



## FREDERICK MARK GOODWIN

### License Number: ME65846

Data As Of 6/9/2025

Profession	Medical Doctor
License	ME65846
License Status	CLEAR/Active
License Expiration Date	1/31/2026
License Original Issue Date	03/03/1994
Address of Record	13000 Bruce B. Downs Blvd. #112 TAMPA, FL 33612
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
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
GOODWIN, FREDERICK MARK	65846	MEDICAL DOCTOR	TAMPA	FL	200732174	OBLIGATION(S) SATISFIED
GOODWIN, FREDERICK MARK	65846	MEDICAL DOCTOR	TAMPA	FL	200732174	OBLIGATION(S) SATISFIED

#### Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
GOODWIN, FREDERICK MARK	65846	MEDICAL DOCTOR	TAMPA	FL	200732174	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	Effective License	Date
FEIERSTEIN, BOBBI LYNN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107922	11/2/2023
LAKELAND ORTHOPAEDIC CLINIC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	267	12/24/2008
WEST, JOHN HILL	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101603	11/2/2023
YATES, BRIAN DOUGLAS	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105927	11/2/2023

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

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