



## MINNEA B KALRA MD

License Number: ME56455

Profession Medical Doctor  
License Status CLEAR/Active  
Year Began Practicing 01/01/1989  
License Expiration 01/31/2026  
Date

## General Information

### Primary Practice Address

MINNEA B KALRA MD  
1431 SW 1ST AVENUE  
OCALA, FL 34471

### 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
THE TAMPA GENERAL HOSPITAL	TAMPA	FLORIDA
OCALA REGIONAL MEDICAL CENTER	OCALA	FLORIDA

### Email Address

Please contact at: [drmkalra@gmail.com](mailto:drmkalra@gmail.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
FLORIDA	MD
CALIFORNIA	

### 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
G.S. MEDICAL COLLEGE-BOMBAY	MD	1/1/1974 - 1/1/1978	01/01/1978

## 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
G S MEDICAL COLLEGE UNIVERSITY OF BOMBAY	INTERNSHIP	TY - TRANSITIONAL YEAR		BOMBAY	INDIA	01/01/1973	01/01/1974
G S MEDICAL COLLEGE UNIVERSITY OF BOMBAY	RESIDENCY	AN - ANESTHESIOLOGY		BOMBAY	INDIA	01/01/1974	01/01/1977
UNIVERSITY OF SOUTHERN CALIFORNIA	INTERNSHIP	TY - TRANSITIONAL YEAR		LOS ANGELES	CALIFORNIA	01/01/1987	01/01/1988
UNIVERSITY OF SOUTHERN CALIFORNIA	INTERNSHIP	PD - PEDIATRICS		LOS ANGELES	CALIFORNIA	01/01/1988	01/01/1989
UNIVERSITY OF SOUTH FLORIDA	RESIDENCY	AN - ANESTHESIOLOGY		TAMPA	FLORIDA	01/01/1989	01/01/1992

## 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
AMERICAN BOARD OF ANESTHESIOLOGY	AN - ANESTHESIOLOGY

## 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](#).**

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:  
none

### Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
OUTSTANDING GRADUATE RESIDENT AWARD - ANESTHESIOLOGY	ROBERT D. DRIPPS M.D. MEMORIAL AWARD-1992

### Publications

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

Title	Publication	Date
EFFECT OF TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION ON	ANESTH ANALG	01/01/1995

Title	Publication	Date
TREATMENT OF REFLEX SYMPATHETIC DYSTROPHY WITH PERIACTIN	ANESTHESIOLOGY	01/01/1993

### Professional Web Page

none

### 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.

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### Other Affiliations

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

#### Affiliation

AMERICAN SOCIETY OF ANESTHESIOLOGISTS