



## CHARLES RONALD BROOKER MD

License Number: ME75946

Profession Medical Doctor  
License Status CLEAR/Active  
Year Began Practicing 01/01/1988  
License Expiration 01/31/2027  
Date

## General Information

### Primary Practice Address

CHARLES RONALD BROOKER MD  
160 EAST LAKE HOWARD DRIVE  
WINTER HAVEN, FL 33881

### 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
HEART OF FLORIDA REGIONAL MEDICAL CENTER	DAVENPORT	FLORIDA
SOUTH LAKE HOSPITAL	CLERMONT	FLORIDA
WINTER HAVEN HOSPITAL	WINTER HAVEN	FLORIDA
WINTER HAVEN AMBULATORY SURGICAL CENTER	WINTER HAVEN	FLORIDA
HEALTH CENTRAL	OCOEE	FLORIDA

### Email Address

Please contact at: [cbrooker@barranoclinic.com](mailto:cbrooker@barranoclinic.com)

### 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
UNIVERSITY OF MIAMI	MD	8/1/1984 - 5/1/1988	05/01/1988
THE UNIVERSITY OF ALABAMA	BS	8/1/1979 - 5/1/1983	05/01/1983

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
NAVAL MEDICAL CENTER	RESIDENCY	OTO - OTOLARYNGOLOGY		SAN DIEGO	CALIFORNIA	07/01/1992	07/31/1996
NAVAL HOSPITAL SAN DIEGO	INTERNSHIP	OTO - OTOLARYNGOLOGY		SAN DIEGO	CALIFORNIA	06/01/1988	06/01/1989

Academic Appointments

Graduate Medical Education

The practitioner did not provide this mandatory information.

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 ACADEMY OF OTOLARYNGIC ALLERGY	AI - ALLERGY AND IMMUNOLOGY	
AMERICAN ACADEMY OF FACIAL PLASTIC/RECON	PLASTIC SURGERY WITHIN THE HEAD AND NECK	
AMERICAN BOARD OF OTOLARYNGOLOGY	OTO - OTOLARYNGOLOGY	07/01/1989

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:  
WINTER HAVEN HOSP: MED STAFF, SURGERY SECT, SURG ADULT COM  
WINTER HAVEN ABULATORY SURGICAL CINTER: BOARD OF DIRECTORS

**Professional or Community Service Awards**

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

Community Service/Award/Honor	Organization
ALPHA OMEGA ALPHA	UNIVERSITY OF MIAMI SCHOOL OF MEDICINE
MAG-31 FLIGHT SURGEON OF THE YEAR-1991	
NAVY COMMENDATION MEDAL-1992	US NAVY
JUNIOR TRAUMA RESIDENT OF HTE YEAR-1992	MERCY HOSPITAL
RESIDENT RESEARCH COMPETITION -FIRST PRIZE 1993	SAN DIEGO ACADEMY OF OTOLARYNGOLOGY

**Publications**

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

Title	Publication	Date
KINETICS OF GENTAMICIN UPTAKE IN THE INNER EAR OF CHINCHIL	OTOLARYNGOLOGY HEAD AND NECK	01/01/1998
A NEW ANESTHESIA TECHNIQUE FOR MICROLARYNGEAL SURGERY	OTOLARYNGOLOGY-HEAD AND NECK SURGERY	01/01/1998
SUTURELESS CARTILAGE GRAFT LARYNGOTRACHEAL RECONSTRUCTION	ARCH OTOLARYNGOLOGY HEAD AND NECK SURGERY	01/01/1998
NECK MASS	OTOLARYNGOLOGY FOR THE INTERNIST	
THERAPEUTIC APPLICATIONS OF MICROENDOSCOPY IN NEUROTOLOGY	SKULL BASE SURGERY	

### Professional Web Page

www.barrancoclinic.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.

SPANISH

### Other Affiliations

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

Affiliation
AMERICAN ACADEMY OF OTOLARYNGIC ALLERGY
AMERICAN ACADEMY OF OTOLARYNGOLOGY HEAD AND NECK
AMERICAN BOARD OF OTOLARYNGOLOGY- HEAD AND NECK SURGERY
AMERICAN CLLEGE OF SURGEONS
AMERICAN MEDICAL ASSOCIATION
CERT/AMERICAN BOARD OF OTOLARYNGOLOGY-HEAD-NECK SURGERY
FLORIDA MEDICAL ASSOCIATION
FLORIDA SOCIETY OF FACIAL PLASTIC & RECONSTRUCTIVE SURGERY
FLORIDA SOCIETY OF OTOLARYNGOLOGY
POLK COUNTY MEDICAL ASSOCIATION