



## JACOB TANGIR

License Number: ME90853

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	Not Provided
License Expiration Date	01/31/2028
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes

## General Information

### Primary Practice Address

JACOB TANGIR  
 12741 MIRAMAR PARKWAY  
 SUITE # 302  
 MIRAMAR, FL 33027

### 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
AVENTURA HOSPITAL AND MEDICAL CENTER	AVENTURA	FLORIDA
MOUNT SINAI MEDICAL CENTER	MIAMI BEACH	FLORIDA
PALMETTO GENERAL HOSPITAL	HIALEAH	FLORIDA
MEMORIAL HOSPITAL PEMBROKE	HOLLYWOOD	FLORIDA
MIRAMAR MEMORIAL HOSPITAL	MIRAMAR	FLORIDA
MEMORIAL HOSPITAL WEST	PEMBROKE PINES	FLORIDA
MEMORIAL REGIONAL HOSPITAL	HOLLYWOOD	FLORIDA

### Email Address

Please contact at: [jtangir@gmail.com](mailto:jtangir@gmail.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
FLORIDA	MD

### 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
UNIVERSIDAD CENTRAL DE VENZUEL	MD	9/1/1987 - 11/1/1992	11/06/1992

## 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
UNIVERSIDAD CENTRAL DE VENEZUELA	CARACAS	VENEZUELA	09/01/1987	11/01/1992	M.D. MEDICAL DOCTOR

## 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
SAINT RAPHAELS HOSPITAL	INTERNSHIP	TY - TRANSITIONAL YEAR		NEW HAVEN	CONNECTICUT	07/01/1196	06/01/1997
YALE NEW HAVEN HOSPITAL	RESIDENCY	OBG - OBSTETRICS AND GYNECOLOGY		NEW HAVEN	CONNECTICUT	07/01/1997	06/01/2001
YALE UNIVERSITY SCHOOL OF MEDICINE	FELLOWSHIP	OBG - OBSTETRICS AND GYNECOLOGY	GYNECOLOGIC ONCOLOGY	NEW HAVEN	CONNECTICUT	07/01/2001	06/30/2004

# 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
CLINICAL VOLUNTARY FACULTY DEPT OB GYN	UNIVERSITY OF MIAMI SCHOOL OF MEDICINE	MIAMI	FLORIDA
CLINICAL ASSISTANT PROFESSOR	FLORIDA INTERNATIONAL UNIV. COLLEGE OF MEDICINE	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 BOARD OF OBSTETRICS & GYNECOLOG	OBG - OBSTETRICS AND GYNECOLOGY	
AMERICAN BOARD OF OBSTETRICS & GYNECOLOG	GYN-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.

#### 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
GYNECOLOGIC ONCOLOGY THERAPY	CASTLE CONNOLLY GRADUATE MEDICAL PUBLISHING NY PAGES 1-30	09/01/2006
FERTILITY PRESERVATION IN GERM CELL TUMORS OF THE OVARY	CME JOURNAL OF GYNECOLOGIC ONCOLOGY 8 PAGES 117-120	01/01/2003
REPRODUCTIVE FUNCTION AFTER CONSERVATIVE SURGERY AND CHEMO	OBSTET GYNECOL 101 PAGES 251-257	01/01/2003
EMBRYONAL CARCINOMA - DIAGNOSIS AND MANAGEMENT DURING PREGNA	CME JOURNAL OF GYNECOLOGIC ONCOLOGY 7 PAGES 225-227	01/01/2002
INFECTION AND PREGNANCY LOSS	WESPORT BERGIN AND GARVEY PAGES 168-179	01/01/2001
LOSS OF HETEROZYGOSITY OF CHROMOSOME 17 IN HUMAN BORDERLINE	ONCOGENE 12 10 PAGES 2147-2153	01/01/1996
A 400 KB NOVEL DELETION UNIT CENTROMERIC TO THE BRCA1 GENE	ONCOGENE 12 4 PAGES 735-740	01/01/1996
FREQUENT MICROSATELLITE INSTABILITY IN EPITHELIAL BORDERLINE	CANCER RESEARCH 56 11 PAGES 2501-2505	01/01/1996
FREQUENCY OF THE BRCA1 185DELTA G MUTATION AMONG JEWISH WOMEN	CANCER RESEARCH 56 6 PAGES 1250-1252	01/01/1996
FERTILITY PRESERVATION OPTIONS FOR FEMALE PATIENTS WITH MALI	CURRENT OPINION IN OBSTETRICS AND GYNECOLOGY	07/20/2005
HORMONE REPLACEMENT THERAPY IN WOMEN WITH A PRIOR DIAGNOSIS	CME JOURNAL OF GYNECOLOGIC ONCOLOGY	01/20/2005

## Professional Web Page

[www.centergynonc.com](http://www.centergynonc.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

HEBREW

FRENCH

## Other Affiliations

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

Affiliation
AMERICAN ASSOCIATION OF GYNECOLOGIC LAPAROSCOPY
AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS
SOCIETY OF GYNECOLOGIC ONCOLOGY