## NICOLE E RODRIGUEZ

# License Number: ME138250

Data As Of 8/25/2025

Profession Medical Doctor
License ME138250
License Status Clear/Active
License Expiration Date 1/31/2027
License Original Issue Date 10/25/2018

Address of Record 10325 San Jose Blvd
JACKSONVILLE, FL 32257

No

Controlled Substance Prescriber (for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

### Address

131 SW Port St. Lucie Blvd PORT SAINT LUCIE, FL 34984

#### Address

145 Palm Bay Road NE WEST MELBOURNE, FL 32904

## Address

2322 E Irlo Bronson Memorial Highway

KISSIMMEE, FL 34744

### Address

1267 W Osceola Parkway KISSIMMEE, FL 34741

## Address

620 S Hunt Club Boulevard

APOPKA, FL 32703

### Address

3801 W Lake Mary Boulevard Suite 123

LAKE MARY, FL 32746

#### Address

13750 W Colonial Drive Suite 250

WINTER GARDEN, FL 34787

### Address

11325 Lake Underhill Road Suite 103 ORLANDO, FL 32825

# Discipline/Admin Action

# **Emergency Actions**

No Emergency Actions Found

## **Discipline Cases**

No Discipline Found

## **Public Complaints**

No Public Complaint Found

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
MCGLINCHY, NICOLE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9117184	4/18/2023
MOORE, CAITLYN POWER	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9108166	3/11/2019
WADE, MICHELLE PINTO	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9113264	12/4/2024

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

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