# **SUMEET CHANDRA**

# License Number: ME101674

Data As Of 8/16/2025

Profession Medical Doctor
License ME101674
License Status Clear/Active

Qualifications Dispensing Practitioner

License Expiration Date 1/31/2026 License Original Issue Date 05/15/2008

Address of Record 2290 W. EAU GALLIE BLVD

SUITE 202

Yes

MELBOURNE, FL 32935

Controlled Substance Prescriber (for the Treatment of Chronic Non-

malignant Pain)

Authorized to Order (Medical and

Low-THC Cannabis)

Discipline on File No Public Complaint No

# **Secondary Locations**

No secondary locations found.

# 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	Relationsh	nip Profession	Effective License Date
MEDICAL ACCOCIATES OF BREVARD	HCCE	HEALTH CARE CLINIC ESTABLISHMENT	12/22/2008
L.L.C.		PERMIT	

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

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