



## TERRY BRUCE COHEN MD

### License Number: ME36467

Data As Of 1/11/2026

Profession	Medical Doctor
License	ME36467
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2026
License Original Issue Date	05/05/1980
Address of Record	***** ** CONFIDENTIAL ***** *** CONFIDENTIAL ***** *** CONFIDENTIAL ***** *** CONFIDENTIAL **, ** *****
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	Yes
Public Complaint	Yes

### Secondary Locations

#### Address

6500 N. Congress Blvd Suite 200  
BOCA RATON, FL 33487

#### Address

3614 S. Ocean Blvd  
HIGHLAND BEACH, FL 33487

### Discipline/Admin Action

#### Emergency Actions

No Emergency Actions Found

#### Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
COHEN, TERRY BRUCE	36467	MEDICAL DOCTOR	**** CONFIDENTIAL **	**	201405363	OBLIGATION(S) SATISFIED

#### Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
COHEN, TERRY BRUCE	36467	MEDICAL DOCTOR	**** CONFIDENTIAL **	**	201405363	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
BOCA RATON FIRE RESCUE	SERVICE PROVIDER	EMS SERVICE PROVIDER ALS	5003	2/25/2019
CASTILLO OLIVERA, LIAN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109264	10/22/2018
TOWN OF HIGHLAND BEACH	SERVICE PROVIDER	EMS SERVICE PROVIDER ALS	10057	2/28/2023

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

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