



WERTHER ROBERTO MARCIALES

License Number: ME70054

Data As Of 8/16/2025

Profession	Medical Doctor
License	ME70054
License Status	Obligations/Active
License Expiration Date	1/31/2026
License Original Issue Date	03/03/1996
Address of Record	3844 Bee Ridge Road 2nd Floor SARASOTA, FL 34233
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
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
MARCIALES, WERTHER ROBERTO	70054	MEDICAL DOCTOR	SARASOTA	FL	201815395	RESTRICTED FROM PRACTICE

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
MARCIALES, WERTHER ROBERTO	70054	MEDICAL DOCTOR	SARASOTA	FL	201815395	AC FILED

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	Effective	
			License	Date
DAIGNAULT, BRIAN MICHAEL	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9115554	2/24/2022
HEALTHCARE AMERICA MEDICAL GROUP, INC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	2453	1/23/2009
NEVILL, ANN ELIZABETH	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9118828	6/19/2024
TROST, JODY AILEEN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9106622	12/9/2021
WEST FLORIDA PHYSICIAN NETWORK, LLC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	4276	4/6/2011

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

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