



DAVID DWAYNE DOUGLAS

License Number: ME59917

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 01/01/1986
License Expiration 01/31/2026
Date

General Information

Primary Practice Address

DAVID DWAYNE DOUGLAS
MAYO CLINIC
4500 SAN PABLO RD.
JACKSONVILLE, FL 32224

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
MAYO CLINIC	JACKSONVILLE	FLORIDA

Email Address

Not Provided

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
	MEDICAL DOCTOR
	MEDICAL DOCTOR
NEVADA	MEDICAL DOCTOR

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
OKLAHOMA UNIVERSITY COLLEGE	MD	1/1/1982 - 6/1/1986	06/01/1986

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 OF TEXAS-SOUTHWESTERN	INTERNSHIP	IM - INTERNAL MEDICINE		DALLAS	TEXAS	07/01/1986	06/30/1987
MAYO CLINIC	RESIDENCY	IM - GASTROENTEROLOGY	HEPATOLOGY	ROCHESTER	MINNESOTA	07/01/1989	06/30/1992
UNIVERSITY OF TEXAS-SOUTHWESTERN	RESIDENCY	IM - INTERNAL MEDICINE		DALLAS	TEXAS	06/30/1987	07/01/1989

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	MAYO MEDICAL SCHOOL	ROCHESTER	MINNESOTA

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 - GASTROENTEROLOGY	
AMERICAN BOARD OF INTERNAL MEDICINE	OTHER	

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:
ASSOCIATE DIRECTOR-CLINICAL RESEARCH STUDIES UNIT/MCS
MEDICAL DIRECTOR-LIVERS TRANSPLANTATION/MCS
PROGRAM EVALUATION COMMITTEE/AASLD
GASTROENTEROLOGY ENDOSCOPIC SUBCOMMITTEE/MCS
VICE CHAIR-DIVISION OF GASTROENTEROLOGY/MCS
BOARD OF DIRECTORS/AMERICAN LIVER FOUNDATION-ARIZONA CHPT

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
DIPLOMATE	AMERICAN BOARD OF INTERNAL MEDICINE, GASTROENTEROLOGY
PRESIDENT'S SCHOLARSHIP AWARD, 1978	UNIVERSITY OF OKLAHOMA

Community Service/Award/Honor	Organization
DIPLOMATE	AMERICAN BOARD OF INTERNAL MEDICINE
ASSOCIATE RESEARCH PAPER CONTEST-WINNER, 1992 & 1993	AMERICAN COLLEGE OF PHYSICIANS
FELLOW'S AWARD FOR OUTSTANDING RESEARCH, 1992	GLAXO RESEARCH INSTITUTE
PHI BETA KAPPA, 1982	UNIVERSITY OF OKLAHOMA

Publications

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

Title	Publication	Date
CLINICAL PATHOLOGY CONFERENCE; A 56-YEAR OLD MALE WITH	GASTROENTEROLOGY INTERNATIONAL	01/01/1992
A RANDOMIZED CONTROLLED TRIAL OF RECOMBINANT ALPHA-2A	DIGESTIVE DISEASES & SCIENCES	01/01/1993
FATAL LABETALOL-INDUCED HEPATIC INJURY	THE AMERICAN JOURNAL OF MEDICINE	01/01/1989
ABSENCE OF HBV-DNA BY POLYMERASE CHAIN REACTION IN HBSAG	TRANSFUSION	01/01/1993
HEPATITIS B VIRUS (HBV) REPLICATION AFTER ORTHOTOPIC LIVER	TRANSPLANTATION PROCEEDINGS	01/01/1993
THIS PRACTITIONER HAS AUTHORED SEVERAL OTHER PUBLICATIONS		

Professional Web Page

This practitioner has not provided any professional web page information.

Languages Other Than English

This practitioner has not indicated that any languages other than English are used to communicate with patients, or that any translation service is available for patients, at his/her primary place of practice.

Other Affiliations

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

Affiliation
AMERICAN ASSOCIATION FOR THE STUDY OF LIVER DISEASE
AMERICAN COLLEGE OF PHYSICIANS-FELLOW
AMERICAN GASTROENTEROLOGICAL ASSOCIATION
AMERICAN MEDICAL ASSOCIATION
AMERICAN SOCIETY OF TRANSPLANT PHYSICIANS
INTERNATIONAL LIVER TRANSPLANTATION SOCIETY
STAFF PRV/MAYO CLINIC HOSPITAL, PHOENIX, ARIZONA