



## KY CHUNG D.C.

### License Number: CH9170

Data As Of 7/7/2025

Profession	Chiropractic Physician
License	CH9170
License Status	Clear/Active
License Expiration Date	3/31/2026
License Original Issue Date	05/31/2006
Address of Record	7359 CURRY FORD RD ORLANDO, FL 32822
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### [Address](#)

7947 NW 2nd St.  
MIAMI, FL 33126

#### [Address](#)

1907 North Orange Ave  
ORLANDO, FL 32804

#### [Address](#)

800 1st St. S  
WINTER HAVEN, FL 33880

#### [Address](#)

1900 North Central Ave.  
KISSIMMEE, FL 34741

#### [Address](#)

629 North Fern Creek Ave.  
ORLANDO, FL 32803

#### [Address](#)

402 Gatlin Ave.  
ORLANDO, FL 32806

#### [Address](#)

5329 West Colonial Dr.  
ORLANDO, FL 32808

#### [Address](#)

7209 Curry Ford Rd Ste C  
ORLANDO, FL 32822

#### [Address](#)

5949 East Colonial Dr.  
ORLANDO, FL 32807

### 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
VO, GIA BAO DERICK	SUPRV-PHYSSUBORDINATE	CERT CHIROPRACTIC PA	1228	9/20/2023

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.