AHMET CUNEYT OZAKTAY

License Number: ME97587

ProfessionMedLicense StatusClearYear Began Practicing09/0License Expiration Date01/3Controlled Substance Prescriber (for the
Treatment of Chronic Non-malignantYesPain)Pain

Medical Doctor Clear/Active 09/01/1988 01/31/2027 Yes

General Information

Primary Practice Address

AHMET CUNEYT OZAKTAY 13722 S. JOG RD A DELRAY BEACH, FL 33446

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 |
|--|---------------|---------|
| UNIVERSITY HOSPITAL AND MEDICAL CENTER | TAMARAC | FLORIDA |
| CORAL SPRINGS MEDICAL CENTER | CORAL SPRINGS | FLORIDA |
| NORTHWEST MEDICAL CENTER | MARGATE | FLORIDA |

Email Address

Please contact at: ozaktay@yahoo.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

| State | Profession |
|---------------|------------------|
| NEW HAMPSHIRE | ANESTHESIOLOGIST |
| NEW YORK | MEDICAL DOCTOR |

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 |
|-----------------------------------|--------------|---------------------|-----------------|
| CERRAHPASA MEDICAL SCHOOL, TURKEY | MD | 7/1/1982 - 8/1/1988 | 08/01/1988 |

Other Health Related Degrees

This practitioner does not hold any additional health related degrees.

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 MEDICAL CENTER | INTERNSHIP | IM - INTERNAL MEDICINE | | DETROIT | MICHIGAN | 07/01/2000 | 08/01/2001 |
| DETROIT MEDICAL CENTER | RESIDENCY | AN - ANESTHESIOLOGY | , | DETROIT | MICHIGAN | 08/01/2001 | 12/01/2005 |
| DARTMOUTH-HITCHCOCK MEDICAL CENTER | FELLOWSHIF | P AN - PAIN MANAGEMENT | | LEBANON | I NEW HAMPSHIRE | | 01/01/2007 |

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 PHYSICIAN SPECIALTIES | AN - PAIN MANAGEMENT | 12/03/2024 |

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.

The following liability actions have been reported as required under section 456.049, F. S., within the previous 10 years:

| Incident Date | County | Judicial Case | Settlement Date | Amount | Policy Amount |
|---------------|---------|---------------|-----------------|--------------|---------------|
| 06/05/2023 | BROWARD | CACE24-012931 | 04/24/2025 | \$250,000.00 | \$250,000.00 |

Optional Information

Committees/Memberships

This practitioner has an affiliation with the following committees: AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COM AMERICAN SOCIETY OF REGIONAL ANESTHESIA AND PAIN MANAGEMENT INTERNATIONAL ANESTHESIA RESEARCH SOCIETY INTERNATIONAL ASSOCIATION FOR THE STUDY OF PAIN INTERNATIONAL SOCIETY FOR THE STUDY OF THE LUMBAR SPINE INTERNATIONAL SPINE INTERVENTION SOCIETY SOCIETY FOR THE NEUROSCIENCE TURKISH AMERICAN MEDICAL ASSOCIATION TURKISH NEUROSCIENCE SOCIETY AMERICAN BACK SOCIETY AMERICAN PAIN SOCIETY AMERICAN SOCIETY

Professional or Community Service Awards

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

| Community Service/Award/Honor | Organization |
|--|---|
| DARTMOUTH MEDICAL SCHOOL PAIN MANAGEMENT EDUCATION LECTURER | DARTMOUTH MEDICAL SCHOOL |
| BIOENGINEERING MASTERS - CLINICAL PAIN MANAGEMENT LECTURER | WAYNE STATE UNIVERSITY |
| PHYSICAL THERAPY DEPT - BASICS OF PAIN LECTURER | UNIVERSITY OF BARRY MIAMI FLORIDA |
| SOFAMOR DANEK CORP - BEST POSTER PRESENTATION | INTERNATIONAL SOCIETY FOR THE STUDY OF THE LUMBAR SPINE 1996 |
| THE KAPPA DELTA ANN DONER VAUGHN AWARD 1995 | THE AMERICAN ACADEMY OF THE ORTHOPADIC SURGEONS |
| SOFAMOR DANEK CORP - BEST POSTER PRESENTATION | SOCIETY FOR THE STUDY OF THE LUMBAR SPINE 1994 |

Publications

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

| Title | Publication | Date |
|---|--|------------|
| EFFECT OF NUCLEUS PULPOSUS ON THE NEURAL ACTIVITY OF DORSAL | SPINE | 04/01/2001 |
| DORSAL ROOT SENSITIVITY TO INTERLEUKIN-1 BETA INTERLEUKIN-6 | EUROPEAN SPINE JOURNAL | 10/01/2002 |
| THE EFFECT OF VARYING IMPACT ENERGY ON DIFFUSE AXONAL INJURY | EXPERIMENTAL BRAIN RESEARCH | 02/01/2003 |
| THE EFFECTS OF EPIDURAL APPLICATION OF ALLOGRAFTED NUCLEUS P | EUROPEAN SPINE JOURNAL | 12/01/2005 |
| SENSITIVITY OF DORSAL ROOT GANGLION TO INTERLEUKIN-1 BETA I | EUROPEAN SPINE JOURNAL | 02/01/2006 |
| THE EFFECTS OF CONTROLLED MECHANICAL LOADING ON GROUP-II II | THE JOURNAL OF BONE AND JOINT SURGERY AMERICAN VOLUME | 12/01/1992 |
| EFFECT OF SUBSTANCE P ON MECHANOSENSITIVE UNITS OF TISSUES A | JOURNAL OF ORTHOPAEDIC RESEARCH | 03/01/1993 |
| EFFECTS OF A CARRAGEENAN-INDUCED | NEUROSCIENCE RESEARCH | 10/01/1994 |
| MECHANISMS OF LOW BACK PAIN A NEUROPHYSIOLOGICAL AND NEUROA | AMERICAN ACADEMY OF ORTHOPAEDIC SURGEONS | 02/12/1995 |
| PHOSPHOLIPASE A2-INDUCED ELECTROPHYSIOLOGIC AND HISTOLOGIC C | SPINE | 12/01/1995 |
| A MORPHOLOGICAL STUDY OF THE FIBROUS CAPSULE OF THE HUMAN LU | E SPINE | 03/01/1996 |
| LUMBAR FACET PAIN BIOMECHANICS NEUROANATOMY AND NEUROPHY | JOURNAL OF BIOMECHANICS | 09/01/1996 |
| MECHANISMS OF LOW BACK PAIN A NEUROPHYSIOLOGIC AND NEUROANA | CLINICAL ORTHOPAEDICS AND RELATED RESEARCH | 02/01/1997 |
| EFFECTS OF PHOSPHOLIPASE A2 ON LUMBAR NERVE ROOT STRUCTURE A | SPINE | 05/01/1997 |
| PHOSPHOLIPASE A2 SENSITIVITY OF THE DORSAL ROOT AND DORSAL R | SPINE | 06/01/1998 |
| NEUROPHYSIOLOGICAL CHARACTERISTICS OF THE MECHANORECEPTORS I | JOURNAL OF JOINT SURGERY | 12/31/1998 |

Professional Web Page

IPWCBroward.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. TURKISH