



MIAMI BEACH

City of Miami Beach, 1700 Convention Center Drive, Miami Beach, Florida 33139, www.miamibeachfl.gov

OFFICE OF THE MAYOR AND COMMISSION

2008 DEC -2 10 11-12
MEMORANDUM

TO: Jorge M. Gonzalez, City Manager
Robert Parcher, City Clerk

FROM: City of Miami Beach Commissioner Jerry Libbin

DATE: December 2, 2008

JL/er

SUBJECT: December 10, 2008 Commission Agenda – Health Advisory Board Nomination

Please place on the December 10, 2008 Commission Agenda my nomination for Dr. Andrew Nullman to the Health Advisory Board. If selected, Dr. Nullman will serve in the position currently occupied by Jorge Perez whose term ends and is term limited as of 12/31/08.

Dr. Nullman specializes in gastroenterology and possesses both the medical and leadership experience beneficial to the board. Since 1989 he has obtained a private practice with offices in the City of Miami Beach serving our community.

Please review his attached resume and contact him if further information is needed for consideration.

JL/er

Attachment

Agenda Item R9 A3
Date 12/10/08

ANDREW NULLMAN, M.D., P.A.

GASTROENTEROLOGY
LIVER DISEASE

4302 ALTON ROAD
SUITE 760
MIAMI BEACH, FL 33140
TEL: 305.534.4404
FAX: 305.534.5841

PROFESSIONAL ACTIVITY

1989 – Present Private Practice, Gastroenterology
4302 Alton Road, Suite 760, Miami Beach, FL 33140
1190 N.W. 95th Street, Suite 412, Miami, FL 33150
21150 Biscayne Blvd., Suite 104, Aventura, Florida 33180

EDUCATION

State University of New York at Buffalo, Buffalo, NY
Doctor of Medicine, 1984

The City College of New York
Sophie Davis School of Biomedical Education, NY, NY
Bachelor of Science (Biomedical Science), 1982

POSTGRADUATE EDUCATION

1987-1989 Fellow in Gastroenterology, New York University
Veterans Administration Medical Center, NY, NY

1985-1987 Resident in Medicine, Medical College of Pennsylvania Hospital
Philadelphia, PA

1984-1985 Intern in Medicine, Medical College of Pennsylvania Hospital
Philadelphia, PA

ACADEMIC APPOINTMENT

1987-1989 Teaching Assistant in Medicine
New York University School of Medicine, NY, NY

BOARD CERTIFICATION

1990-2000 American Boards of Internal Medicine
1999-2009 American Boards of Internal Medicine -
Subspecialty Board on Gastroenterology

LICENSURE Florida

PROFESSIONAL SOCIETY MEMBERSHIPS

American College of Gastroenterology
Dade County Medical Society
Florida Medical Association
Southern Medical Association

CREDENTIALLED PROCEDURES IN GASTROENTEROLOGY

Esophagogastroduodenoscopy
Colonoscopy/Polypectomy
Flexible Sigmoidoscopy
Esophageal Dilation
PEG
Capsule Endoscopy

HOSPITAL PRIVELEGES

Dade County:

Mt. Sinai Medical Center
Aventura Hospital and Medical Center
North Shore Medical Center

OUTPATIENT CENTER PRIVELEGES

Dade County:

Venture Ambulatory Surgery Center

Broward County:

Memorial Same Day Surgical Center East/West

MEDICAL STAFF LEADERSHIP

Chief of Staff-President Medical Staff, North Shore Medical Center, 2003-Present
Vice-President Medical Staff, North Shore Medical Center, 2003
Chairman of Credentials Committee, North Shore Medical Center, 2003
Chief of Gastroenterology, North Shore Medical Center, 1999- Present

07/08



MIAMI BEACH

CITY OF MIAMI BEACH
BOARD AND COMMITTEE APPOINTMENT FORM

NAME: NULLMAN ANDREW E.
Last Name First Name Middle Initial

HOME ADDRESS: 2523 REGATTA AVE MIAMI BEACH FL 33140
No. Street City State Zip Code

