



## JAY C FRANKLIN

### License Number: ME15877

Data As Of 8/18/2025

Profession	Medical Doctor
License	ME15877
License Status	Obligations/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2026
License Original Issue Date	12/31/1973
Address of Record	9370 SW 72ND STREET Suite A212 MIAMI, FL 33173
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	Yes
Public Complaint	Yes
Alerts	Enforcement Alert 10/28/2013 2:28:55 PM Respondent's practice is permanently restricted in that Respondent may not prescribe any controlled substances except for drugs that are approved by the Federal Drug Administration for the treatment of Attention Deficit Disorder (ADD) and/or Attention Deficit Hyperactivity Disorder (ADHD).

### Secondary Locations

#### Address

14335 SW 120th Street Suite 209  
MIAMI, FL 33186

#### Address

8500 SW 92nd St. Suite 202B  
MIAMI, FL 33156

### Discipline/Admin Action

#### Emergency Actions

No Emergency Actions Found

#### Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
FRANKLIN, JAY C	15877	MEDICAL DOCTOR	MIAMI	FL	199107680	FINE AND LETTER OF CONCERN
FRANKLIN, JAY C	15877	MEDICAL DOCTOR	MIAMI	FL	200824990	RESTRICTED FROM PRACTICE

#### Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
FRANKLIN, JAY C	15877	MEDICAL DOCTOR	MIAMI	FL	200824990	AC FILED

## [Discipline Public Records Request](#)

You may also contact Public Records by telephone at (850) 245-4252, option 4 or by written correspondence at:

Division of Medical Quality Assurance

Public Records

4052 Bald Cypress Way, Bin C01

Tallahassee, FL 32399-3251

Please include the following:

1. Full name and license number of the practitioner;
2. Name and address where documents are to be sent; and
3. If you require certification of the documents, a \$25 fee will be charged, in addition to the duplicating charges. Certification of the requested records will not be done unless specifically requested. An invoice will be sent to you and payment will be expected within thirty days. Upon receipt of payment, material will be sent to you.

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.

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