#### **ROBERTO J FIRPI-MORELL**

#### License Number: ME79438

ProfessionMedical DoctorLicense StatusClear/ActiveYear Began PracticingNot ProvidedLicense Expiration01/31/2027DateDate

## **General Information**

#### **Primary Practice Address**

ROBERTO J FIRPI-MORELL 1329 SW 16TH ST., SUITE #5251 GAINESVILLE, FL 32608

#### 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
SHANDS HOSPITAL AT THE UNIVERSITY OF FLO	GAINESVILLE	FLORIDA
VETERANS AFFAIRS MEDICAL CENTER	GAINESVILLE	FLORIDA

#### **Email Address**

Please contact at: roberto.firpi@medicine.ufl.edu

#### **Other State Licenses**

This practitioner has indicated the following additional state licensure:

State	Profession
PUERTO RICO	MEDICAL
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 is exempt from paying assessment.

## **Education and Training**

#### **Education and Training**

Institution Name	Degree Title	Dates of Attendance	Graduation Date
UNIVERSITY OF PUERTO RICO/SCHO	MD	7/1/1990 - 6/1/1994	06/10/1994

#### **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
UNIVERSITY OF PUERTO RICO	<b>RIO PIEDRAS</b>	PUERTO RICO	07/01/1988	06/30/1990	BS BIOLOGY

#### **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 PUERTO RICO	INTERNSHIP	IM - INTERNAL MEDICINE		SAN JUAN	PUERTO RICO	07/01/1994	06/30/1995
UNIVERSITY OF PUERTO RICO	RESIDENCY	IM - INTERNAL MEDICINE		NEVAREZ	PUERTO RICO	07/01/1995	06/30/1998
UNIVERSITY OF FLORIDA	FELLOWSHIP	M - GASTROENTEROLOGY		GAINESVILLE	FLORIDA	07/01/1998	06/30/2001
CEDARS-SINAI MEDICAL CENTER-UCLA	FELLOWSHIP	M - GASTROENTEROLOGY	HEPATOLOGY AND LIVER TRANSPLANT	LOS ANGELES	CALIFORNIA	07/01/2001	06/30/2002

### 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 MEDICINE	UNIVERSITY OF FLORIDA COLLEGE OF MEDICIN	GAINESVILLE	FLORIDA
PROGRAM DIRECTOR TRANSPLANT HEPATOLOGY	UNIVERSITY OF FLORIDA COLLEGE OF MEDICIN	GAINESVILLE	FLORIDA
DIRECTOR OF HEPATOLOGY	UNIVERSITY OF FLORIDA COLLEGE OF MEDICIN	GAINEVILLE	FLORIDA
MEDICAL DIRECTOR LIVER TRANSPLANT	UNIVERSITY OF FLORIDA COLLEGE OF MEDICIN	GAINESVILLE	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 INTERNAL MEDICINE	IM - INTERNAL MEDICINE	
AMERICAN BOARD OF INTERNAL MEDICINE	IM - GASTROENTEROLOGY	

## **Financial Responsibility**

#### **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 an affiliation with the following committees: MEMBERSHIP NATIONAL COMMITTEE - AASLD CHRONIC LIVER DISEASE FOUNDATION - SPEAKER UNOS LIVER REGIONAL REVIEW BOARD - MEMBER GASTROENTEROLOGY FELLOWSHIP SELECTION COMMITTEE 4TH YEAR HEPATOLOGY FELLOWSHIP CURRICULUM COMMITTEE GASTROENTEROLOGY AND HEPATOLOGY "STATE OF THE ART LECTURES" LIVER TRANSPLANTATION PATIENT SELECTION COMMITTEE LIVER TRANSPLANTATION FOR THE STUDY OF THE LIVER AMERICAN ASSOCIATION FOR THE STUDY OF LIVER DISEASES AMERICAN COLLEGE OF GASTROENTEROLOGY AMERICAN GASTROENTEROLOGICAL ASSOCIATION MEMBER OF THE MEDICAL ADVISORY COMMITTEE- AMERICAN LIVER FOU MEMBER OF INTERLINK HEALTHCARE COMMUNICATIONS BUREAU MEMBERSHIP COMMITTEE MEMBER –AASLD

