

## **JOHN GUY**

## License Number: ME43728

Profession **Medical Doctor** License Status **NULL AND VOID/** Year Began Practicing Not Provided License Expiration Date 01/31/2021

Controlled Substance Prescriber (for the Yes

Treatment of Chronic Non-malignant

Pain)

## **General Information**

The practitioner is not obligated to update their profile data.

## **Primary Practice Address**

JOHN GUY BASCOM PALMER EYE INSTITUTE 900 N.W. 17TH STREET MIAMI, FL 33136