



LOUIS STEVEN DELUCA M.D.

License Number: ME76256

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/1992
License Expiration Date	01/31/2027

## General Information

### Primary Practice Address

LOUIS STEVEN DELUCA M.D.  
1905 CLINT MOORE RD  
STE 303  
BOCA RATON, FL 33496

### 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

### Email Address

Please contact at: [drdeluca@drloisdeluca.com](mailto:drdeluca@drloisdeluca.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
OHIO	MEDICAL DOCTOR
CALIFORNIA	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	6/1/1988 - 5/1/1992	05/14/1992

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
CASE WESTERN UNIVERSITY	INTERNSHIP	GS - SURGERY		CLEVELAND	OHIO	07/01/1992	06/30/1996
UNIVERSITY OF SOUTH FLORIDA	RESIDENCY	PS - PLASTIC SURGERY		TAMPA	FLORIDA	07/01/1996	06/30/1999

Academic Appointments

Graduate Medical Education

The practitioner did not provide this mandatory information.

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	09/09/2000
AMERICAN BOARD OF PLASTIC SURGERY	PS - PLASTIC SURGERY	

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

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 the following criminal offenses:

Description of Offense	Date	State or Jurisdiction	Under Appeal	Status	Date Of Corroboration
THEFT	01/01/1995	OHIO	NO	NOT CORROBORATED	
ALTERCATION	01/01/1987	OHIO	NO	NOT CORROBORATED	

**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:  
AMERICAN CANCER SOCIETY MAKE A WISH FOUNDATION

**Professional or Community Service Awards**

This practitioner has not provided any professional or community service activities, honors, or awards.

**Publications**

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

Title	Publication	Date
ACUTE OBSTRUCTIVE UROPATHY IN A GRAVID PATIENT WITH PELVIC	JOURNAL TRAUMA	01/01/1996
KNEE FUNCTION AFTER PATELLECTOMY AND CRUCIFORM REPAIR...	CLINICAL ORTHOPAEDIC	01/01/1994

Title	Publication	Date
MANAGEMENT OF AN EXTENSIVE CERVICOFACIAL LYMPHOVENOUS	AMERICAN PLASTIC SURGERY	01/01/1996
AESTHETIC AND FUNCTIONAL OUTCOMES OF DACRYOADENOPEXY	CLINICAL JOURNAL AESTHETIC SURGERY	01/01/1996
THE FATE OF PRESERVED AUTOGENOUS BONE GRAFT	PLASTIC RECONSTRUCTIVE SURGERY	01/01/1997
THIS PRACTITIONER HAS AUTHORED SEVERAL OTHER PUBLICATIONS		

### 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.

SPANISH

### Other Affiliations

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

Affiliation
AMERICAN COLLEGE OF SURGEONS-ASSOCIATE FELLOW
AMERICAN SOCIETY OF AESTHETIC PLASTIC SURGEONS
AMERICAN SOCIETY OF PLASTIC & RECONSTRUCTIVE SURGEONS