOR OF VIETNAM ASSOC OF CENTRAL FL 1996-1998  
BOARD OF DIRECTOR \_ VIETNAMESE-AMERICAN MED ASSOC OF USA  
AMERICAN ACADEMY ANTI-AGING MEDICINE  
AMERICAN ASSOC PAIN MANAGEMENT  
AMERICAN MEDICAL ASSOCIATION  
AMERICAN PAIN SOCIETY  
INTERNATIONAL SOCIETY OF COSMETOGYNECOLOGY  
AMERICAN ACADEMY OF COSMETIC SURGERY  
AMERICAN SOCIETY OF REGIONAL ANESTHESIOLOGY

**Professional or Community Service Awards**

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

Community Service/Award/Honor	Organization
AWARD	VIETNAMESE ASSOCIATION OF PHYSICIANS
AWARD	AMNESTY INTERNATIONAL OF OLANDO
AWARD FOR GOOD ACHIEVEMENT AS A PRESIDENT OF THE COMMUNITY	VIETNAMESE ASSOCIATION OF CENTRAL FLA

**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**

WeightAndBody.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.

VIETNAMESE  
FRENCH

**Other Affiliations**

This practitioner has not provided any national, state, local, county, or professional affiliations.