



DALE D TUCKER MD

License Number: ME76518

Data As Of 4/21/2026

Profession	Medical Doctor
License	ME76518
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2027
License Original Issue Date	08/18/1998
Address of Record	6488 103rd street suite A JACKSONVILLE, FL 32210
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	Yes
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

2001 County Road 210
SAINT JOHNS, FL 32259

Address

10503 San Jose Blvd
JACKSONVILLE, FL 32257

Address

858 Monument Road
JACKSONVILLE, FL 32225

Address

6699 Gate Parkway
JACKSONVILLE, FL 32256

Address

7963 Normandy Blvd
JACKSONVILLE, FL 32221

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 Date
AMARILLO, SARAH MICHELLE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9116772	1/19/2023

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

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