



## ATARA NIGHTINGALE

License Number: PA9110376

Data As Of 12/13/2025

Profession	Physician Assistant
License	PA9110376
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2026
License Original Issue Date	05/10/2017
Address of Record	7481 W Oakland park BLVD LAUDERHILL, FL 33319
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

## Secondary Locations

### Address

7481 W. Oakland Park Blvd Suite 100  
LAUDERHILL, FL 33319

### Address

1100 NW 95th Street  
MIAMI, FL 33150

### Address

5000 W. Oakland Park Blvd  
FORT LAUDERDALE, FL 33313

### Address

7201 North University Drive  
FORT LAUDERDALE, FL 33321

### Address

160 NW 170th Street Jackson North Medical Center  
NORTH MIAMI BEACH, FL 33169

### Address

3501 Johnson Street Memorial Regional Hospital  
HOLLYWOOD, FL 33021

### Address

9333 SW 152nd Street Jackson South Medical Center  
MIAMI, FL 33157

### Address

8201 W Broward Blvd Westside Regional Medical Center  
PLANTATION, FL 33324

### Address

2801 North State Road 7 Northwest Medical Center  
MARGATE, FL 33063

### Address

401 North West 42nd Avenue  
PLANTATION, FL 33317

### Address

3501 Johnson Street  
HOLLYWOOD, FL 33021

### Address

7481 W. Oakland Park Blvd Suite 100  
LAUDERHILL, FL 33319

Address

5000 W. Oakland Park Blvd  
FORT LAUDERDALE, FL 33313

Address

1100 NW 95th Street  
MIAMI, FL 33150

Address

1601 N. Palm Ave Suite 211  
PEMBROKE PINES, FL 33026

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

Name	Relationship	Profession	Effective License	Date
CARDONNE, ESTEBAN	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	151889	12/21/2022
GREENSTEIN, YAKOV	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	114006	12/19/2022
GREER, BRIAN FREDERICK	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	56234	01/03/2023
HERNANDEZ, NELSON ANIBAL M D	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	95198	08/29/2024
PHILLIPS, CURTIS	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	146267	01/03/2023
STEIN LIFSHITZ, DANIEL	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	132570	12/16/2022
WATNICK, JERETT YALE	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	15560	12/21/2022

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

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Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.

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