Florida HEALTH Department of Health

OCTAVIO COSME-MONTALVO M.D.

License Number: ME79294

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/1995
License Expiration Date	01/31/2029

General Information

Primary Practice Address

OCTAVIO COSME-MONTALVO M.D.
1412 BEACONSFIELD DR
WESLEY CHAPEL, FL 33543

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

This practitioner has not indicated any staff privileges.

Institution Name	City	State
	ROANOKE RAPIDS / ECU HEALTH NORTH HOSPITAL	NORTH CAROLINA
	ENID/ INTEGRIS HOSPITAL	OKLAHOMA
	FOND DU LAC / SSM HEALTH ST. AGNES HOSPITAL	WISCONSIN

Email Address

Please contact at: **ocosme@tampabay.rr.com and octaviocosme2@gmail.com**

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NORTH CAROLINA	MEDICAL
KENTUCKY	MEDICAL
WEST VIRGINIA	MEDICAL
WISCONSIN	MEDICAL
OKLAHOMA	MEDICAL

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
SAN JUAN BAUTISTA	MD	8/1/1984 - 6/1/1988	06/16/1988

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
CATHOLICA UNIVERSITY OF PUERTO RICO	PONCE	PUERTO RICO	08/01/1980	05/30/1984	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
ST. VINCENT MEDICAL CENTER	FELLOWSHIP	IM - CARDIOVASCULAR DISEASE		STATEN ISLAND	NEW YORK	07/01/1992	06/30/1995
ST. VINCENT MEDICAL CENTER	RESIDENCY	IM - INTERNAL MEDICINE		STATEN ISLAND	NEW YORK	07/01/1990	06/30/1992
ST. VINCENT MEDICAL CENTER	INTERNSHIP	TY - TRANSITIONAL YEAR		STATEN ISLAND	NEW YORK	07/01/1989	06/30/1990

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 INTERNAL MEDICINE	IC - INTERVENTIONAL CARDIOLOGY	11/01/2002
AMERICAN BOARD OF INTERNAL MEDICINE	IM - CARDIOVASCULAR DISEASE	

Financial Responsibility

Financial Responsibility

I have hospital staff privileges and I have professional liability coverage in an amount not less than $250,000 per claim, with a minimum annual aggregate of not less than $750,000 from an authorized insurer as defined under s. 624.09, F. S., from a surplus lines insurer as defined under s. 626.914(2), F. S., from a risk retention group as defined under s. 627.942, F.S., from the Joint Underwriting Association established under s. 627.351(4), F. S., or through a plan of self insurance as provided in s.627 .357, F.S.

Proceedings and Actions

Proceedings & Actions

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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 an affiliation with the following committees:
Former Treasurer ACC FL Chapter

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
FIRST PRIZE RESEARCH CONTEST	ACADEMY OF MEDICINE, STATEN ISLAND, NEW YORK
INTERN OF THE YEAR AWARD	
WHO'S WHO IN HEALTH & MEDICAL SERVICES	

Publications

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

Title	Publication	Date
THE PHARMACOLOGIC MANAGEMENT OF PNEUMOCYSTIS CARINI	JOURNAL OF OSTEOPATHIC MEDICINE	06/01/1992
NEUROCYST ICEROCOSIS: AN OLD DISEASE WITH NEW QUESTIONS	JOURNAL OF FAMILY PRACTICE	12/01/1994
ESTIMATION OF LEFT VENTRICULAR SYSTOLIC FUNCTION BY NON-	CLINICAL CARDIOLOGY	01/01/1997
"ITS ALIVE ! THE EVOLUTION OF THROMBUS AND WHY FAST, EFFECTIVE REMOVAL IS KEY"	ENDOVASCULAR TODAY VOL 19 # 4 : 80-86	01/05/2021
INTERIM OUTCOMES OF MECHANICAL THROMBECTOMY FOR DEEP VEIN THROMBOSIS FROM THE ALL COMER CLOUT REGISTRY	JOURNAL OF VASCULAR SURGERY VENOUS AND LYMPHATIC VENOUS DISORDERS VOL 10, ISSUE 4, 832-840	01/02/2022

Professional Web Page

ocosme@tampabay.rr.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.
SPANISH

Other Affiliations

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

Affiliation
AMERICAN COLLEGE OF CARDIOLOGY-FELLOW
AMERICAN COLLEGE OF CHEST PHYSICIANS-FELLOW
AMERICAN COLLEGE OF PHYSICIANS
AMERICAN MEDICAL ASSOCIATION
NEW YORK STATE MEDICAL SOCIETY
PUERTO RICO COLLEGE OF PHYSICIANS
PUERTO RICO MEDICAL ASSOCIATION
SOCIETY OF CARDIAC ANGIOGRAPHY AND INTERVENTION-FELLOW