



CARLO PONTI DO

License Number: OS12336

Data As Of 4/21/2026

Profession	Osteopathic Physician
License	OS12336
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	3/31/2028
License Original Issue Date	08/23/2013
Address of Record	1800 Jenks Ave PANAMA CITY, FL 32405
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Discipline on File	Yes
Public Complaint	Yes

Secondary Locations

Address

1970 South University Dr Studio 15
DAVIE, FL 33324

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
MAIORANO, CARLO P	12336	OSTEOPATHIC PHY	PANAMA CITY	FL	201409625	OBLIGATION(S) SATISFIED

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
MAIORANO, CARLO P	12336	OSTEOPATHIC PHYSICIAN	PANAMA CITY	FL	201409625	AC FILED

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
FARAG, LAMIA	AA	ANESTHESIOLOGIST ASSISTANTS	599	8/1/2024

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

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