Florida HEALTH Department of Health

CHRISTOPHER JOSEPH PHAM

License Number: OS9899

Profession	Osteopathic Physician
License Status	Clear/Active
Year Began Practicing	01/01/2003
License Expiration Date	03/31/2028
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes

General Information

Primary Practice Address

CHRISTOPHER JOSEPH PHAM
4521 EXECUTIVE DR
SUITE 102
NAPLES, FL 34119

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
SURGICARE CENTER	BOCA RATON	FLORIDA
SURGICARE CENTER	MIAMI	FLORIDA

Email Address

Not Provided

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
CALIFORNIA	
ARIZONA	
MICHIGAN	

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
DES MOINES UNIVERSITY	DO	8/1/1992 - 5/31/1996	05/31/1996

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 TEXAS	AUSTIN	TEXAS	08/01/1988	05/01/1992	

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
DETROIT RIVERVIEW HOSPITA HENRY FORD HEALTH SYSTEM	INTERNSHIP	NEUROSURGERY	HORIZON HEALTH SYSTEM AOA APPROVED INTERNSHIP	WARREN	MICHIGAN	06/24/1996	06/23/1997
HORIZON HEALTH SYSTEM/HENRY FORD HEALTH SYSTEM	RESIDENCY	NS - NEUROLOGICAL SURGERY	GENERAL SURGERY		MICHIGAN	07/01/1997	06/30/2002
UNIVERSITY OF ARIZONA/DIVISION OF NEUROSURGERY	FELLOWSHIP		SPINE FELLOWSHIP IN NEUROSURGERY	TUCSON	ARIZONA	07/01/2000	12/31/2000
STANFORD UNIVERSITY MEDICAL CENTER	FELLOWSHIP		STEREOTACTIC RADIOSURGERY	STANFORD	CALIFORNIA	07/01/2002	07/15/2003
UNIVERSITY OF ARIZONA	FELLOWSHIP		NEUROSURGERY	TUCSON	ARIZONA	07/01/2000	12/31/2000
UNIVERSITY OF ARIZONA	FELLOWSHIP		COMPREHENSIVE NEUROSURGERY	TUCSON	ARIZONA	07/01/2000	12/31/2000

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 does not hold any certifications from specialty boards recognized by the Florida board which regulates the profession for which he/she is licensed.

Financial Responsibility

Financial Responsibility

I have hospital staff privileges and I have obtained and maintain 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 FS, from a surplus lines insurer as defined under s.626.914(2)FS, from a risk retention group as defined under s.627.942 FS, from the Joint Underwriting Association established under s.627.351(4)FS, or through a plan of self-insurance as provided in s.627.357 FS, or through a plan of self-insurance which meets the conditions specified for satisfying financial responsibility in s.766.110 FS.

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:

For instructions on how to order copies of final disciplinary actions, please click here.

View Discipline Narratives

View Board Actions

Taken By	Date Of Action	Description of Disciplinary Action	Under Appeal
FLORIDA DEPARTMENT OF HEALTH	10/07/2025	PROBATION SATISFIED	NO

Type	Imposed	Due	Completed	Amt Due	Amt Recvd
				$ 0.00	$ 0.00
				$ 0.00	$ 0.00

The information below is self reported by the practitioner. For Florida health care practitioner discipline, see information listed above.

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:
American Medical Association

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
HONORABLE MENTION AWARD 5/01	MICHIGAN OSTEOPATHIC ASSOCIATION
ACOS NEUROSURGERY RESIDENT ACHIEVEMENT AWARD 9/02	
1ST PLACE IN NEUROSURGERY SCIENTIFIC EXHIBIT 10/01	ANNUAL CLINICAL ASSEMBLY OF OSTEOPATHIC SPECIALISTS
NEUROSURGERY INVENTION 3/01	UNITED STATES PATENT #6,197,030
NEUROSURGERY FELLOWSHIP ACHIEVEMENT AWARD 12/00	UNIVERSITY OF ARIZONA, HEALTH SCIENCES CENTER

Publications

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

Title	Publication	Date
CYBERKNIFE RADIOSURGERY FOR TRIGEMINAL NEURALGIA	STEREOTACT FUNCT NEUROSURG	01/01/2003
PRELIMINARY VISUAL FIELD PRESERVATION AFTER STAGED...	NEUROSURGERY	04/01/2004
VISUAL PRESERVATION AFTER CYBERKNIFE STAGED RADIO-...	AM ASSN OF NEUROLOGICAL SURGEONS/W NEURO SOCIETY	09/01/2003
SPINAL CORD TOLERANCE TO STAGED STEREOTACTIC RADIO-..	INTERNATIONAL STERETACTIC RADIOSURGERY SOCIETY CONG.	06/22/2003
VISUAL FIELD PRESERVATION AFTER STAGED IMAGED-GUIDED...	AM SOICETY THERAPEUTIC RADIOLOGY AND ONCOLOGY	01/01/2003

Professional Web Page

www.NeurosurgeryFlorida.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.
VIETNAMESE

Other Affiliations

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

Affiliation
AMERICAN MEDICAL ASSOCIATION