



EDUARDO E LOPEZ DEL CASTILLO

License Number: ME138536

Data As Of 5/6/2026

| | |
|--|--------------------------------------|
| Profession | Medical Doctor |
| License | ME138536 |
| License Status | Clear/Active |
| Qualifications | Dispensing Practitioner |
| License Expiration Date | 1/31/2027 |
| License Original Issue Date | 11/28/2018 |
| Address of Record | 2623 SW 147TH AVE MIAMI, FL 33185 |
| Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain) | Yes |
| Discipline on File | No |
| Public Complaint | No |

Secondary Locations

Address

8840 Bird Road
MIAMI, FL 33165

Address

14660 SW 8th Street
MIAMI, FL 33184

Address

8750 SW 144th Street
MIAMI, FL 33176

Address

13001 N Kendall Drive
MIAMI, FL 33186

Address

11805 S Dixie Highway
MIAMI, FL 33156

Address

13500 SW 152nd Street
MIAMI, FL 33177

Address

14661 SW 56th St
MIAMI, FL 33175

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 | License | Effective Date |
|--------------------------|---------------------------------|---------------------|---------|----------------|
| VELAZCO, CORINA CRISTINA | PRESCRIBING PHYSICIAN ASSISTANT | PHYSICIAN ASSISTANT | 9116383 | 9/14/2022 |

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:

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