



## ARTURO CORCES

License Number: ME56194

Data As Of 4/16/2025

Profession	Medical Doctor
License	ME56194
License Status	CLEAR/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2027
License Original Issue Date	04/20/1989
Address of Record	11801 SW 90TH STREET SUITE 201 MIAMI, FL 33186
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Discipline on File	Yes
Public Complaint	No

### Secondary Locations

**Address**

3650 nw 82nd Avenue Suite 404  
MIAMI, FL 33166

**Address**

9299 S.W. 152 STREET SUITE 103  
MIAMI, FL 33157

**Address**

747 PONCE DE LEON SUITE 505  
CORAL GABLES, FL 33134

**Address**

11801 SW 90 STREET, #201  
MIAMI, FL 33193

**Address**

8900 SW 117TH AVE STE B104  
MIAMI, FL 33186-2155

### Discipline/Admin Action

#### Emergency Actions

No Emergency Actions Found

#### Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
CORCES, ARTURO	56194	MEDICAL DOCTOR	MIAMI	FL	199708360	FINE

#### 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.

## Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
ARTURO CORCES, M.D., P.A.	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	1231	1/13/2009
ARTURO CORCES, MD, P.A.	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	1807	3/12/2009

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

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