ALFRED VINCENT HESS

License Number: ME60307

Data As Of 8/11/2025	
Profession	Medical Doctor
License	ME60307
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2027
License Original Issue Date	07/24/1991
Address of Record	560 S. Lakewood Dr
	Suite 101
	BRANDON, FL 33511
Controlled Substance Prescriber	Yes
(for the Treatment of Chronic Non-	
malignant Pain)	
Discipline on File	Yes
Public Complaint	No

Secondary Locations

Address 5901 E Fowler Ave Suite 100 TEMPLE TERRACE, FL 33617 Address 909 N Dale Mabry Hwy TAMPA, FL 33609

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
HESS, ALFRED VINCENT	60307	MEDICAL DOCTOR	BRANDON	FL	200005794	PROBATION - OTHER MAJOR PENALTY
HESS, ALFRED VINCENT	60307	MEDICAL DOCTOR	BRANDON	FL	199708411	OBLIGATIONS IMPOSED

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 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.

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.

^{2.} Name and address where documents are to be sent; and