



## MIGUEL ANTONATOS RODRIGUEZ

License Number: ME147653

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	Not Provided
License Expiration Date	01/31/2027

## General Information

### Primary Practice Address

MIGUEL ANTONATOS RODRIGUEZ  
310 NORWICH LN  
MELBOURNE BEACH, FL 32951

### Medicaid

This practitioner does NOT participate in the Medicaid program.

### Staff Privileges

This practitioner has not indicated any staff privileges.

### Email Address

Please contact at: [dr.antonatos@gmail.com](mailto:dr.antonatos@gmail.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
ILLINOIS	PHYSICIAN
SOUTH CAROLINA	PHYSICIAN
NEW JERSEY	PHYSICIAN
WISCONSIN	PHYSICIAN
COLORADO	PHYSICIAN
WASHINGTON	PHYSICIAN
TENNESSEE	PHYSICIAN
MICHIGAN	PHYSICIAN

### Florida Birth-Related Neurological Injury Compensation Association

If you are a Florida Allopathic (MD) or Osteopathic (DO) Physician, you are required to provide proof of payment of the Florida Birth-Related Neurological Injury Compensation Association (NICA) assessment as required by section 766.314, Florida Statutes. Payment of the initial and annual assessment are required of all Florida Allopathic and Osteopathic Physicians who do not qualify for an exemption as set forth in section 766.314(4)(b)4, Florida Statutes.

This practitioner has indicated that he/she has submitted payment of the assessment.

## Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
UNIVERSIDAD AUTONOMA DE GUADALAJARA		1/12/1995 - 12/18/2001	11/23/2004

Other Health Related Degrees

This practitioner does not hold any additional health related degrees.

Professional and Postgraduate Training

This practitioner has completed the following graduate medical education:

Program Name	Program Type	Specialty Area	Other Specialty Area	City	State or Country	Dates Attended From	Dates Attended To
MORRISTOWN MEDICAL CENTER	RESIDENCY	IM - INTERNAL MEDICINE		MORRISTOWN	UNITED STATES	06/24/2009	06/23/2011

Academic Appointments

Graduate Medical Education

This practitioner has not had the responsibility for graduate medical education within the last 10 years.

Academic Appointments

This practitioner does not currently hold faculty appointments at any medical/health related institutions of higher learning.

Specialty Certification

Specialty Certification

This practitioner holds the following certifications from specialty boards recognized by the Florida board which regulates the profession for which he/she is licensed:

Specialty Board	Certification	Date Certified
AMERICAN BOARD OF INTERNAL MEDICINE	IM - INTERNAL MEDICINE	12/31/2020

Financial Responsibility

Financial Responsibility

I do not have hospital staff privileges and I have obtained and maintain professional liability coverage in an amount not less than \$100,000 per claim, with a minimum annual aggregate of not less than \$300,000 from an authorized insurer as defined under s. 624.09, F. S., from a surplus lines insurer as defined under s. 626.914(2).

Proceedings and Actions

Proceedings & Actions

Criminal Offenses

The criminal history information, if any exists, may be incomplete; federal criminal history information is not available to the public. Information is verified by the Department at the time of initial licensure and renewal.

This practitioner has indicated that he/she has no criminal offenses required to be published on this profile.

Medicaid Sanctions and Terminations

This practitioner has not been sanctioned or terminated for cause from the Medicaid program.

**Final Disciplinary Actions Reported by the Department of Health within the last 10 years:**

The information below is self reported by the practitioner.

**Final disciplinary action taken by a specialty board within the last 10 years:**

This practitioner has indicated that he/she has \*NOT\* had any final disciplinary action taken against him/her within the last 10 years by a specialty board.

**Final disciplinary action taken by a licensing agency within the last 10 years:**

This practitioner has indicated that he/she has had final disciplinary action taken against him/her within the last 10 years by a licensing agency.

Taken By	Date Of Action	Description of Disciplinary Action	Under Appeal
WASHINGTON MEDICAL COMMISSION	08/28/2023	CONSENT AGREEMENT AND FINE	NO
COLORADO MEDICAL BOARD	10/18/2023	PUBLIC REPRIMAND	NO
COLORADO MEDICAL BOARD	10/18/2023	REPRIMAND	NO
TENNESSEE MEDICAL BOARD	11/08/2023	FINE	NO
KENTUCKY MEDICAL BOARD	11/23/2023	REPRIMAND	NO
MARYLAND MEDICAL BOARD	11/27/2023	REPRIMAND	NO
ND BOARD OF MEDICINE	04/26/2024	RECIPROCAL ACTION BY ANOTHER STATE	NO
IDAHO STATE BOARD OF MEDICINE	04/17/2024	RECIPROCAL ACTION BY ANOTHER STATE	NO
KANSAS MEDICAL BOARD	03/06/2024	RECIPROCAL ACTION BY ANOTHER STATE	NO
WEST VIRGINIA MEDICAL BOARD	04/30/2024	RECIPROCAL ACTION BY ANOTHER STATE	NO
MICHIGAN MEDICAL BOARD	05/15/2024	RECIPROCAL ACTION BY ANOTHER STATE	NO

**Disciplinary action taken by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center within the last 10 years:**

This practitioner has indicated that he/she has \*NOT\* had any final disciplinary action taken against him/her within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center.  
The following discipline has been reported as required under 456.041(5), F.S. within the previous 10 years.

**Resignation from or non-renewal of medical staff membership or the restriction or revocation of staff privileges within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center in lieu of or in settlement of a pending disciplinary case related to competence or character.**

This practitioner has indicated that he/she has \*NEVER\* been asked to or allowed to resign from or had any medical staff privileges restricted or revoked within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center.

**Liability Claims Exceeding \$100,000.00 Within last 10 years.**

Settlement of a claim may occur for a variety of reasons that do not necessarily reflect negatively on the professional competence or conduct of the physician. A payment settlement of a medical malpractice action or claim should not be construed as creating a presumption that medical malpractice has occurred.

**Additional claims information may have been reported to the Department of Financial Services. To check their web site, please click [here](#).**

There have not been any reported liability actions, which are required to be reported under section 456.049, F. S., within the previous 10 years.

**Optional Information**

**Committees/Memberships**

This practitioner has not indicated any committees on which they serve for any health entity with which they are affiliated.

**Professional or Community Service Awards**

This practitioner has not provided any professional or community service activities, honors, or awards.

**Publications**

This practitioner has not provided any publications that he/she authored in peer-reviewed medical literature within the last ten years.

### **Professional Web Page**

[www.text2md.com](http://www.text2md.com)

### **Languages Other Than English**

This practitioner has indicated that the following languages other than English are used to communicate with patients, or that a translation service is available for patients, at his/her primary place of practice.

SPANISH

### **Other Affiliations**

This practitioner has not provided any national, state, local, county, or professional affiliations.

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