



## JACQUES J MORCOS

License Number: ME68833

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	06/30/1985
License Expiration	01/31/2026
Date	

## General Information

### Primary Practice Address

JACQUES J MORCOS  
6400 FANNIN STREET  
SUITE 2800  
HOUSTON, TX 77030

### 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
JACKSON MEMORIAL HOSPITAL	MIAMI	FLORIDA
MOUNT SINAI MEDICAL CENTER	MIAMI BEACH	FLORIDA
MIAMI CHILDREN'S HOSPITAL	MIAMI	FLORIDA

### Email Address

Please contact at: [jacques.morcos@uth.tmc.edu](mailto:jacques.morcos@uth.tmc.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
AMERICAN UNIVERSITY OF BEIRUT	MD	9/1/1980 - 6/30/1985	06/30/1985
AMERICAN UNIVERSITY OF BEIRUT	BSC	9/1/1978 - 8/31/1980	08/31/1980

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
SHANDS HOSPITAL AT UNIVERSITY OF FLORIDA	FELLOWSHIP	NS - NEUROLOGICAL SURGERY		GAINESVILLE	FLORIDA	01/01/1994	06/30/1994
UNIVERSITY OF MINNESOTA MEDICAL SCHOOL	RESIDENCY	NS - NEUROLOGICAL SURGERY		***	MINNESOTA	07/01/1990	12/31/1993
ST JOSEPH HOSPITAL & MEDICAL CENTER	FELLOWSHIP	NS - NEUROLOGICAL SURGERY		***	ARIZONA	07/01/1994	08/15/1995

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 PROFESSOR OF NEUROSURGERY	UNIVERSITY OF MIAMI SCHOOL OF MEDICINE	MIAMI	FLORIDA

Specialty Certification

Specialty Certification

This practitioner does not hold any certifications from specialty boards recognized by the Florida board which regulates the profession for which he/she is licensed.

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

## 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:  
EXECUTIVE COMMITTEE/JOINT SECTION OF CEREBROVASCULAR SURG

### Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
ZHAO-ZI ZHEN	UNIVERSITY OF MINNESOTA
PEYTON SOCIETY	UNIVERSITY OF MINNESOTA

### Publications

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

Title	Publication	Date
MICROSURGICAL TREATMENT OF BRAIN STEM CAVERNOUS MALFORMATI	NEUROSUGERY CLINICS OF NORTH AMERICA	07/01/1999
REVASCULARIZATION AND ANEURYSM SURGERY: CURRENT TECHNIQUES	NEUROSURGERY	01/01/1996

### Professional Web Page

This practitioner has not provided any professional web page information.

### 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.

ARABIC

SPANISH

FRENCH

### Other Affiliations

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

Affiliation
AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS
AMERICAN MEDICAL ASSOCIATION
CONGRESS OF NEUROLOGICAL SURGEONS
FLORIDA MEDICAL ASSOCIATION
NORTH AMERICAN SKULL BASE SOCIETY