

Practitioner Profile

Printer Friendly Version

HARVEY CRAIG ROTH

LICENSE NUMBER: **ME64**

Profession: **Medical Do**
Year Began Practicing: **1/1/1**
Expiration Date: **1/31/2**
Status: **CLEAR/ACT**

Controlled Substance Prescriber: **Y**

- General Information
- Education and Training
- Academic Appointments
- Specialty Certification**
- Financial Responsibility
- Proceedings and Actions
- Optional Information
- License Verification

Information in this profile has been verified by the practitioner.

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 | AMERICAN BOARD OF OBSTETRICS & GYNECOLOG |
| Certification | OBG - OBSTETRICS AND GYNECOLOGY |

Practitioner Profile

Printer Friendly Version 

HARVEY CRAIG ROTH

LICENSE NUMBER: **ME64837**

Profession: **Medical Doctor**
 Year Began Practicing: **1/1/1995**
 Expiration Date: **1/31/2015**
 Status: **CLEAR/ACTIVE**

Controlled Substance Prescriber: **YES** 

- General Information
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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.

License Verification

Data As Of 4/21/2013

HARVEY CRAIG ROTHLICENSE NUMBER: **ME64837**General
InformationSecondary
LocationsPractitioner
Profile**Profession**

MEDICAL DOCTOR

License/Activity StatusCLEAR/ACTIVE**Controlled Substance Prescriber**YES**Qualifications**

Dispensing Practitioner

License Expiration Date

1/31/2015

License Original Issue Date

08/19/1993

Discipline on File

NO

Public Complaint

NO

**Address of Record**2001 WEST OAKLAND PARK BOULEVARD
FT. LAUDERDALE, FL 33311
UNITED STATES

HARVEY CRAIG ROTH

LICENSE NUMBER: ME64837

General
Information

Secondary
Locations

Practitioner
Profile

Address

2001 WEST OAKLAND PARK BOULEVARD
FORT LAUDERDALE, FL 33311

Address

455 N.W. 35TH ST.
BOCA RATON, FL 33431
ATTN: LUCY E. HENDERSON HEALTH CENTER

Address

3475 N. DIXIE HWY.
FORT LAUDERDALE, FL 33308
ATTN: FT. LAUDERDALE HEALTH CENTER


Address

263 N. UNIVERSITY DR.
PEMBROKE PINES, FL 33024
ATTN: PEMBROKE PINES HEALTH CENTER

Address

7152 NOB HILL RD.
TAMARAC, FL 33321
ATTN: JANET A. BOYLE HEALTH CENTER

Profession: **Medical Doctor**
Year Began Practicing: **1/1/1995**
Expiration Date: **1/31/2015**
Status: **CLEAR/ACTIVE**

Controlled Substance Prescriber: **YES** 

- General Information
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Information in this profile has been verified by the practitioner.

Primary Practice Address

HARVEY CRAIG ROTH
2001 WEST OAKLAND PARK BOULEVARD
FT. LAUDERDALE, FL 33311
UNITED STATES

Medicaid

This practitioner does **not** participate in the Medicaid program.

Staff Privileges

This practitioner does not currently hold staff privileges at any hospital/medical/health institution.

E-Mail Address

Please contact at: Not Provided

Other State Licensure

This practitioner has indicated the following additional state licensure:

State MICHIGAN

Profession Medical

State NEW YORK

Profession MEDICAL DOCTOR


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General Information

Education and Training

Academic Appointments

Specialty Certification

Financial Responsibility

Proceedings and Actions

Optional Information

License Verification

Information in this profile has been verified by the practitioner.

Education and Training

| | |
|----------------------------|--------------------------------|
| Institution Name | UNIVERSITY OF MICHIGAN ANN ARB |
| Dates of Attendance | 8/1/1987-6/1/1991 |
| Graduation Date | 6/1/1991 |
| Degree Title | MD |

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 | LONG ISLAND COLLEGE HOSPITAL |
| Program Type | RESIDENCY |
| Specialty Area | OBG - OBSTETRICS AND GYNECOLOGY |
| Other Specialty Area | *** |
| City | BROOKLYN |
| State or Country | NEW YORK |
| Dates Attended From | 08/01/1991 |
| Dates Attended To | 07/31/1995 |

Information in this profile has been verified by the practitioner.

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 not provided any publications that he/she authored in peer-reviewed medical literature within the last ten years.

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.

Language SPANISH

Other Affiliations

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

Affiliation FLORIDA OBSTETRICS AND GYNECOLOGY

Affiliation PALM BEACH COUNTY MEDICAL SOCIETY

Affiliation SOUTHERN MEDICAL ASSOCIATION

AIM

Association of State Medical Board Executive Directors

The Florida Medical Board

| | |
|------------------------|----------------------------------|
| Licensee Name | HARVEY CRAIG ROTH |
| Profession Description | MEDICAL DOCTOR |
| License Number | ME 64837 |
| Office Address1 | 2001 WEST OAKLAND PARK BOULEVARD |
| City State | FT. LAUDERDALE FL |
| Year Licensed | 08/19/1993 |

Data last updated on 04/19/2013

More recent information can be found on the link below

**For License Status, Specialty, Education,
and Disciplinary information please [click here](#)**
