



YORAM DOV GUTFREUND

License Number: ME93087

Data As Of 8/10/2025

Profession	Medical Doctor
License	ME93087
License Status	Clear/Active
License Expiration Date	1/31/2027
License Original Issue Date	04/16/2005
Address of Record	1611 N.W. 12TH AVE ECC MIAMI, FL 33136
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Discipline on File	Yes
Public Complaint	Yes

Secondary Locations

Address

850 NW 1st Ave W1
BOCA RATON, FL 33432

Address

20201 20201 NE 16th Pl First floor, Hatzalah office
MIAMI, FL 33179

Address

4401 ROYAL PALM AVE.
MIAMI BEACH, FL 33140

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
GUTFREUND, YORAM DOV	93087	MEDICAL DOCTOR	MIAMI	FL	202101431	OBLIGATION(S) SATISFIED

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
GUTFREUND, YORAM DOV	93087	MEDICAL DOCTOR	MIAMI	FL	202101431	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	License	Effective Date
GUTFREUND, YORAM	PMD LICENSE	PARAMEDIC	540831	2/21/2022
HATZALAH SOUTH FLORIDA EMERGENCY MEDICAL	SERVICE PROVIDER	EMS SERVICE PROVIDER ALS	10036	8/13/2021

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

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.