DAGOBERTO JESUS RODRIGUEZ MD

License Number: ME58463

Profession Medical Doctor License Status Obligations/Active

Year Began Practicing 01/01/1990 License Expiration 01/31/2027

Date

General Information

Primary Practice Address

DAGOBERTO JESUS RODRIGUEZ MD 1000 E HILLSBORO BLVD SUITE 102 DEERFIELD BEACH, FL 33441

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

This practitioner has not indicated any staff privileges.

Institution Name	City	State
		FLORIDA

Email Address

Please contact at: jaglvr@comcast.net

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NEW YORK	PHYSICIAN
ALASKA	PHYSICIAN
CALIFORNIA	PHYSICIAN
DISTRICT OF COLUMBIA	PHYSICIAN
GEORGIA	PHYSICIAN
ILLINOIS	PHYSICIAN
INDIANA	PHYSICIAN
LOUISIANA	PHYSICIAN
MARYLAND	PHYSICIAN
MICHIGAN	PHYSICIAN
MONTANA	PHYSICIAN
NORTH DAKOTA	PHYSICIAN
NEW HAMPSHIRE	PHYSICIAN
NEW JERSEY	PHYSICIAN
PENNSYLVANIA	PHYSICIAN
SOUTH DAKOTA	PHYSICIAN

State	Profession
TENNESSEE	PHYSICIAN
UTAH	PHYSICIAN
VIRGINIA	PHYSICIAN
ILLINOIS	PHYSICIAN

Florida Birth-Related Neurological Injury Compensation Association

If you are a Florida Allopathic (MD) or Osteopathic (DO) Physician, you are required to provide proof of payment of the Florida Birth-Related Neurological Injury Compensation Association (NICA) assessment as required by section 766.314, Florida Statutes. Payment of the initial and annual assessment are required of all Florida Allopathic and Osteopathic Physicians who do not qualify for an exemption as set forth in section 766.314(4)(b)4, Florida Statutes.

This practitioner has indicated that he/she has submitted payment of the assessment.

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
AMERICAN UNIV. OF THE CARRIBEA	MD		
AMERICAN UNIV. OF THE CARRIBEA	MD	1/1/1982 - 6/28/1986	06/28/1986

Other Health Related Degrees

This practitioner does not hold any additional health related degrees.

School/University	City	State/Country	Dates Attended From	Dates Attended To	Degree Title
AMERICAN UNIVERSITY OF THE CARIBBEAN	MONTSERRAT		06/01/1982	06/28/1986	M.D. MEDICAL DOCTOR

Professional and Postgraduate Training

This practitioner has completed the following graduate medical education:

Program Name	Program Type	Specialty Area	Other Specialty Area	City	State or Country	Dates Attended From	Dates Attended To
EMORY UNIVERSITY	INTERNSHIP	PD - PEDIATRICS		ATLANTA	GEORGIA	07/01/1987	06/01/1988
EMORY UNIVERSITY	RESIDENCY	PD - PEDIATRICS		ATLANTA	GEORGIA	07/01/1988	07/01/1990

Academic Appointments

Graduate Medical Education

This practitioner has not had the responsibility for graduate medical education within the last 10 years.

Academic Appointments

This practitioner does not currently hold faculty appointments at any medical/health related institutions of higher learning.

Specialty Certification

Specialty Certification

This practitioner does not hold any certifications from specialty boards recognized by the Florida board which regulates the profession for which he/she is licensed.

Financial Responsibility

Financial Responsibility

I have elected not to carry medical malpractice insurance however, I agree to satisfy any adverse judgments up to the minimum amounts pursuant to s. 458.320(5) (g)1, F. S. I understand that I must either post notice in a sign prominently displayed in my reception area or provide a written statement to any person to whom medical services are being provided that I have decided not to carry medical malpractice insurance. I understand that such a sign or notice must contain the wording specified in s. 458.320(5) (g),

Proceedings and Actions

Proceedings & Actions

Criminal Offenses

The criminal history information, if any exists, may be incomplete; federal criminal history information is not available to the public. Information is verified by the Department at the time of initial licensure and renewal.

This practitioner has indicated that he/she has no criminal offenses required to be published on this profile.

Medicaid Sanctions and Terminations

This practitioner has not been sanctioned or terminated for cause from the Medicaid program.

Final Disciplinary Actions Reported by the Department of Health within the last 10 years:

For instructions on how to order copies of final disciplinary actions, please click here.

