### **ANTHONY T ROSA MD**

# License Number: ME65596

Data As Of 5/4/2025

Profession Medical Doctor
License ME65596
License Status CLEAR/Active
License Expiration Date 1/31/2026
License Original Issue Date 01/31/1994

Address of Record 3094 shoal creek village dr LAKELAND, FL 33803

Controlled Substance Prescriber No

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File

Public Complaint

Yes

Yes

## **Secondary Locations**

#### Address

ADVANCE TECHNOLOGICAL RADIOLOG 714 ingraham ave HAINES CITY, FL 33844

# Discipline/Admin Action

#### **Emergency Actions**

No Emergency Actions Found

### **Discipline Cases**

Name	License	Profession	City	State	Case#	Action Taken
ROSA, ANTHONY T	65596	MEDICAL DOCTOR	LAKELAND	FL	200104485	OBLIGATION(S) SATISFIED
ROSA, ANTHONY T	65596	MEDICAL DOCTOR	LAKELAND	FL	200908614	OBLIGATION(S) SATISFIED

### **Public Complaints**

Name	License	Profession	City	State	Case#	Action Taken
ROSA, ANTHONY T	65596	MEDICAL DOCTOR	LAKELAND	FL	200104485	AC FILED
ROSA, ANTHONY T	65596	MEDICAL DOCTOR	LAKELAND	FL	200908614	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.

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