STEPHEN JOHN PATRICE MD

License Number: ME70718

ProfessionMedical DoctorLicense StatusRetired/Year Began Practicing01/01/1991License Expiration01/31/2025DateDate

General Information

Primary Practice Address

STEPHEN JOHN PATRICE MD 245 OSPREY POINT DRIVE OSPREY, FL 34229

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
	ARCADIA	FLORIDA
MANATEE MEMORIAL HOSPITAL	BRADENTON	FLORIDA
CHARLOTTE REGIONAL MEDICAL CENTER	PUNTA GORDA	FLORIDA
DOCTORS MEMORIAL HOSPITAL	SARASOTA	FLORIDA
ENGLEWOOD COUMMUNITY HOSPITAL	ENGLEWOOD	FLORIDA
LAKEWOOD RANCH MEDICAL CENTER	BRADENTON	FLORIDA
SARASOTA MEMORIAL HOSPITAL	SARASOTA	FLORIDA
PEACE RIVER REGIONAL MEDICAL CENTER	PORT CHARLOTTE	FLORIDA
VENICE REGIONAL MEDICAL CENTER	VENICE	FLORIDA
	SARASOTA	FLORIDA

Email Address

Not Provided

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NEW YORK	INACTIVE
MASSACHUSETTS	INACTIVE
MISSOURI	INACTIVE
NEVADA	INACTIVE

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 This practitioner has indicated that he/she is exempt from paying assessment.

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
WASHINGTON UNIVERSITY	MD	6/1/1989 - 5/17/1991	05/17/1991

Other Health Related Degrees

This practitioner has completed the following other health related degrees:

School/University	City	State/Country	Dates Attended From	Dates Attended To	Degree Title
HARVARD UNIVERSITY SCHOOL OF PUBLIC HEALTH	BOSTON	I MASSACHUSETTS	06/08/1994	06/08/1995	MPH MASTER OF PUBLIC HEALTH

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
JEWISH HOSPITAL OF ST LOUIS AT WASHINGTON UNIVERSITY MEDICAL	INTERNSHIP	IM - INTERNAL MEDICINE		ST LOUIS	MISSOURI	07/01/1991	06/30/1992
HARVARD JOINT CENTER FOR RADIOTHERAPY	RESIDENCY	RO - RADIATION ONCOLOGY		BOSTON	I MASSACHUSETTS	07/01/1992	06/30/1996
HARVARD JOINT CENTER FOR RADIATION THERAPY	RESIDENCY	OTHER	CHIEF RESIDENT- RADIATION ONCOLOGY	BOSTON	I MASSACHUSETTS	04/01/1995	04/01/1996

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
CLERKSHIP FACULTY	FLORIDA STATE UNIVERSITY SCHOOL OF MEDICINE	SARASOTA	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 RADIOLOGY	RO - RADIATION ONCOLOGY	06/12/1996

Financial Responsibility

Financial Exemption

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 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	

CHIEF RESIDENT

HARVARD JOINT CENTER FOR RADIATION THERAPY

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.21stcentuyoncology.com

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 MEDICAL ASSOCIATION AMERICAN SOCIETY OF CLINICAL ONCOLOGY AMERICAN SOCIETY OF THERAPEUTIC RADIOLOGY & ONCOLOGY ASSOCIATION OF FREESTANDING RADIATION ONCOLOGY CENTERS CLINICAL AFFILLIATE H LEE MOFFITT CANCER CENTER NATIONAL BOARD OF MEDICAL EXAMINERS-DIPLOMATE SARASOTA MEDICAL SOCIETY TEACLINICAL AFEILIATE MARCACILLIDETTO OFNEDAL LIOODITAL

TEACHING AFFILIATE MASSACHUSETTS GENERAL HOSPITAL