Florida HEALTH Department of Health

ROBERT EDWARD KENT D.O.

License Number: OS12315

Profession	Osteopathic Physician
License Status	Clear/Active
Year Began Practicing	01/01/2009
License Expiration Date	03/31/2028
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Authorized to Order (Medical and Low-THC Cannabis)	Yes

General Information

Primary Practice Address

ROBERT EDWARD KENT D.O.
1401 W SEMINOLE BLVD
SANFORD, FL 32771

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
CENTRAL FLORIDA REGIONAL HOSPITAL	SANFORD	FLORIDA
OSCEOLA REGIONAL MEDICAL CENTER	KISSIMMEE	FLORIDA

Email Address

Not Provided

Other State Licenses

This practitioner has not indicated any additional state licensures.

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
MARS-HILL COLLEGE	NO DEGREE	7/1/1996 - 12/15/1996	
UNIVERSITY OF CENTRAL FLORIDA	NO DEGREE	1/1/1997 - 6/1/1997	
EMORY UNIVERSITY	NO DEGREE	7/1/1997 - 12/1/1998	
HILLSBOROUGH COMMUNITY COLLEGE	ASSOCIATE	1/1/1999 - 7/1/2000	07/01/2000
UNIVERSITY OF SOUTH FLORIDA	NO DEGREE	6/1/1999 - 12/1/2001	
BETHUNE COOKMAN UNIVERSITY	NO DEGREE	1/1/2002 - 5/20/2003	
STETSON UNIVERSITY	BACHELOR D	1/1/2003 - 6/1/2005	05/20/2005
DES MOINES UNIVERISTY - COLLEGE OF OSTEOPATHIC MEDICINE & SURGERY	DO	7/1/2005 - 5/24/2009	05/24/2009
DES MOINES UNIVERISTY - COLLEGE OF OSTEOPATHIC MEDICINE & SURGERY	MASTERS DE	7/1/2006 - 12/15/2011	12/15/2011
DES MOINES UNIVERISTY - COLLEGE OF OSTEOPATHIC MEDICINE & SURGERY	NO DEGREE	1/1/2010 - 5/25/2013	

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
ST PETERSBURG GENERAL HOSPITAL	ROTATING INTERNSHIP	FP - FAMILY PRACTICE		ST. PETERSBURG	FLORIDA	07/01/2009	06/30/2010
UNIVERSITY OF SOUTH FLORIDA	RESIDENCY	PM - PHYSICAL MEDICINE AND REHABILITATIO		TAMPA	FLORIDA	07/01/2010	06/30/2013
LARKIN PAIN MANAGEMENT	FELLOWSHIP	PM - PHYSICAL MEDICINE AND REHABILITATIO	PAIN MANAGEMENT	SOUTH MIAMI	UNITED STATES	07/01/2013	02/26/2014

Academic Appointments

Graduate Medical Education

This practitioner has 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
PAIN MANAGEMENT FELLOW	NOVA SOUTHEASTERN UNIVERSITY	SOUTH MIAMI	FLORIDA
PAIN FELLOW	NOVA SOUTHEASTERN UNIVERSITY	SOUTH MIAMI	FLORIDA

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 OSTEOPATHIC BOARD OF REHABILITA	PM - PHYSICAL MEDICINE AND REHABILITATIO	

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:

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.

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 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
POLYTRAUMA AND REHABILITATION	PHYSICAL MEDICINE REHABILITATION PRINCIPLES AND PRACTICE	10/01/2013
ESSENTIALS OF PHYSICAL MEDICINE AND REHABILITATION	TEMPOROMANDIBULAR JOINT DISORDER	01/01/2014
PATIENT SAFETY IN THE REHABILITATION OF THE ADULT WITH AN AM	PHYSICAL MEDICINE AND REHABILITATION CLINICS OF NORTH AMERIC	01/01/2012
CASE STUDY OF FIVE PATIENTS WITH SEVERE TRAUMATIC BRAIN INJU	ARCHIVES OF PHYSICAL MEDICINE AND	11/01/2011
RADIOFREQUENCY ABLATION FOR OCCIPITAL NEURALGIA IN SPECIAL P	AMERICAN JOURNAL OF PHYSICAL MEDICINE AND REHABILITATION	11/01/2011
MOTOR MANIFESTATIONS IN A PATIENT WITH COMPLEX REGIONAL PAIN	AMERICAN JOURNAL OF PHYSICAL MEDICINE AND REHABILITATION	11/01/2013
HEMIBALLISMUS IN A POLYTRAUMA PATIENT WITH A SEVERE TRAUMATI	AMERICAN JOURNAL OF PHYSICAL MEDICINE AND REHABILITATION	11/01/2013
INPATIENT AMPUTEE QUALITY IMPROVEMENT PROJECT USING A RECIPR	AMERICAN JOURNAL OF PHYSICAL MEDICINE AND REHABILITATION	11/01/2013
A MOBILE REHABILITATION CLINIC TO EXTEND SPECIALIZED SERVICE	AMERICAN JOURNAL OF PHYSICAL MEDICINE AND REHABILITATION	11/01/2013
A YOUNG FEMALE MISDIAGNOSED WITH POST-CONCUSSIVE SYNDROME TH	AMERICAN JOURNAL OF PHYSICAL MEDICINE AND REHABILITATION	11/01/2013
PERIPHERAL NERVE FIELD STIMULATION WITH INTER-LEAD CROSSTALK	AMERICAN JOURNAL OF PHYSICAL MEDICINE AND REHABILITATION	11/01/2013
THE MANNY PROJECT AN INNOVATIVE APPROACH TO TEAM BUILDING	AMERICAN JOURNAL OF PHYSICAL MEDICINE AND REHABILITATION	11/01/2013
A 25 YEAR OLD MALE POLYTRAUMA PATIENT THAT SUSTAINED A TRAUM	AMERICAN JOURNAL OF PHYSICAL MEDICINE AND REHABILITATION	11/01/2013
DEVELOPMENT OF A WHEELCHAIR MOUNTED STANDING BAR AND CASE S	AMERICAN JOURNAL OF PHYSICAL MEDICINE AND REHABILITATION	11/01/2013
PERIPHERAL NERVE STIMULATION WITH INTERLEAD CROSSTALK IN SPE	AMERICAN JOURNAL OF PHYSICAL MEDICINE AND REHABILITATION	11/01/2013

Professional Web Page

This practitioner has not provided any professional web page information.

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
AMERICAN ACADEMY OF PAIN MANAGEMENT
AMERICAN ACADEMY OF PAIN MANAGEMENT ULTRASOUND

Affiliation
AMERICAN ACADEMY OF PHYSICAL MEDICINE AND REHABILITATION
AMERICAN CONGRESS OF REHABILITATIVE MEDICINE
AMERICAN INSTITUTE OF ULTRASOUND MEDICINE
AMERICAN MEDICAL ASSOCIATION
AMERICAN OSTEOPATHIC ASSOCIATION
AMERICAN OSTEOPATHIC COLLEGE OF PAIN MANAGEMENT
AMERICAN OSTEOPATHIC COLLEGE OF PM R
AMERICAN PAIN SOCIETY
AMERICAN SOCIETY OF INTERVENTIONAL PAIN PHYSICIANS
FLORIDA OSTEOPATHIC MEDICAL ASSOCIATION
INTERNATIONAL SPINE INTERVENTION SOCIETY
NORTH AMERICAN SPINE SOCIETY