



## ARMANDO E HERNANDEZ-REY

License Number: ME92393

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	02/01/1999
License Expiration Date	01/31/2027
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

## General Information

### Primary Practice Address

ARMANDO E HERNANDEZ-REY  
4425 PONCE DE LEON BLVD. #110  
SUITE 1605-110  
CORAL GABLES, FL 33146

### 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
BAPTIST HOSPITAL OF MIAMI	MIAMI	FLORIDA
SOUTH MIAMI HOSPITAL	MIAMI	FLORIDA
MOUNT SINAI MEDICAL CENTER	MIAMI BEACH	FLORIDA
MERCY HOSPITAL INC.	MIAMI	FLORIDA

### Email Address

Please contact at: [drh@conceptionsflorida.com](mailto:drh@conceptionsflorida.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NEW JERSEY	MD
FLORIDA	MD
NEW YORK	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
ESCUELA AUTONOMA DE CIENCIAS	MD	1/5/1994 - 7/22/1998	07/22/1998

## 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 MIAMI	CORAL GABLES	FLORIDA	08/01/1989	12/01/1993	BS - PSYCHOLOGY & 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 MIAMI	RESIDENCY	OBG - OBSTETRICS AND GYNECOLOGY		MIAMI	FLORIDA	07/01/1999	06/01/2003
UMDNJ	FELLOWSHIP	OBG - OBSTETRICS AND GYNECOLOGY	REPRODUCTIVE ENDOCRINOLOGY AND INFERTILITY	HASBROUCK HEIGHTS	NEW JERSEY	07/01/2003	06/30/2006

# 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
FELLOW	UMDNJ-NEW JERSEY MEDICAL SCHOOL	NEWARK	NEW JERSEY
ASSOCIATE PROFESSOR	FLORIDA INTERNATIONAL UNIV. COLLEGE OF MEDICINE	MIAMI	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 OBSTETRICS & GYNECOLOG	OBG - OBSTETRICS AND GYNECOLOGY	
AMERICAN BOARD OF OBSTETRICS & GYNECOLOG	OBG - OBSTETRICS AND GYNECOLOGY	

# 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

#### 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:

AMERICAN COLLEGE OF OBSTETRICIAN GYNECOLOGISTS

AMERICAN SOCIETY OF REPRODUCTIVE ENDOCRINOLOGISTS

AMERICAN COLLEGE OF SURGEONS

AMERICAN ASSOCIATION OF GYNECOLOGIC LAPAROSCOPISTS  
SOCIETY OF LAPAROSCOPIC SURGEONS  
AMERICAN MEDICAL ASSOCIATION  
SOCIETY FOR REPRODUCTIVE ENDOCRINOLOGY AND INFERTILITY

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
WILLIAM J LAMARE EXCELLENCE IN REPRODUCTIVE ENDOC	UNIVERSITY OF MIAMI DEPARTMENT OF OBSTETRICS AND GYNECOLOGY
OUTSTANDING SERVICE TO ROXCY BOLTON RAPE TREATMENT CENTER	UNIVERSITY OF MIAMI JACKSON MEMORIAL HOSPITAL
"CANES PROJECT"- MISSION TO GHANA	BAPTIST MISSION CENTER
VOLUNTEER	LEAGUE AGAINST CANCER
VOLUNTEER	AMERICAN CANCER SOCIETY
VOLUNTEER	JUVENILE DIABETES RESEARCH FOUNDATION

Publications

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

Title	Publication	Date
ADVANCED EXTRAUTERINE PREGNANCY	OPERATIVE OBSTETRICS 3RD EDITION	12/01/2005
ANOVULATION	EMEDICINE	08/01/2005
ANTRAL FOLLICLE COUNT AS A PREDICTOR OF TOTAL FERTILITY AND STERILITY AND DAILY GONA	FERTILITY AND STERILITY	04/15/2009
DUPLICATED ECTOPIC HYDROURETER PRESENTING AS CHRONIC PELVIC	FERTILITY AND STERILITY	03/23/2007

Professional Web Page

www.conceptionsflorida.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  
PORTUGUESE

Other Affiliations

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

Affiliation
ATTENDING PHYSICIAN-NEWARK BETH ISRAEL MEDICAL CENTER
ATTENDING PHYSICIAN-SAINT PETERS UNIVERSITY HOSPITAL
CERT: BOARD ELIGIBLE FOR AM BD OF OB/GYN
DISTRICT III JUNIOR FELLOW CHAIR OF ACOG
PAST DISTRICT III JUNIOR FELLOW VICE CHAIR ACOG
PAST FLORIDA SECTION JUNIOR FELLOW CHAIR ACOG
PAST FLORIDA SECTION JUNIOR FELLOW VICE CHAIR ACOG