Florida HEALTH Department of Health

JHONNY ABRAHAM SALOMON

License Number: ME74882

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/1998
License Expiration Date	01/31/2028

General Information

Primary Practice Address

JHONNY ABRAHAM SALOMON
6705 RED ROAD #708
STE. 708
CORAL GABLES, FL 33143

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
	CORAL GABLES, FL	FLORIDA
SOUTH MIAMI HOSPITAL	MIAMI	FLORIDA

Email Address

Please contact at: **drsalomon@drjsalomon.com**

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
BOSTON UNIVERSITY	MD		01/01/1991

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 CONNECTICUT SCHOOL OF MEDICINE	RESIDENCY	GS - SURGERY		***	CONNECTICUT	07/01/1991	06/30/1995
RHODE ISLAND HOSPITAL	RESIDENCY	PS - PLASTIC SURGERY		***	RHODE ISLAND	07/01/1994	06/30/1997
UNIVERSITY OF TEXAS	FELLOWSHIP	PS - CRANIOFACIAL SURGERY		***	TEXAS	07/01/1997	06/30/1998

Academic Appointments

Graduate Medical Education

This practitioner has not had the responsibility for graduate medical education within the last 10 years.

Academic Appointments

This practitioner does not currently hold faculty appointments at any medical/health related institutions of higher learning.

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 PLASTIC SURGERY	PS - PLASTIC SURGERY	01/01/1999

Financial Responsibility

Financial Responsibility

I have hospital staff privileges and I have established an irrevocable letter of credit or escrow account in an amount of $250,000/$750,000, in accordance with Chapter 675, F. S., for a letter of credit and s. 625.52, F. S., for an escrow account.

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
MEMBER	HONOR MEDICAL SOCIETY
BEST ATHLETIC PAPER AWARD	ASPRS

Publications

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

Title	Publication	Date
CORRECTIONS OF THE CROOKED NOSE	PLASTIC AND RECONSTRUCTIVE SURGERY VOLUME	11/01/1998
ENDOSEOPHIC MIDFACE RESUNATION	PERSPECTIVE IN PLASTIC SURGERY	01/01/1999
CRAINIO SYNOSTOSIS	PLASTIC SURGERY SECRETS	01/01/1998

Professional Web Page

www.drjsalomon.com

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.
CREOLE
FRENCH
SPANISH

Other Affiliations

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

Affiliation
AMERICAN COLLEGE OF SURGEONS
AMERICAN SOCIETY OF PLASTIC AND RECONSTRUCTIVE SURGERY
HONOR MEDICAL SOCIETY