

Department of Health

License Verification

HARVEY CRAIG ROTH

Printer Friendly Version

License Number: ME64837

Data As Of 2/18/2020

License Secondary Discipline/Admin Practitioner
Information Locations Action Profile

Profession Medical Doctor

License ME64837

License Status OBLIGATIONS/ACTIVEQualifications Dispensing Practitioner

License Expiration Date 1/31/2021
License Original Issue 08/19/1993

Date

Address of Record 2001 WEST OAKLAND PARK BOULEVARD

FT. LAUDERDALE, FL 33311

UNITED STATES

Controlled Substance Yes

Prescriber (for the

Treatment of Chronic Non-

malignant Pain)

Discipline on File Yes - Click on Discipline/Admin Action tab to see more details

② Public Complaint Yes - Click on Discipline/Admin Action tab to see more details

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For instructions on

how to request a license certification of your Florida license to be sent to another state from the Florida Department of

Health, please visit the License

Certifications web

page.



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