# LUIS JOSE BATLLE

## License Number: ME119587

Data As Of 8/5/2025			
Profession	Medical Doctor		
License	ME119587		
License Status	Clear/Active		
Qualifications	Dispensing Practitioner		
License Expiration Date	1/31/2026		
License Original Issue Date	04/15/2014		
Address of Record	1700 N. 66th Street		
	Suite 403		
	SAINT PETERSBURG, FL 33710		
Controlled Substance Prescriber	Yes		
(for the Treatment of Chronic Non-			
malignant Pain)			
Discipline on File	Yes		
Public Complaint	Yes		

## Secondary Locations

Address 2250 DREW ST CLEARWATER, FL 33765 Address 2238 DREW ST CLEARWATER, FL 33765

# Discipline/Admin Action

## **Emergency Actions**

No Emergency Actions Found

#### **Discipline Cases**

Name	License	Profession	City	State	Case #	Action Taken
BATLLE, LUIS JOSE	119587	MEDICAL DOCTOR	SAINT PETERSBURG	FL	202137614	OBLIGATION(S) SATISFIED

### **Public Complaints**

Name	License	Profession	City	State	Case #	Action Taken
BATLLE, LUIS JOSE	119587	MEDICAL DOCTOR	SAINT PETERSBURG	FL	202137614	AC FILED

If a link does not appear for the case number, we do not have a scanned copy of the final order available in our database. To obtain a paper copy, please contact Public Records by clicking the link below:

#### 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.

# Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
SPINECARE ASSOCIATES, LLC	PAIN MANAGEMENT CLINIC	PAIN MANAGEMENT CLINIC	1790	2/28/2019

Click on the License Number to view License Details for that Practitioner

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.