



JOSEPH JOHN ROSS

License Number: ME61395

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/1989
License Expiration Date	01/31/2027
Authorized to Order (Medical and Low-THC Cannabis)	Yes

General Information

Primary Practice Address

JOSEPH JOHN ROSS
3920 BEE RIDGE RD BLDG F- A
SARASOTA, FL 34233

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
CITRUS MEMORIAL HOSPITAL	LECANTO	FLORIDA

Email Address

Please contact at: jj111r@aol.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
OHIO	MEDICAL DOCTOR
ARIZONA	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
CASE WESTERN RESERVE UNIVERSIT	MD	7/1/1980 - 6/30/1984	06/30/1984

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
YOUNGSTOWN HOSPITAL	INTERNSHIP	GS - SURGERY		YOUNGSTOWN	OHIO	07/01/1984	06/01/1985
CASE WESTERN RESERVE	RESIDENCY	OPH - OPHTHALMOLOGY		CLEVELAND	OHIO	07/01/1985	06/01/1988
UNIVERSITY OF ARIZONA	FELLOWSHIP	OTHER	FACIAL RECONSTRUCTION	TUCSON	ARIZONA	07/01/1988	06/01/1989

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
ASSISTANT CLINICAL PROFESSOR	CASE WESTERN RESERVE UNIVERSITY SCHOOL O	CLEVELAND	OHIO

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 OPHTHALMOLOGY	OPH - OPHTHALMOLOGY	

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.

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
TEACHER OF THE YEAR, 1991	ST LUKES RESIDENCY PROGRAM, CLEVELAND, OHIO
MIAMI M.E.D.	PREMEDICAL HONOR SOCIETY
ALPHA DELTA PHI ACADEMIC LEADERSHIP SCHOLARSHIP, 1978-79	
LISTED IN THE AMERICAN SCHOLAR & THE DEAN'S LIST	
LISTED IN THE COLLEGE REGISTER	
LISTED IN OUTSTANDING YOUNG MEN OF AMERICA, 1989	
PRESIDENTS LIST	MIAMI UNIVERSITY
PHI BETA KAPPA	
OMICRON DELTA KAPPA	NATIONAL SCHOLARSHIP LEADERSHIP HONOR SOCIETY
PHI KAPPA PHI	INTERDISCIPLINARY HONOR SOCIETY

Community Service/Award/Honor	Organization
PHI SIGMA-NATIONAL BIOLOGY HONORARY	
GAMMA THETA PHI-CHEMISTRY HONORARY	

Publications

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

Title	Publication	Date
LIPODERMOIDS VS NORMAL ORBITAL FAT	SUBMITTED FOR PUBLICATION	
HYDROXYAPATITE ORBITAL IMPLANTS	OCULAR SURGERY NEWS	11/15/1990
CLOSURE OF EYELID DEFECTS	DERMATOLOGICAL SURGICAL ONCOLOGY	01/01/1992
INTENTIONAL BUTTONHOLING OF THE HUGHE'S FLAP	OPHTHALMIC PLASTIC AND RECONSTRUCTIVE SURGERY	01/01/1993
OPHTHALMIC MANIFESTATIONS OF SJOGREN'S SYNDROME	OPHTHALMIC SURGERY	04/01/1993
CHEMOSIS AFTER BLEPHAROPLASTY: AND UNUSUAL COMPLICATION	OPHTHALMIC SURGERY	01/01/1994
SEBACEOUS GLAND CARCINOMA	ARCH OPHTHALMOLOGY	01/01/1988
TARSOCONJUNCTIVAL FLAP WITH CENTRAL HOLE	SUBMITTED FOR PUBLICATION	
EXCISION OF EPITHELIAL LINED CYSTS	SUBMITTED FOR PUBLICATION	
EVALUATION OF EYELID CONTOUR UNDER GENERAL ANESTHESIA	SUBMITTED FOR PUBLICATION	
DERMAL FAT GRAFTS	SUBMITTED FOR PUBLICATION	

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
AMER ACAD OF FACIAL PLASTIC & RECONSTRUCTIVE SURG-FELLOW
AMER SOC OF OPHTHALMIC PLASTIC & RECON SURGEONS-FELLOW
AMERICAN ACADEMY OF OPHTHALMOLOGY-FELLOW
AMERICAN MEDICAL ASSOCIATION
CLEVELAND ACADEMY OF MEDICINE
CLEVELAND OPHTHALMOLOGICAL SOCIETY
INTERNATIONAL SOCIETY OF HAIR RESTORATION SURGERY
OHIO OPHTHALMOLOGICAL SOCIETY
OHIO STATE MEDICAL ASSOCIATION
STAFF PRV/METROHEALTH MEDICAL CENTER, CLEVELAND, OHIO
STAFF PRV/ST. JOHN WESTSHORE HOSPITAL, CLEVELAND, OHIO
STAFF PRV/UNIVERSITY HOSPITALS, CLEVELAND, OHIO