## SIJO JOSEPH PAREKATTIL

#### License Number: ME92021

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 07/01/1998
License Expiration 01/31/2027

Date

# General Information

## **Primary Practice Address**

SIJO JOSEPH PAREKATTIL 15548 AVANT CONCIERGE UROLOGY 15548 WEST COLONIAL DRIVE WINTER GARDEN, FL 34787

#### Medicaid

This practitioner DOES participate in the Medicaid program.

#### **Staff Privileges**

This practitioner currently holds staff privileges at the following hospital/medical/health institutions:

Institution Name	City	State
SOUTH LAKE HOSPITAL	CLERMONT	FLORIDA
	CLERMONT	FLORIDA

#### **Email Address**

Please contact at: sijo@avantconciergeurol.com

#### **Other State Licenses**

This practitioner has indicated the following additional state licensure:

State	Profession
	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
NEW YORK MEDICAL COLLEGE	MD	8/1/1994 - 5/1/1998	05/26/1998

# **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 MICHIGAN	ANN ARBRO	MICHIGAN	05/01/1991	05/01/1994	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
ALBANY MEDICAL CENTER	INTERNSHIP	GS - SURGERY		ALBANY	NEW YORK	07/01/1998	06/01/1999
ALBANY MEDICAL CENTER	RESIDENCY	U - UROLOGY	,	ALBANY	NEW YORK	07/01/2003	06/01/2004
CLEVELAND CLINIC FOUNDATION	FELLOWSHIF	U- UROLOGY	MALE INFERTILITY	CLEVELAND	OHIO	07/01/2003	06/01/2004
CLEVELAND CLINIC FOUNDATION	FELLOWSHIF	-	ADVANCED LAPAROSCOPIC SURGERY	CLEVELAND	OHIO	07/01/2004	07/01/2005

# **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
CO-DIRECTOR OF ROBOTIC SURGERY AND HEAD OF	UNIVERSITY OF FLORIDA COLLEGE OF	GAINESVILL	E FLORIDA
INFERTILITY	MEDICIN		

# **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 UROLOGY	U - UROLOGY	

# 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 UROLOGY ASSOCIATION
AMERICAN SOCIETY OF ANDROLOGY
AMERICAN SOCIETY OF REPRODUCTIVE MEDICINE

SOCIETY FOR THE STUDY OF MALE REPRODUCTION SOCIETY FOR MALE REPRODUCTIVE UROLOGY ENDOUROLOGY SOCIETY ENGINEERING UROLOGY SOCIETY SOCIETY OF LARAPAROSCOPIC SURGEONS RAMSES

# **Professional or Community Service Awards**

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

Community Service/Award/Honor	Organization
INNOVATOR AWARD	CLEVELAND CLINIC FOUNDATION
TAU BETA PI	ENGINEERING HONOR SOCIETY
ETA KAPPA NU	ELECTRICAL ENGINEERING HONOR SOCIETY
EPEIANS	ENGINEERING LEADERSHIP HONOR SOCIETY
MORTAR BOARD	UNIVERSITY OF MICHIGAN HONOR SOCIETY
JOSEPH ADDONIZIO UROLOGY AWARD 1998	NEW YORK MEDICAL COLLEGE
PRAECIS AUA G P MURPHY UROLOGY AWARD 2002	AMERICAL UROLOGICAL ASSOCIATION
SILVER SCALPEL SURGICAL AWARD 2003	ALBANY MEDICAL COLLEGE
FELLOW OF THE YEAR AWARD 2004	CLEVELAND CLINIC FOUNDATION
SLS LAPAROSCOPY RESIDENT AWARD 2002	ALBANY MEDICAL COLLEGE

#### **Publications**

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

Title	Publication	Date
AMMONIUM-CHLORIDE-INDUCED PROSTATIC HYPERTROPHY IN VITRO	UROLOGICAL RESEARCH	10/01/1999
COMBINED URINE MARKERS TO DETECT BLADDER CANCER	JOURNAL OF UROLOGY	03/01/2003
PREDICTING OUTCOME AND DURATION OF URETERAL STONE PASSAGE	JOURNAL OF UROLOGY	04/01/2004
PREDICTING IF A VE WILL BE REQUIRED FOR VASECTOMY REVERSAL	JOURNAL OF UROLOGY	05/01/2005
MODELS TO PREDICT DURATION OF STAY AFTER LAP PARTIAL NX	JOURNAL OF UROLOGY	10/01/2005
MULTI INSTITUTIONAL VALIDATION OF VE MODEL	JOURNAL OF UROLOGY	01/01/2006
VALIDATION OF STONE OUTCOME PREDICTOR MODEL	JOURNAL OF UROLOGY	02/01/2006

## **Professional Web Page**

www.avanturol.com

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