## JUAN CARLOS ALVAREZ

### License Number: ME81609

Data As Of 7/26/2025

Profession Medical Doctor
License ME81609
License Status Clear/Active

Qualifications Dispensing Practitioner

License Expiration Date 1/31/2027 License Original Issue Date 12/12/2000

Address of Record 5115 US HIGHWAY 27 N STE 100

No

SEBRING, FL 33870

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

#### Address

146 AVE B NW

WINTER HAVEN, FL 33881

## 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 |
|----------------------|---------------------------------|---------------------|---------|----------------|
| OPPECINI, DAIANA SOL | PRESCRIBING PHYSICIAN ASSISTANT | PHYSICIAN ASSISTANT | 9120095 | 5/1/2025       |
| TRUJILLO, VERONICA   | PRESCRIBING PHYSICIAN ASSISTANT | PHYSICIAN ASSISTANT | 9106715 | 6/19/2017      |

| Name                   | Relationship                    | Profession          | License Effective Date |
|------------------------|---------------------------------|---------------------|------------------------|
| WALTMAN, CHARLES HENRY | PRESCRIBING PHYSICIAN ASSISTANT | PHYSICIAN ASSISTANT | 9105528 6/19/2017      |

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

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