PAUL O ROHART

License Number: ME59841

Data As Of 9/6/2025

Profession Medical Doctor
License ME59841
License Status Clear/Active
License Expiration Date 1/31/2026
License Original Issue Date 06/07/1991

Address of Record HOMESTEAD HOSPITAL 975 BAPTIST WAY

HOMESTEAD, FL 33033

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File Yes
Public Complaint Yes

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case#	Action Taken
ROHART, PAUL O	59841	MEDICAL DOCTOR	HOMESTEAD	FL	200560521	OBLIGATION(S) SATISFIED

Public Complaints

Name	License	Profession	City	State	Case#	Action Taken
ROHART, PAUL O	59841	MEDICAL	HOMESTEAD	FL	200560521	AC FILED
		DOCTOR				

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.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
SHALABY, MICHAEL M	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	148928	09/07/2021

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

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