Florida HEALTH Department of Health

PRASHANT RAMANLAL PATEL M.D.

License Number: ME64712

Data As Of 11/13/2026

Profession	Medical Doctor
License	ME64712
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	08/06/1993
Address of Record	11250 SW Village Parkway Suite 300 PORT ST LUCIE, FL 34987
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address
1231 N Lawnwood Cir
FORT PIERCE, FL 34950

Address
448 SE Osceola St
STUART, FL 34994

Address
1780 SE Hillmoor Drive
PORT SAINT LUCIE, FL 34952

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.

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
STUART ONCOLOGY ASSOCIATES, P.A	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	1495	1/22/2009

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

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