### REBECCA AMY KOSLOFF

### License Number: ME95691

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 07/01/2000
License Expiration Date 01/31/2026

Controlled Substance Prescriber (for the Yes

Treatment of Chronic Non-malignant

Pain)

# **General Information**

# **Primary Practice Address**

REBECCA AMY KOSLOFF 9776 BONITA BEACH ROAD SE STE 201A BONITA SPRINGS, FL 34135

#### 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
NAPLES COMMUNITY HOSPITAL	NAPLES	FLORIDA
NORTH COLLIER HOSPITAL	NAPLES	FLORIDA
PHYSICIANS REGIONAL HOSPITAL	NAPLES	FLORIDA
PHYSICIANS REGIONAL HOSPITAL	NAPLES	FLORIDA

### **Email Address**

Please contact at: licensing@flcancer.com

#### **Other State Licenses**

This practitioner has indicated the following additional state licensure:

State	Profession
NEW YORK	MD EXPIRED

# 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
STATE UNIVERSITY OF NEW YORK (SUNY) STONY BROOK	MD	8/1/1996 - 5/1/2000	05/19/2000

### **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
PRINCETON UNIVERSITY	PRINCETON	NEW JERSEY	09/01/1991	06/01/1995	BA PSYCHOLOGY

# **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
BETH ISRAEL MEDICAL CENTER	INTERNSHIP	IM - INTERNAL MEDICINE		NEW YORK	NEW YORK	07/01/2000	06/01/2001
BETH ISRAEL MEDICAL CENTER	RESIDENCY	IM - INTERNAL MEDICINE		NEW YORK	NEW YORK	07/01/2001	06/01/2003
NEW YORK UNIVERSITY MEDICAL CENTER	FELLOWSHIF	P IM - HEMATOLOGY AND ONCOLOGY		NEW YORK	NEW YORK	07/01/2003	06/01/2006

# **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 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 INTERNAL MEDICINE	IM - ONCOLOGY	

# 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:
ASH-AMERICAN SOCIETY OF HEMATOLOGY
ASCO-AMERICAN SOCIETY OF CLINICAL ONCOLOGY
BOSOM BUDDIES BREAST CANCER SUPPORT GROUP NAPLES FL
COLLIER COUNTY MEDICAL SOCIETY

# **Professional or Community Service Awards**

This practitioner has not provided any professional or community service activities, honors, or awards.

#### **Publications**

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

Title	Publication	Date
PHASE I STUDY OF THE COMBINATION OF BKM120 AND BEVACIZUMAB IN PATIENTS WITH RELAPSED/REFRACTORY GLIBLASTYOMA MULTIFORME (GBM) OR OTHER REFRACTORY SOLID TUMORS	JOURNAL OF CLINICAL ONCOLOGY	01/01/2013
FLUOXETINE ALLEVIATES BEHAVIORAL DEPRESSION	NEUROPSYCHOPHARMACOLOGY	04/27/2011
SORAFENIB AND CONTINUED ERLOTINIB OR SORAFENIB ALONE IN PATIENTS WITH ADVANCED NON- SMALL CELL LUNG CANCER PROGRESSING ON ERLOTINIB: A RANDOMIZED PHASE II STUDY OF THE SARAH CANNON RESEARCH INSTITUTE (SCRI)	JOURNAL OF CLINICAL ONCOLOGY	01/01/2012
EXCEPTIONAL RESPONSE TO PEMBROLIZUMAB IN A PATIENT WITH CASTRATION-RESISTANT PROSTATE CANCER WITH PANCYTOPENIA	JOURNAL OF ONCOLOGY	04/09/2019
SORAFENIB AND CONTINUED ERLOTINIB OR SORAFENIB ALONE IN PATIENTS WITH NON-SMALL CELL LUNG CANCER PROGRESSING ON ERLOTNIB: A RANDOMIZED PHASE II STUDY OF THE SARAH CANNON RESEARCH INSTITUTE	LUNG CANCER 2017	09/18/2017

# **Professional Web Page**

www.flcancer.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 provided the following national, state, local, county, and professional affiliations:

# Affiliation

FLORIDA ASSOCIATION OF CLINICAL ONCOLOGY