



## IRVING DAVID WEINER

License Number: ME50513

Profession	Medical Doctor
License Status	CLEAR/Active
Year Began Practicing	01/01/1986
License Expiration Date	01/31/2026
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

## General Information

### Primary Practice Address

IRVING DAVID WEINER  
1600 SW ARCHER RD.  
ROOM CG-98  
GAINESVILLE, FL 32610

### 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
MALCOM RANDALL	GAINESVILLE	FLORIDA
SHANDS HOSPITAL AT THE UNIVERSITY OF FLO	GAINESVILLE	FLORIDA
SELECT SPECIALTY HOSPITAL	GAINESVILLE	FLORIDA

### Email Address

Please contact at: [weineid@ufl.edu](mailto:weineid@ufl.edu)

### 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
VANDERBILT UNIV SCH OF MED,NA	MD	7/1/1980 - 5/11/1984	05/11/1984

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 HOSPITAL-S TEXAS MED	INTERNSHIP	IM - INTERNAL MEDICINE		SAN ANTONIO	TEXAS	07/01/1984	06/30/1985
UNIVERSITY HOSPITAL-S TEXAS MED	RESIDENCY	IM - INTERNAL MEDICINE		SAN ANTONIO	TEXAS	07/01/1985	06/30/1987
BARNES-JEWISH HOSPITAL	FELLOWSHIP	IM - NEPHROLOGY		ST.LOUIS	MISSOURI	07/01/1987	06/30/1990

Academic Appointments

Graduate Medical Education

This practitioner has had the responsibility for graduate medical education within the last 10 years.

Academic Appointments

This practitioner currently holds faculty appointments at the following medical/health related institutions of higher learning:

Title	Institution	City	State
PROFESSOR OF MEDICINE AND PHYSIOLOGY	UNIVERSITY OF FLORIDA COLLEGE OF MEDICIN	GAINESVILLE	FLORIDA

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 INTERNAL MEDICINE	IM - INTERNAL MEDICINE	
AMERICAN BOARD OF INTERNAL MEDICINE	IM - NEPHROLOGY	

Financial Responsibility

Financial Responsibility

Financial Exemption

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 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
SCIENTIST AWARD	AMERICAN HEART ASSOCIATION CLINICIAN
EXEMPLARY TEACHING AWARD 2003	UNIVERSITY OF FL COLLEGE OF MEDICINE
CHAIRPERON,VETERANS AFFAIRS MERIT REVIEW SUBCOMMITTEE IN	NEPHROLOGY, FALL 2002-SPRING 2004,DEPT OF VETERANS AFFAIRS
YOUNG INVESTIGATOR AWARD-NATIONAL KIDNEY FOUNDATION	AMERICAN SOCIETY OF NEPHROLOGY

**Publications**

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

Title	Publication	Date
OPTICAL STUDIES OF INTRACELLULAR PH IN KIDNEY EPITHELIAL C	INTERNATIONAL REV. EXP. PATHOL. 36:161-175	01/01/1996
THIS PRACTITIONER HAS AUTHORED SEVERAL OTHER PUBLICATIONS		

Title	Publication	Date
HYPOKALEMIA-CONSEQUENCES, CAUSES AND CORRECTION	J AM SOC NEPHROL 8:1179-1188	01/01/1997
NOCTURIA,AGING,BENIGN PROSTATIC HYPERTROPHY, AND NOCTURNA	GERIATRIC NEPHROLOGY AND UROLOGY 7:111-117	01/01/1997
REGULATION OF B-TYPE INTERCALATED CELL APICAL BI/BASE EXC	AM J PHYS:RENAL 274:F1086-F1094	01/01/1998
REGULATION OF LUMINAL ALKALINIZATION AND ACIDIFICATION IN	AM J PHYSIOL:RENAL 269:F730-F738	01/01/1995

### Professional Web Page

<http://nephrology.medicine.ufl.edu/>

### 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

SOUTHERN SOCIETY FOR CLINICAL INVESTIGATION