



TERESA JEANINE PFAFF-AMESSE

License Number: ME120923

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/1987
License Expiration Date	01/31/2026

General Information

Primary Practice Address

TERESA JEANINE PFAFF-AMESSE
12955 PALMS WEST DRIVE
STE. 200
LOXAHATCHEE, FL 33470

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

This practitioner has not indicated any staff privileges.

Email Address

Please contact at: Pfaff@fertilityflorida.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
CONNECTICUT	
MARYLAND	
OHIO	
NEW YORK	

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
UNIVERSITY OF WASHINGTON SCHOOL OF MEDICINE	MD	9/1/1983 - 6/30/1987	06/13/1987
SEATTLE CENTRAL COMMUNITY COLLEGE	NO DEGREE	6/1/1977 - 3/31/1979	
UNIVERSITY OF WASHINGTON	B.S.	3/1/1979 - 6/30/1983	06/30/1983

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
STATE UNIVERSITY OF NEW YORK	INTERNSHIP	OBG - OBSTETRICS AND GYNECOLOGY		BUFFALO	NEW YORK	07/01/1987	06/30/1988
STATE UNIVERSITY OF NEW YORK	RESIDENCY	PTH - PATHOLOGY-ANATOMIC AND CLINICAL		BUFFALO	NEW YORK	07/01/1988	06/30/1989
UM SCHOOL OF MEDICINE	RESIDENCY	PTH - PATHOLOGY-ANATOMIC AND CLINICAL		BALTIMORE	MARYLAND	07/01/1989	06/30/1992
YALE UNIVERSITY SCHOOL OF MEDICINE	FELLOWSHIP	OTHER	SURGICAL AND GYNECOLOGIC PATHOLOGY	NEW HAVEN	CONNECTICUT	07/01/1992	06/01/1993
JOHNS HOPKINS UNIVERSITY SCHOOL OF MEDICINE	FELLOWSHIP	OTHER	CADIOVASCULAR-RESPIRATORY TRANSPLANTATION PTH	BALTIMORE	MARYLAND	07/01/1997	06/30/1998

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 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 PATHOLOGY	PATHOLOGY-ANATOMIC	11/01/1995

