Florida HEALTH Department of Health

PAUL M LOUIS

License Number: ME82510

Data As Of 11/18/2026

Profession	Medical Doctor
License	ME82510
License Status	Clear/Active
License Expiration Date	1/31/2027
License Original Issue Date	05/16/2001
Address of Record	2900 NE 7th Unit 503 Miami MIAMI, FL 33137
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

14591 SW 26th Street Baptist Health Emergency Care @Coral Way West

MIAMI, FL 33186

Address

14150 SW 136th Street Baptist Health Emergency Care @ Country

MIAMI, FL 33186

Address

9520 NW 58th Street Baptist Health Emergency Care @ Doral

DORAL, FL 33178

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
CANGE, ALIX ANDRE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9104367	3/28/2022
GONZALEZ, PAMELA LORENA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9102005	3/28/2022
KOHN, GWYNNE HEIDI	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9104130	3/28/2022
MARCUCCI, KELSEY MASTERSON	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111251	3/28/2022
MCKAY, NATALEE TAMARA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111511	12/6/2022
MITCHELL, CRAIG ROBERT MD	SUBORDINATE	MEDICAL DOCTOR	102920	2/26/2021
POGGI, JOSHUA JOSEPH	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109020	3/28/2022
PREDMORE, TORRI SIMONE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9103632	3/28/2022
RAJPAL, KARAN PA-C	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111141	3/28/2022

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.

Secondary Locations

Address

14591 SW 26th Street Baptist Health Emergency Care @Coral Way West

MIAMI, FL 33186

Address

14150 SW 136th Street Baptist Health Emergency Care @ Country

MIAMI, FL 33186

Address

9520 NW 58th Street Baptist Health Emergency Care @ Doral

DORAL, FL 33178

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
CANGE, ALIX ANDRE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9104367	3/28/2022
GONZALEZ, PAMELA LORENA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9102005	3/28/2022
KOHN, GWYNNE HEIDI	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9104130	3/28/2022
MARCUCCI, KELSEY MASTERSON	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111251	3/28/2022
MCKAY, NATALEE TAMARA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111511	12/6/2022
MITCHELL, CRAIG ROBERT MD	SUBORDINATE	MEDICAL DOCTOR	102920	2/26/2021
POGGI, JOSHUA JOSEPH	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109020	3/28/2022
PREDMORE, TORRI SIMONE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9103632	3/28/2022
RAJPAL, KARAN PA-C	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111141	3/28/2022

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.