#### **Professional or Community Service Awards**

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

Community Service/Award/Honor	Organization
TRAINING GRANT FOR FELLOWSHIP AT UNIVERSITY OF FLORIDA	NATIONAL INSTITUTES OF HEALTH
HONORS FOR RESEARCH IN THE COMMUNITY AS A MEDICAL STUDENT	NATIONAL HEALTH SERVICES CORPS
ELECTED/INDUCTED	GOLDEN KEY NATIONAL HONOR SOCIETY
HONOR ROLL DURING UNDERGRADUATE YEARS 1986-1990	UNIVERSITY OF PUERTO RICO
EXEMPLARY TEACHER AWARD – THIRD COHORT	UNIVERSITY OF FLORIDA COLLEGE OF MEDICINE
EXCELLENCE IN TEACHING - FACULTY AWARD	DEPARTMENT OF MEDICINE UNIVERSITY OF FLORIDA
UNIVERSITY OF COLORADO YOUNG INVESTIGATORS AWARD	UNIVERSITY OF COLORADO
AMERICAN ASSOCIATION FOR THE STUDY OF LIVER DISEASES SCHERIN	CEDARS-SINAI MEDICAL CENTER-UCLA
NATIONAL INSTITUTE OF HEALTH TRAINING GRANT DK 07455	UNIVERSITY OF FLORIDA
EXCELLENCE IN TEACHING RESIDENTS- FACULTY AWARD	DEPARTMENT OF MEDICINE UNIVERSITY OF FLORIDA
EXCELLENCE IN TEACHING MED STUDENTS- FACULTY AWARD	DEPARTMENT OF MEDICINE UNIVERSITY OF FLORIDA

#### **Publications**

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

Title	Publication	Date
OUTCOME OF LIVER TRANSPLANT RECIPIENTS TREATED WITH INT	HEPATOLOGY 30(4)-ABSTRACT 321	10/01/1999
ORAL GANCICLOVIR MONOTHERAPY IN THE PREVENTION OF CYTO	GASTROENTEROLOGY 116(4)-ABSTRACT G3104	04/01/1999
PREVALENCE OF SEROTYPES IN THE HEPATITIS C POPULATION	PR HEALTH SCIENCE JOURNAL 98	
FINE NEEDLE ASPIRATION DIAGNOSIS OF HYDATID CYST	PR HEALTH SCIENCE JOURNAL 18(2)	06/01/1999
CYCLOSPORINE SUPPRESSES HEPATITIS C IN VITRO AND INCREASES T	LIVER TRANSPLATATION 12 1 51-57	01/07/2006
HEPATIC STELLATE CELL ACTIVATION EARLY AFTER LIVER TRANSPLAN	LIVER TRANSPL OCT 2005 11 10 1235-1241	10/01/2005
SHORT-RECOVERY TIME AFTER PERCUTANEOUS LIVER BIOPSY SHOULD	CLIN GASTROENTEROL AND HEPATOL 2005 SEP 3 9 926-929	09/01/2005
AN IMMUNOMODULATORY ROLE FOR CD4+CD25+ REGULATORY T LYMPHOCY	HEPATOLOGY NOV 2004 40 5 1062-1071	11/01/2004
VIRAL HEPATITIS CURRENT AND FUTURE HEPATITIS C THERAPIES	ARCH MED RES	11/18/2007
IS SONOGRAPHIC SURVEILLANCE OF TIPS NECESSARY	CLIN RADIOL	10/17/2008

#### **Professional Web Page**

http://gastroliver.medicine.ufl.edu/hepatology/faculty-staff

#### 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 ASSOCIATION FOR THE STUDY OF LIVER DISEASES

AMERICAN CHEMICAL SOCIETY, UPR

AMERICAN COLLEGE OF PHYSICIANS

AMERICAN GASTROENTEROLOGY ASSOCIATION

AMERICAN MEDICAL ASSOCIATION

EUROPEAN ASSOCIATION FOR THE STUDY OF THE LIVER MEMBER

PRE-MED STUDENT ASSOCIATION, UPR