



## THOMAS ANTHONY DIGERONIMO

License Number: ME54874

Data As Of 8/9/2025

Profession	Medical Doctor
License	ME54874
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2027
License Original Issue Date	02/10/1989
Address of Record	3302 W. BAKER STREET PLANT CITY, FL 33563
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	Yes
Discipline on File	Yes
Public Complaint	Yes

### Secondary Locations

#### Address

13117 Elk Mountain Drive  
RIVERVIEW, FL 33579

#### Address

2106 Ashely Oaks Circle Ste 101  
WESLEY CHAPEL, FL 33544

### Discipline/Admin Action

#### Emergency Actions

No Emergency Actions Found

#### Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
DIGERONIMO, THOMAS ANTHONY	54874	MEDICAL DOCTOR	PLANT CITY	FL	200823628	OBLIGATION(S) SATISFIED

#### Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
DIGERONIMO, THOMAS ANTHONY	54874	MEDICAL DOCTOR	PLANT CITY	FL	200823628	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
THOMAS A.D. GERONIMO M.D., P.A.	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3763	7/21/2010

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

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