Florida HEALTH Department of Health

JONATHAN TROY KUDROWITZ

License Number: PA9105136

Data As Of 10/29/2026

Profession	Physician Assistant
License	PA9105136
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2028
License Original Issue Date	09/03/2009
Address of Record	1007 WEST COMMERCIAL BLVD. Concentra FT LAUDERDALE, FL 33309
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address
12170 West Sunrise Blvd
PLANTATION, FL 33323

Address
311 South Cypress Road Concentra
POMPANO BEACH, FL 33060

Address
4455 Medical Center Way Concentra
WEST PALM BCH, FL 33407

Address
12170 West Sunrise Blvd Concentra
SUNRISE, FL 33323

Address
1347 South Andrews Avenue Concentra
FORT LAUDERDALE, FL 33316

Address
141 MW 20th Street Suite C9 Concentra
BOCA RATON, FL 33431

Address
4455 Medical Center Way Concentra
WEST PALM BCH, FL 33407

Address
12170 W. Sunrise Blvd Concentra
PLANTATION, FL 33323

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.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
MARTIN, GERARD J	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	114724	03/27/2023

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

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