



JEFFREY PAUL SNOW

License Number: ME55793

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 01/01/1982
License Expiration 01/31/2026
Date

General Information

Primary Practice Address

JEFFREY PAUL SNOW
7261 SHERIDAN STREET
SUITE 350
HOLLYWOOD, FL 33024

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
MEMORIAL SAME DAY SURGERY CENTER HOLLYWOOD, FLORIDA	HOLLYWOOD	FLORIDA
MEMORIAL HOSPITAL PEMBROKE	PEMBROKE PINES	FLORIDA
MEMORIAL REGIONAL HOSPITAL	HOLLYWOOD	FLORIDA
MEMORIAL HOSPITAL WEST	PEMBROKE PINES	FLORIDA
MEMORIAL HOSPITAL PEMBROKE	PEMBROKE PINES	FLORIDA
HCA COLUMBIA HOSPITAL	PLANTATTION	FLORIDA

Email Address

Please contact at: jsnow@jeffreysnowmd.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
THE JOHNS HOPKINS UNIVERSITY	MD	1/1/1978 - 5/27/1982	05/27/1982

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
NEW ENGLAND DEACONE	INTERNSHIP	GS - SURGERY		BOSTON	MASSACHUSETTS	07/01/1982	06/30/1983
ALBANY MEDICAL CENTER HOSPITAL	RESIDENCY	GS - SURGERY		ALBANY	NEW YORK	07/01/1985	06/30/1988
ST VINCENT HEALTH CENTER	FELLOWSHIP	CRS - COLON AND RECTAL SURGERY		****	PENNSYLVANIA	07/01/1988	06/30/1989
JEWISH HOSPITAL OF CINCINNATI	RESIDENCY	GS - SURGERY		CINCINNATI	OHIO	09/12/1983	06/30/1985

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
ASSOCIATE CLINICAL PROFESSOR OF SURGERY	NOVA SOUTHEASTERN UNIVERSITY	DAVIE	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 SURGERY	GS - SURGERY	
AMERICAN BOARD OF COLON & RECTAL SURGERY	CRS - COLON AND RECTAL SURGERY	

Financial Responsibility

Financial Responsibility

I have elected not to carry medical malpractice insurance however, I agree to satisfy any adverse judgments up to the minimum amounts pursuant to s. 458.320(5) (g)1, F. S. I understand that I must either post notice in a sign prominently displayed in my reception area or provide a written statement to any person to whom medical services are being provided that I have decided not to carry medical malpractice insurance. I understand that such a sign or notice must contain the wording specified in s. 458.320(5) (g), 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](#).

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:

- CREDENTIALS COMMITTEE
- HEAD PHARMACY AND THERAPEUTICS COMMITTEE
- EXECUTIVE COMMITTEE
- CHIEF OF STAFF
- Peer Review

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
-------------------------------	--------------

Community Service/Award/Honor	Organization
BEST DOCTOR IN SOUTH FLORIDA 1998-1999	MIAMI METRO MAGAZINE
WHOS WHO	STRATMORE
BEST DOCTORS IN SOUTH FLORIDA 2008-2009	MIAMI METRO

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

www.jeffreysnowmd.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

PORTUGUESE

Other Affiliations

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

Affiliation
AMERICAN COLLEGE OF COLON AND RECTAL SURGEONS
AMERICAN COLLEGE OF SURGEONS
AMERICAN MEDICAL ASSOCIATION
BROWARD COUNTY MEDICAL ASSOCIATION
FLORIDA MEDICAL ASSOCIATION
INTERNATIONAL COLLEGE OF SURGEONS
SOCIETY OF LAPROENDOSCOPIC SURGEONS
SOCIETY SURGERY ALIMENTARY TRACT