PHONE: 305 673-4552 305 534-4404 305 534-6745 anullmanmd@yahoo.com
Home Work Fax Email address

Business Name: ANDREW NULLMAN MD PA Position: PRESIDENT

Address: 4302 ANTON ROAD SUITE 760 MIAMI BEACH, FL 33140
No. Street City State Zip Code

Professional License (describe): PHYSICIAN/MEDICAL DOCTOR Expires: 1-09

Pursuant to City Code section 2-22(4) a and b: Members of agencies, boards, and committees shall be affiliated with the city; this requirement shall be fulfilled in the following ways: a) an individual shall have been a resident of the city for a minimum of six months or b) an individual shall demonstrate ownership/interest for a minimum of six months in a business established in the city.

- Resident of Miami Beach for a minimum of six (6) months: Yes or No
- Demonstrate an ownership/interest in a business in Miami Beach for a minimum of six (6) months: Yes or No
- Are you a registered voter in Miami Beach: Yes or No
- (Please circle one): I am now a resident of: North Beach South Beach Middle Beach
- I am applying for an appointment because I have special abilities, knowledge, experience. Please list below:
PRESIDENT/CHIEF OF STAFF - NORTH SHORE MEDICAL CENTER / BOARD OF TRUSTEES - NORTH SHORE MEDICAL CENTER

Please list your preferences in order of ranking [1] first choice [2] second choice, and [3] third choice. **Please note that only three (3) choices will be observed by the City Clerk's Office.** (Regular Boards of City)

<input type="checkbox"/> Affordable Housing Advisory Committee	<input type="checkbox"/> Health Facilities Authority Board
<input type="checkbox"/> Art in Public Places Committee	<input type="checkbox"/> Hispanic Affairs Committee
<input type="checkbox"/> Beach Preservation Board	<input type="checkbox"/> Historic Preservation Board*
<input type="checkbox"/> Beautification Committee	<input type="checkbox"/> Housing Authority*
<input type="checkbox"/> Board of Adjustment*	<input type="checkbox"/> Loan Review Committee*
<input type="checkbox"/> Budget Advisory Committee	<input type="checkbox"/> Marine Authority*
<input type="checkbox"/> Capital Improvements Oversight	<input type="checkbox"/> Miami Beach Commission for Women
<input type="checkbox"/> Committee on Homeless	<input type="checkbox"/> Miami Beach Cultural Arts Council
<input type="checkbox"/> Committee for Quality Education in MB	<input type="checkbox"/> Miami Beach Florida Sister Cities
<input type="checkbox"/> Community Development Advisory*	<input type="checkbox"/> Normandy Shores Local Gov't Neigh. Improvement
<input type="checkbox"/> Community Relations Board	<input type="checkbox"/> Parks and Recreation Facilities Board
<input type="checkbox"/> Convention Center Advisory Board	<input type="checkbox"/> Personnel Board*
<input type="checkbox"/> Cultural Arts Neighborhood District Overlay (CANDO)	<input type="checkbox"/> Planning Board
<input type="checkbox"/> Debarment Committee	<input type="checkbox"/> Police Citizens Relations Committee
<input type="checkbox"/> Design Review Board*	<input type="checkbox"/> Production Industry Council
<input type="checkbox"/> Disability Access Committee	<input type="checkbox"/> Public Safety Advisory Committee
<input type="checkbox"/> Fine Arts Board	<input type="checkbox"/> Safety Committee
<input type="checkbox"/> Gay Business Development Ad Hoc	<input type="checkbox"/> Single Family Residential Review Panel
<input type="checkbox"/> Golf Advisory Committee	<input type="checkbox"/> Transparency Reliability & Accountability Committee "TRAC"
<input type="checkbox"/> Green Ad Hoc Committee	<input type="checkbox"/> Transportation and Parking Committee
<input checked="" type="checkbox"/> Health Advisory Committee	<input type="checkbox"/> Visitor and Convention Authority*
	<input type="checkbox"/> Youth Center Advisory Board

* Board Required to File State Disclosure form