SUSAN FRANCES NELSON

License Number: OS6525

Data As Of 10/26/2025

Profession Osteopathic Physician

License Status OS6525

Clear/Active

Qualifications Dispensing Practitioner

License Expiration Date 3/31/2026 License Original Issue Date 09/14/1992

Address of Record 2004 N. Flamingo Rd

PEMBROKE PINES, FL 33028

Yes

Controlled Substance Prescriber (for the Treatment of Chronic Non-

malignant Pain)

Authorized to Order (Medical and

Low-THC Cannabis)

Discipline on File Yes
Public Complaint Yes

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case#	Action Taken
DIAZ, SUSAN FRANCES	6525	OSTEOPATHIC PHY	PEMBROKE PINES	FL	200915730	OBLIGATION(S) SATISFIED
NELSON, SUSAN FRANCES	6525	OSTEOPATHIC PHY	PEMBROKE PINES	FL	201215898	OBLIGATION(S) SATISFIED
DIAZ, SUSAN FRANCES	6525	OSTEOPATHIC PHY	PEMBROKE PINES	FL	199608213	OBLIGATIONS IMPOSED
NELSON, SUSAN FRANCES	6525	OSTEOPATHIC PHY	PEMBROKE PINES	FL	199411697	OBLIGATIONS IMPOSED

Public Complaints

Name	License	Profession	City	State	Case#	Action Taken
DIAZ, SUSAN FRANCES	6525	OSTEOPATHIC PHYSICIAN	PEMBROKE PINES	FL	200915730	AC FILED
NELSON, SUSAN FRANCES	6525	OSTEOPATHIC PHYSICIAN	PEMBROKE PINES	FL	201215898	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:

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
ESPINOSA, RICARDO RODRIGO	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9100094 7/21/2021
LOPEZ, RAMON EMILIO	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9100266 7/21/2021

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

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