## LIDYA MARGARITA LATABAN-LOPEZ

## License Number: ACN911

Data As Of 8/6/2025

Profession Area of Critical Need Medical Doctor

License ACN911
License Status Clear/Active

Qualifications Dispensing Practitioner

License Expiration Date 1/31/2026
License Original Issue Date 03/30/2017
Address of Record 1914 SR 44

Ste B

No

NEW SMYRNA BEACH, FL 32168

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# Secondary Locations

#### Address

3347 TAMIAMI TRAIL E NAPLES, FL 34112

# 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**

			Effective
Name	Relationship	Profession	License Date

Name	Relationship	Profession	Effective License Date
ARMOR HEALTH OF COLLIER	AREA OF CRITICAL NEED FACILITY	MEDICAL RELATED PROCESS ENTITY	11/29/2023
CONVIVA CARE CENTER/HUMANA	A AREA OF CRITICAL NEED FACILITY	MEDICAL RELATED PROCESS ENTITY	07/15/2024
ORLANDO FAMILY PHYSICIANS, LLC	AREA OF CRITICAL NEED FACILITY	MEDICAL RELATED PROCESS ENTITY	11/15/2020

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

# **Subordinate Practitioners**

Name	Relationship	Profession	License	Effective Date
WALCUTT, JOSEPH CALEB	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9116798	1/31/2023
WALCUTT, JOSEPH CALEB	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9116798	1/31/2023

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

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