Financial Responsibility

Financial Responsibility

I have elected not to carry medical malpractice insurance however, I agree to satisfy any adverse judgments up to the minimum amounts pursuant to s. 458.320(5) (g)1, F. S. I understand that I must either post notice in a sign prominently displayed in my reception area or provide a written statement to any person to whom medical services are being provided that I have decided not to carry medical malpractice insurance. I understand that such a sign or notice must contain the wording specified in s. 458.320(5) (g), 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 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
MÜLLERIAN DUCT ANOMALIES.	IN: THE MEDSCAPE JOURNAL, MEDSCAPE REFERENCE, 04/15/2015 BD COWAN ED., (UPDATE),	
OVARIAN CYSTECTOMY.	IN: THE MEDSCAPE JOURNAL, MEDSCAPE REFERENCE,	06/01/2011
CHAPTER 39: RECOMBINANT GONADOTROPINS USE FOR OVULATION INDUCTION IN POLYCYSTIC OVARY SYNDROME.	IN: AGRAWAL R, ALLAHBADIA G, EDS. POLYCYSTIC OVARY SYNDROME. ANSHAN, UNITED KINGDOM.	06/01/2007
AMESSE LS, PFAFF-AMESSE T, GUNNING WT, DUFFY N, EXP HEMATOL ONCOL FRENCH JA II. CLINICAL AND LABORATORY CHARACTERISTICS OF ADOLESCENTS WITH PLATELET FUNCTION DISORDERS AND HEAVY MENSTRUAL BLEEDING		01/24/2013
WANG, J CHEN S, ZHANG W, STEGEMAN S, PFAFF- AMESSE T , ZHANG Y, ZHANG W, AMESSE, LS, CHEN Y. PRODUCTION OF FUNCTIONAL PLATELETS VIA MEGAKARYOCYTES GENERATED FORM ENDOMETRIAL STROMAL PROGENITOR CELLS. HUMAN ENDOMETRIAL STROMA STEM CELLS DIFFERENTIATION INTO MEGAKARYOCYTES WITH THE ABILITY TO PRODUCE FUNCTIONAL PLATELETS	PLOS ONE. 7(8);E4430	07/01/2012
AMESSE, LS, GIBBS P, HARDY J, JONES KR, PFAFF- AMESSE T. PERITONEAL INCLUSION CYSTS IN ADOLESCENT FEMALES: A CLINICOPATHOLOGICAL CHARACTERIZATION OF FOUR CASES.	J PED ADOLES GYNECOL 22:41-8	06/01/2009
AMESSE LS, CALLENDER E, PFAFF-AMESSE T, DUKE J, MED EDUC ONLINE [SERIAL ONLINE13:13] HERBERT WNP. EVALUATION OF COMPUTER-AIDED STRATEGIES FOR TEACHING MEDICAL STUDENTS ULTRASOUND DIAGNOSTIC SKILLS IN PRENATAL GENETICS.		06/01/2008
AMESSE LS, BOYCE C, PFAFF-AMESSE T. MENSTRUAL CONTROL IN THE DEVELOPMENTALLY DELAYED ADOLESCENT: NEW TREATMENT OPTIONS.	J PED ADOLES GYNECOL,19:237-241.	06/01/2006
AMESSE LS, PFAFF-AMESSE T, LEONARDI R, UDDIN D, FRENCH JA2ND. ORAL CONTRACEPTIVES AND DDAVP NASAL SPRAY: PATTERNS OF USE IN MANAGING VWD ASSOCIATED MENORRHAGIA-A SINGLE INSTITUTION STUDY.	J PEDIATRIC HEMATOL ONCOL, 27:357-63.	06/01/2005
ESTER J, PFAFF-AMESSE T, GRUBER J, AMESSE LS. SECONDARY AMENORRHEA: AN UNUSUAL TWIST.	J PED ADOLES GYNECOL,18: 47-52.	06/01/2005
AMESSE LS, MOULTON R, ZHANG YM, PFAFF-AMESSE T. EXPRESSION OF HOX GENES IN NORMAL AND ABNORMAL TROPHOBLASTIC TISSUE.	GYNECOL ONCOL, 90:512-518.	06/01/2003
AMESSE LS, SRIVASTAVA G, UDDIN D, PFAFF-AMESSE T. COMPARISON OF CRYOPRESERVED SPERM VAPOR AND LIQUID NITROGEN.	J REPROD MED; 48:319-324.	06/01/2003
AMESSE LS, DING X, PFAFF-AMESSE T. FROM HAIR-AN TO ETERNITY.	J PED ADOLES GYNECOL, 15: 235-240.	06/01/2002
AMESSE LS, TANEJA A, BROXON E, PFAFF-AMESSE T. PROTRUDING GIANT CERVICAL POLYP IN A YOUNG ADOLESCENT WITH A PREVIOUS RHABDOMYOSARCOMA.	J PED ADOLES GYNECOL, 15:271-277.	06/01/2002

Title	Publication	Date
QIAN Z, JAKOBS FM, PFAFF-AMESSE T, SANFILIPPO F, BALDWIN WM III. COMPLEMENT CONTRIBUTES TO THE REJECTION OF COMPLETE AND CLASS I MAJOR HISTOCOMPATIBILITY COMPLEX INCOMPATIBLE CARDIAC ALLOGRAFTS.	J HEART LUNG TRANSPLANT, 17:470-478.	06/01/1998
INZUCCHI SE, PFAFF-AMESSE T. ECTOPIC THYMIC CARCINOID MASQUERADING AS A THYROID NODULE.	THYROID, 8: 589-595.	06/01/1998
ISENBERG JS, MAYER PA, BUTLER W, PFAFF-AMESSE T, PERSING JA. MULTIPLE RECURRENT BENIGN SCHWANNOMAS OF DEEP AND SUPERFICIAL NERVES OF THE UPPER EXTREMITY: A NEW VARIANT OF SEGMENTAL NEUROFIBROMATOSIS.	ANN PLAST SURG, 33:659-663.	06/01/1994

Professional Web Page

This practitioner has not provided any professional web page information.

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.

FRENCH

Other Affiliations

This practitioner has not provided any national, state, local, county, or professional affiliations.