



## JEREMY DAVID INGRAM

### License Number: OS10697

Data As Of 4/20/2026

Profession	Osteopathic Physician
License	OS10697
License Status	Clear/Active
License Expiration Date	3/31/2028
License Original Issue Date	06/12/2009
Address of Record	2776 CLEVELAND AVENUE LEE MEMORIAL HEALTH SYSTEM EMERGENCY DEPARTMENT FORT MYERS, FL 33901
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
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	Relationship	Profession	License	Effective Date
ABOKOORA, AHMED ALGHAREEB	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105700	4/3/2019
BOUNDS, DONALD JR	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	3410	8/29/2017
D'ALBA, ANTHONY	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101564	1/11/2018

Name	Relationship	Profession	License	Effective Date
DESOMMA, MARK ANTHONY	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101246	4/22/2019
DOLORFINO, JHAWN ALDVIN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9108994	7/10/2020
KNUTSON, KATHERYN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	3657	1/11/2018
NGUYEN, MICHAEL TUAN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107834	5/4/2017
PEREZ, ALEJANDRO	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9110599	1/9/2018
RIDGWAY, ALISON CHRISTINE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9106672	4/1/2019
ST FIRMIN, JEFFREY	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9110664	6/30/2020

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

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.

## 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	Relationship	Profession	License	Effective Date
ABOKOORA, AHMED ALGHAREEB	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105700	4/3/2019
BOUNDS, DONALD JR	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	3410	8/29/2017
D'ALBA, ANTHONY	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101564	1/11/2018
DESOMMA, MARK ANTHONY	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101246	4/22/2019
DOLORFINO, JHAWN ALDVIN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9108994	7/10/2020
KNUTSON, KATHERYN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	3657	1/11/2018
NGUYEN, MICHAEL TUAN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107834	5/4/2017
PEREZ, ALEJANDRO	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9110599	1/9/2018
RIDGWAY, ALISON CHRISTINE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9106672	4/1/2019
ST FIRMIN, JEFFREY	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9110664	6/30/2020

Name	Relationship	Profession	License	Effective Date
------	--------------	------------	---------	----------------

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

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.

---