STEVEN KURUMADA

License Number: PA9111728

| Data As Of 8/4/2025 | |
|------------------------------------|----------------------------|
| Profession | Physician Assistant |
| License | PA9111728 |
| License Status | Clear/Active |
| Qualifications | Prescribing |
| License Expiration Date | 1/31/2026 |
| License Original Issue Date | 10/03/2018 |
| Address of Record | 2550 SE Walton Rd |
| | FL |
| | PORT SAINT LUCIE, FL 34952 |
| Controlled Substance Prescriber | No |
| (for the Treatment of Chronic Non- | |
| malignant Pain) | |
| Discipline on File | No |
| Public Complaint | No |
| | |

Secondary Locations

Address 2749 SW Port St Lucie Blvd PORT SAINT LUCIE, FL 34953

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.

Supervising Practitioners

Name

Relationship

Profession

| Name | Relationship | Profession | License | Effective Date |
|--------------------------------------|---|--------------------------|---------|-------------------|
| BISHOP, JEFFREY M DO | SUPERVISING PRESCRIBING PRACTITIONER | OSTEOPATHIC PHYSICIAN | 5102 | 03/01/2022 |
| MUNNE QUINTANA, RAFAEL ANTONIO MD | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 71804 | 01/23/2019 |

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

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