# ANTHONY N DARDANO

## License Number: OS7441

ProfessionOsteopathic PhysicianLicense StatusClear/ActiveYear Began Practicing07/01/1990License Expiration03/31/2026DateClear

# **General Information**

## **Primary Practice Address**

ANTHONY N DARDANO 951 N.W. 13TH STREET SUITE 1C BOCA RATON, FL 33486

## 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
BOCA RATON COMMUNITY HOSPITAL	BOCA RATON	FLORIDA
DELRAY MEDICAL CENTER	DELRAY BEACH	FLORIDA
WEST BOCA MEDICAL CENTER	BOCA RATON	FLORIDA

## **Email Address**

Please contact at: drdardano@gmail.com

#### **Other State Licenses**

This practitioner has indicated the following additional state licensure:

State	Profession
	OSTEOPATHIC PHYSICIAN
	OSTEOPATHIC PHYSICIAN

## 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**

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Institution Name	Degree Title	Dates of Attendance	Graduation Date
NOVA SOUTHEASTERN UNIVERSITY	DO	9/1/1986 - 6/3/1990	06/03/1990

## **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
BROOKDALE HOSPITAL	INTERNSHIP	TY - TRANSITIONAL YEAR		BROOKLYN	NEW YORK	07/01/1990	06/30/1991
SINAI HOSPITAL OF WAYNE STATE UNIVERSITY	RESIDENCY	GS - SURGERY		DETROIT	MICHIGAN	I 07/01/1991	06/30/1997
UNIVERSITY OF TEXAS	FELLOWSHIF	P PS - PLASTIC SURGERY		GALVESTON	I TEXAS	07/01/1997	06/30/2000

# 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
ASSOCIATE PROFESSOR OF BIOMEDICAL SCIENCES	FLORIDA ATLANTIC UNIVERSITY	BOCA RATON	FLORIDA

# **Specialty Certification**

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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 PLASTIC SURGERY	PS - PLASTIC SURGERY	
AMERICAN BOARD OF SURGERY	GS - SURGERY	

# **Financial Responsibility**

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I have decided not to carry malpractice insurance or otherwise demonstrate financial responsibility; however, I agree to satisfy any adverse judgments pursuant to the terms and conditions contained in s.459.0085(5)(g),FS.I understand that I shall be required to either post notice in the form of a sign prominently displayed in the reception area and clearly noticeable by all patients and provide a written statement to any person to whom medical services are being provided. Such sign and statement shall state that: Under Florida law, osteopathic physicians are generally required to carry medical malpractice insurance or otherwise demonstrate financial responsibility to cover potential claims for medical malpractice. YOUR OSTEOPATHIC PHYSICIAN HAS DECIDED NOT TO CARRY MEDICAL MALPRACTICE INSURANCE. This is permitted under Florida law subject to certain conditions. Florida law imposes strict penalties against noninsured osteopathic physicians who fail to satisfy adverse judgments arising from claims of medical malpractice. This notice is provided pursuant to Florida law.

# **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
HEROES IN MEDICINE AWARD 2010	PALM BEACH COUNTY MEDICAL SOCIETY

#### **Publications**

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

Title	Publication	Date
EFFECTS OF GLUTATHIONE DEPLETION ON OXIDANT INDUCED	JOURNAL OF SURGICAL RESEARCH	01/01/1998
TNF-ALPHA POTENTIATES OXIDANT AND REPERFUSION INDUCED	JOURNAL OF SURGICAL RESEARCH	01/01/1996
LAPAROSCOPIC REPAIR OF ABDOMINAL HERNIAS	JOURNAL OF SOCIETY OF LAPAROENDOSCOPIC SURGEONS	01/01/1997

#### **Professional Web Page**

www.dranthonydardano.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 SOCIETY OF PLASTIC SURGEONS FELLOW OF THE AMERICAN COLLEGE OF SURGEONS

FELLOW OF THE INTERNATIONAL COLLEGE OF SURGEONS

FLORIDA OSTEOPATHIC MEDICAL ASSOCIATION

FLORIDA SOCIETY OF PLASTIC SURGERONS

PALM BEACH COUNTY MEDICAL SOCIETY

PALM BEACH COUNTY SOCIETY OF PLASTIC SURGEONS