

#### GERARDO ANTONIO PEDROZA SIERRA

#### License Number: ACN631

Data As Of 11/27/2025

Profession Area of Critical Need Medical Doctor

License Status Clear/Active
License Expiration Date 1/31/2026
License Original Issue Date 02/12/2015

Address of Record 1714 SW 17th Street

Suite# 450

No

OCALA, FL 34471

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

No secondary locations found.

# 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.

# **Supervising Practitioners**

Name	Relationship	Profession	Effective License Date
BETTER HEALTH GROUP SERVICES INC	S AREA OF CRITICAL NEED FACILITY	MEDICAL RELATED PROCESS ENTITY	10/18/2023

Name	Relationship	Profession	Effective License Date
BETTER HEALTH GROUP SERVICES INC	AREA OF CRITICAL NEED FACILITY	MEDICAL RELATED PROCESS ENTITY	10/18/2023
VIPCARE	AREA OF CRITICAL NEED FACILITY	MEDICAL RELATED PROCESS ENTITY	11/15/2023

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

# **Subordinate Practitioners**

Name	Relationship	Profession	License	Effective Date
COLQUITT, CHARLIE W	PHARMACIST	PHARMACIST	30592	5/28/2024
ROSS, STEFAN	PHARMACIST	PHARMACIST	63445	6/10/2024

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

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