

# Procedures Performed

- ☒ First Trimester Abortions  
☒ Second Trimester Abortions

## Medical Director

Full Name:	VLADIMIR ROSENTHAL	FL Medical License #:	ME45574
Effective Date:	01/01/2019	End Date:	
Address Type:	Personal		
Mailing Address:	3250 SOUTH DIXIE HWY	(Bld, Suite, Floor, Villa, Apt.):	
City:	MIAMI	County:	MIAMI-DADE
State:	FL	Zip:	33133

## Transfer Agreement / Admitting Privileges

### Transfer Agreement / Admitting Privileges

- ☒ All the physicians performing abortions have admitting privileges at a hospital within reasonable proximity.  
☒ The abortion clinic has a transfer agreement with a hospital within reasonable proximity.

### Transfer Agreement Hospitals

Provider Name	License Number	Telephone	Street Address
Hialeah Hosp.			651 E 25th, Hialeah 33013

Dr. W. Ross ME 18197  
1) North Shore Med. Center (Hospitel)  
2) University Hospital

Received

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Central Services