Florida HEALTH Department of Health

CELESTINO PEDRO CASTELLON MD

License Number: ME27922

Data As Of 11/5/2026

Profession	Medical Doctor
License	ME27922
License Status	Clear/Active
License Expiration Date	1/31/2028
License Original Issue Date	03/29/1976
Address of Record	777 East 25 Street, Suite 512 HIALEAH, FL 33013
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	Yes
Public Complaint	Yes

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
CASTELLON, CELESTINO PEDRO	27922	MEDICAL DOCTOR	HIALEAH	FL	201202603	OBLIGATION(S) SATISFIED
CASTELLON, CELESTINO PEDRO	27922	MEDICAL DOCTOR	HIALEAH	FL	201217871	OBLIGATION(S) SATISFIED

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
CASTELLON, CELESTINO PEDRO	27922	MEDICAL DOCTOR	HIALEAH	FL	201202603	AC FILED
CASTELLON, CELESTINO PEDRO	27922	MEDICAL DOCTOR	HIALEAH	FL	201217871	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.

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
SILVA, ARTURO	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101749	10/23/2026

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.

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