



THOMAS MICHAEL STEED M.D.

License Number: ME71508

Data As Of 4/23/2026

Profession	Medical Doctor
License	ME71508
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2027
License Original Issue Date	09/11/1996
Address of Record	14100 SW 136TH STREET MIAMI, FL 33186
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

13001 N KENDALL DRIVE
MIAMI, FL 33186

Address

8750 S.W. 144 STREET
MIAMI, FL 33176

Address

8840 BIRD ROAD
MIAMI, FL 33165

Address

14660 S.W. 8TH STREET
MIAMI, FL 33184

Address

13500 S.W. 152 STREET
MIAMI, FL 33177

Address

14661 S.W. 56TH STREET BAPTIST HEALTH UC/KENDALE LAKES
MIAMI, FL 33175

Address

11805 S. DIXIE HIGHWAY BAPTIST HEALTH UC/PINECREST
MIAMI, FL 33156

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

No Discipline Found

Public Complaints

No Public Complaint Found

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	Effective License	Date
ALVAREZ-JACINTO, MANUEL	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109866	12/14/2016
ALVAREZ-JACINTO, MANUEL	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109866	12/19/2016
FL KEYS MEDICAL TRANSPORTATION LLC, DBA	SERVICE PROVIDER	EMS SERVICE PROVIDER ALS	4411	9/25/2012
PERERA, ALEXIS MD	DISPENSING PHYSICIAN ASSISTANT	MEDICAL DOCTOR	97052	4/28/2016

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.

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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](#)

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