RALPH SIMON RYBACK

License Number: ME92563

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 07/01/1966
License Expiration Date 01/31/2027

Controlled Substance Prescriber (for the Yes

Treatment of Chronic Non-malignant

Pain)

General Information

Primary Practice Address

RALPH SIMON RYBACK 1303 HOMESTEAD RD N SUITE 102 LEHIGH ACRES, FL 33936

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

This practitioner has not indicated any staff privileges.

Institution Name	City	State
	NAPLES	FLORIDA

Email Address

Please contact at: rsryback@gmail.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
VIRGINIA	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
WAYNE STATE UNIVERSITY	MD	8/10/1962 - 6/9/1966	06/09/1966

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
WAYNE STATE UNIVERSITY	DETROIT	MICHIGAN	09/01/1961	07/01/1962	BS - BACHELOR OF SCIENCE

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
BOSTON CITY HOSPITAL	INTERNSHIP	IM - INTERNAL MEDICINE		BOSTON M	MASSACHUSETTS	07/01/1966	06/01/1967
BOSTON CITY MASSACHUSETTS	RESIDENCY	P - PSYCHIATRY		BOSTON	MASSACHUSETTS	07/01/1967	07/01/1968
MCLEAN HOSPITAL	RESIDENCY	P - PSYCHIATRY		BELMONT	MASSACHUSETTS	07/01/1970	06/01/1972

Academic Appointments

Graduate Medical Education

This practitioner has 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 PSYCHIATRY AND NEUROLO	P - PSYCHIATRY	10/01/1976

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 not indicated any committees on which they serve for any health entity with which they are affiliated.

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
RESEARCH FELLOW/MICHIGAN HEART ASSOCIATION	MICHIGAN HEART ASSOCIATION

Publications

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

Title	Publication	Date
TOPIRAMATE IN THE TREATMENT OF DIABETES IN PSYCHIATRIC	PRIMARY PSYCHIATRY, 12:57-60	01/01/2005
NALTREXONE IN THE TREATMENT OF ADOLESCENT SEXUAL OFFENDERS	CLIN PSYCHIATRY, 65:7;982-986	01/01/2004

Title	Publication	Date
TOPRIRAMATE IN THE TREATMENT OF PSORIASIS: A PILOT STUDY	BRIT J DERMATOLOGY, 147:130-133	01/01/2002
GABAPENTIN IN THE TREATMENT OF ALZHEIMER'S AND OTHER DEM	D PRIMARY PSYCHIATRY, 12:42-44	01/01/2002
BIOELECTRICAL MODULATORS AND THE CELL MEMBRANE IN PSYCH	PSYCHOPHARMACOLOGY BULLETIN, 35:1-44	01/01/2001

Professional Web Page

ralphrybackmd.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 not provided any national, state, local, county, or professional affiliations.