



## SPINECARE ASSOCIATES, LLC

### Florida Spine Institute

#### License Number: PMC458

Data As Of 8/22/2025

Profession	Pain Management Clinic
License	PMC458
License Status	Clear/
License Expiration Date	1/1/0001
License Original Issue Date	02/09/2010
Address of Record	2250 DREW STREET CLEARWATER, FL 33765
Discipline on File	No
Public Complaint	No

#### Secondary Locations

No secondary locations found.

#### 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	License	Effective Date
BOTWIN, KENNETH PHILIP MD	PAIN MANAGEMENT CLINIC OWNER	MEDICAL DOCTOR	64559	02/09/2010
FIGUEROA, LUIS MD	PAIN MANAGEMENT CLINIC OWNER	MEDICAL DOCTOR	66110	02/09/2010
GERGES, NABIL SAAD DO	PMC PHYSICIAN	OSTEOPATHIC PHYSICIAN	10298	07/28/2016
HANNA, ASHRAF FOUAD ABDEL MD	DESIGNATED PHYSICIAN	MEDICAL DOCTOR	70421	12/21/2009

Name	Relationship	Profession	License	Effective Date
TORRES, FRANCISCO MANUEL MD	PAIN MANAGEMENT CLINIC OWNER	MEDICAL DOCTOR	63542	02/09/2010
WEBB, SCOTT A DO	PAIN MANAGEMENT CLINIC OWNER	OSTEOPATHIC PHYSICIAN	7461	02/09/2010

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.