



RICHARD ARTHUR OLDANO

License Number: PA2717

Data As Of 2/7/2026

Profession	Physician Assistant
License	PA2717
License Status	Clear/Active
Qualifications	Prescribing Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	01/27/1994
Address of Record	1300 Barrington Circle ST AUGUSTINE, FL 32092
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	Yes
Public Complaint	Yes

Secondary Locations

Address

5995-1 University Blvd W Centra Medical Center
JAX, FL 32216

Address

1036 Dunn Avenue Suite 10 Centra Medical Center
JACKSONVILLE, FL 32218

Address

1524 Normandy Villages Pkwy Concentra Medical Ctr
JAX, FL 32221

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
OLDANO, RICHARD ARTHUR	2717	PHYSICIAN ASSIS	ST AUGUSTINE	FL	200802720	PROBATION SATISFIED

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
OLDANO, RICHARD ARTHUR	2717	PHYSICIAN ASSISTANT	ST AUGUSTINE	FL	200802720	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.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
TUEL, MARC ALAN	SUPERVISING DISPENSING PRACTITIONER	OSTEOPATHIC PHYSICIAN	18326	06/17/2024

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.