View Discipline Narratives

View Board Actions

Taken By	Date Of Action	Descrip	Description of Disciplinary Action		Under Appeal
FLORIDA DEPARTMENT OF HEALTH	03/10/2025	OBLIGA	OBLIGATIONS IMPOSED		NO
Туре	Imposed	Due	Completed	Amt Due	Amt Recvd
FINE	3/10/2025	4/9/2025	3/20/2025	\$ 1,500.00	\$ 1,500.00
COSTS	3/10/2025	4/9/2025	3/20/2025	\$ 1,508.25	\$ 1,508.25
CE: TELEMEDICINE		3/9/2026		\$ 0.00	\$ 0.00
CE: LAWS RULES AND ETHICS	4/5/2025	3/9/2026	4/5/2025	\$ 0.00	\$ 0.00

The information below is self reported by the practitioner. For Florida health care practitioner discipline, see information listed above.

Final disciplinary action taken by a specialty board within the last 10 years:

This practitioner has indicated that he/she has *NOT* had any final disciplinary action taken against him/her within the last 10 years by a specialty board.

Final disciplinary action taken by a licensing agency within the last 10 years:

This practitioner has indicated that he/she has had final disciplinary action taken against him/her within the last 10 years by a licensing agency.

Taken By	Date Of Action	Description of Disciplinary Action	Under Appeal
OREGON MEDICAL BOARD	10/07/2021	CONSENT ORDER	NO
ILLINOIS DEPT OF FINANCIAL AND PROFESSIONAL REGULATION	02/20/2022	REPRIMAND	NO
STATE OF SOUTH DAKOTA DEPARTMENT OF HEALTH	04/13/2022	INTERIM CONSENT ORDER	NO
NORTH DAKOTA BOARD OF MEDICINE	04/22/2022	FINE AND CME	NO
TENNESSEE BOARD OF MEDICAL EXAMINERS	05/24/2022	REPRIMAND	NO

Taken By	Date Of Action	Description of Disciplinary Action	Under Appeal
STATE OF SOUTH DAKOTA DEPT OF HEALTH	06/09/2022	REPRIMAND	NO
MICHIGAN BOARD OF MEDICINE	06/22/2022	REPRIMAND	NO
PENNSYLVANIA BOARD OF MEDICINE	07/02/2022	REPRIMAND	NO
NEW HAMPSHIRE BOARD OF MEDICINE	07/06/2022	REPRIMAND	NO
STATE OF MICHIGAN, DEPARTMENT OF LICENSING AND REGULATORY	04/07/2022	CONSENT ORDER	NO
COMMONWEALTH OF PENNSYLVANIA, DEPARTMENT OF STATE	07/01/2022	CONSENT AGREEMENT	NO
LOUISIANA STATE BOARD OF MEDICAL EXAMINERS	08/15/2022	VOLUNTARY/SURRENDER	NO
VIRGINIA BOARD OF MEDICINE	08/31/2022	REPRIMAND	NO

Disciplinary action taken by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center within the last 10 years:

This practitioner has indicated that he/she has *NOT* had any final disciplinary action taken against him/her within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center.

The following discipline has been reported as required under 456.041(5), F.S. within the previous 10 years.

Resignation from or non-renewal of medical staff membership or the restriction or revocation of staff privileges within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center in lieu of or in settlement of a pending disciplinary case related to competence or character.

This practitioner has indicated that he/she has *NEVER* been asked to or allowed to resign from or had any medical staff privileges restricted or revoked within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center.

Liability Claims Exceeding \$100,000.00 Within last 10 years.

Settlement of a claim may occur for a variety of reasons that do not necessarily reflect negatively on the professional competence or conduct of the physician. A payment settlement of a medical malpractice action or claim should not be construed as creating a presumption that medical malpractice has occurred.

Additional claims information may have been reported to the Department of Financial Services. To check their web site, please click here.

There have not been any reported liability actions, which are required to be reported under section 456.049, F. S., within the previous 10 years.

Optional Information

Committees/Memberships

This practitioner has not indicated any committees on which they serve for any health entity with which they are affiliated.

Professional or Community Service Awards

This practitioner has not provided any professional or community service activities, honors, or awards.

Publications

This practitioner has not provided any publications that he/she authored in peer-reviewed medical literature within the last ten years.

Professional Web Page

This practitioner has not provided any professional web page information.

Languages Other Than English

This practitioner has indicated that the following languages other than English are used to communicate with patients, or that a translation service is available for patients, at his/her primary place of practice.

SPANISH

Other Affiliations

This practitioner has not provided any national, state, local, county, or professional affiliations.