ALL MEDICAL MANAGEMENT ASSOCIATION, INC

Medical Pain Management Group

License Number: PMC394

Data As Of 8/10/2025

Profession Pain Management Clinic

License PMC394

License Status Admin Revoked/

License Expiration Date

License Original Issue

Licerise Original issue

Date

01/21/2010

1/1/0001

Address of Record 901 MEADOWS RD

SUITE- A

BOCA RATON, FL 33486

Discipline on File No Public Complaint No

Secondary Locations

No secondary locations found.

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;
- $2. \ \mbox{Name}$ 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
ERIGOYEN, PETER MD	MEDICAL DIRECTOR	MEDICAL DOCTOR	57434	12/29/2009
MCCLINTOCK, BRIAN	PAIN MANAGEMENT CLINIC OWNER	UNLICENSED FACILITY PERSONNEL		01/21/2010

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