Florida HEALTH Department of Health

TRI TU TRAN

License Number: PA9101733

Data As Of 11/13/2026

Profession	Physician Assistant
License	PA9101733
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2028
License Original Issue Date	07/16/2001
Address of Record	10499 NE 104th Circle OXFORD, FL 34484
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
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
ALATRISTE, ANTHONY	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	70004	10/23/2026

Name	Relationship	Profession	License	Effective Date
MARTIN, RICHARD ALAN MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	32861	10/23/2026
SOLANKI, KALPESH HIMAT	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	9233	10/23/2026
VON BARGEN, WILLIAM FREDERICK JR	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	9286	10/23/2026

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

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
COMPREHENSIVE VEIN CENTER, LLC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	2392	3/3/2009

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

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