



## SCOTT HAROLD NORWOOD MD

License Number: ME87412

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	07/01/1977
License Expiration Date	01/31/2027

## General Information

### Primary Practice Address

SCOTT HAROLD NORWOOD MD  
1020 EAST IDEL STREET  
TYLER, TX 75701

### Medicaid

This practitioner DOES participate in the Medicaid program.

### Staff Privileges

This practitioner has not indicated any staff privileges.

Institution Name	City	State
	UT HEALTH - TYLER, TYLER (NOT ON LIST GIVEN)	TEXAS

### Email Address

Please contact at: [snorwo01@msn.com](mailto:snorwo01@msn.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
TEXAS	MD

### 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
UNIVERSITY OF NORTH CAROLINA	MD		05/15/1977

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
US AIR FORCE MEDICAL CENTER	INTERNSHIP	GS - SURGERY		KEESLER AIR FORCE BASE	MISSISSIPPI	07/01/1977	06/30/1978
US AIR FORCE MEDICAL CENTER	RESIDENCY	GS - SURGERY		KEESLER AFB	MISSISSIPPI	07/01/1978	06/30/1982
UNIVERSITY OF MIAMI/JACKSON MEMORIAL HOSPITAL	FELLOWSHIP	GS - SURGICAL CRITICAL CARE		MIAMI	FLORIDA	07/01/1982	06/30/1983

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 currently holds faculty appointments at the following medical/health related institutions of higher learning:

Title	Institution	City	State
PROFESSOR, DEPT OF SURGERY	UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER	TYLER	TEXAS

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 SURGERY	GS - SURGERY	02/18/1983

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 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:

NONE

### Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
LIFETIME ACHIEVEMENT AWARD-TSA G, STATE OF TEXAS - 2017	REGIONAL ADVISORY COUNCIL, TRAUMA SERVICE AREA G, TEXAS
FRIST HUMANITARIAN AWARD - 2018	HCA - REGIONAL MEDICAL CENTER BAYONET POINT, HUDSON, FLORIDA

### Publications

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

Title	Publication	Date
PUBLICATION LIST UP TO DATE AND AVAILABLE UPON REQUEST		09/04/2024

Professional Web Page

NONE

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
FELLOW - AMERICAN COLLEGE OF SURGEONS
FELLOW, AMERICAN COLLEGE OF CRITICAL CARE MEDICINE
SENIOR MEMBER - AMERICAN ASSOC. FOR THE SURGERY OF TRAUMA
SENIOR MEMBER - EASTERN ASSOC. FOR THE SURGERY OF TRAUMA