## **ERIC RICARDO HAYNES**

# License Number: ME57444

Data As Of 6/24/2025

Profession Medical Doctor
License ME57444
License Status Clear/Active

Qualifications Dispensing Practitioner

License Expiration Date 1/31/2026 License Original Issue Date 04/19/1990

Address of Record 4807 Us Highway 19

Suite 102

Yes

Yes

NEW PORT RICHEY, FL 34652

Controlled Substance Prescriber (for the Treatment of Chronic Non-

malignant Pain)

Authorized to Order (Medical and

Low-THC Cannabis)

Discipline on File No Public Complaint No

# **Secondary Locations**

### Address

11361 Countryway Blvd TAMPA, FL 33626

### Address

871 E Venetia Bay Blvd #350

VENICE, FL 34285

#### Address

14028 5TH STREET DADE CITY, FL 33525

# 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.

# **Subordinate Practitioners**

| Name                                    | Relationship              | Profession                              | License | Effective<br>Date |
|---|---------------------------|---|---------|-------------------|
| COMPREHENSIVE PAIN MANAGEMENT PARTNERS  | HCCE                      | HEALTH CARE CLINIC ESTABLISHMENT PERMIT |         | 1/5/2009          |
| COMPREHENSIVE PAIN MANAGEMENT PARTNERS  | HCCE                      | HEALTH CARE CLINIC ESTABLISHMENT PERMIT |         | 1/12/2009         |
| COMPREHENSIVE PAIN MANAGEMENT PARTNERS  | HCCE                      | HEALTH CARE CLINIC ESTABLISHMENT PERMIT | 2526    | 1/12/2009         |
| COMPREHENSIVE PAIN MANAGEMENT PARTNERS, | HCCE                      | HEALTH CARE CLINIC ESTABLISHMENT PERMIT | 2779    | 12/4/2009         |
| COMPREHENSIVE PAIN MANAGEMENT PARTNERS, | HCCE                      | HEALTH CARE CLINIC ESTABLISHMENT PERMIT | 2780    | 7/1/2010          |
| COMPREHENSIVE PAIN MANAGEMENT PARTNERS, | PAIN MANAGEMENT<br>CLINIC | PAIN MANAGEMENT CLINIC                  | 823     | 3/15/2010         |

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

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