



## RICARDO RODRIGO ESPINOSA

License Number: PA9100094

Data As Of 4/20/2026

Profession	Physician Assistant
License	PA9100094
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2028
License Original Issue Date	09/17/1998
Address of Record	6221 NW 36TH STREET Concentra VIRGINIA GARDENS, FL 33166
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

[Address](#)

20535 N.W. 2ND AVENUE SUITE 150 Concentra  
NORTH MIAMI BEACH, FL 33169

[Address](#)

7887 NORTH KENDALL DRIVE SUITE 102 Concentra  
MIAMI, FL 33156

[Address](#)

6990 N.W. 37TH AVENUE Concentra  
MIAMI, FL 33147

[Address](#)

1448 N KROME AVE STE 101 Concentra  
FLORIDA CITY, FL 33034

[Address](#)

10205 S. US1 Unit 102 Concentra  
SOUTH MIAMI, FL 33156

[Address](#)

7800 NW 25th St Unit 4 Concentra  
MIAMI, FL 33122

[Address](#)

12170 W Sunrise Blvd. Unit C Concentra  
PLANTATION, FL 33323

[Address](#)

13750 NW 107th Ave Ste 10 Concentra  
HIALEAH, FL 33018

[Address](#)

17601 NW 2nd Ave Unit S Concentra  
NORTH MIAMI, FL 33169

### 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	License	Effective Date
BICHARA TOBAR, JAIME ARNOLDO M D	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	129582	01/09/2025
MONTERO, EVELIN DEL PILAR	SUPERVISING PRESCRIBING PRACTITIONER	MEDI. DOCTOR- TEMP AREA OF CRITICAL NEED	1287	09/19/2025
NELSON, SUSAN FRANCES	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	6525	07/21/2021

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

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