



Department of Health

License Verification

Printer Friendly Version

EDWIN M ORTIZ MD

License Number: ME16320

Data As Of 11/19/2019

License Information	Secondary Locations	Discipline/Admin Action	Practitioner Profile
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Profession	Medical Doctor
License	ME16320
? License Status	CLEAR/ACTIVE
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2021
License Original Issue Date	12/31/1973
Address of Record	5450 Eagles Point Cir # 105 SARASOTA, FL 34231 UNITED STATES
? Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
? Public Complaint	No

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