# KOSISOCHUKWU NKENNA ANAGO

## License Number: ME137136

Data As Of 8/4/2025		
Profession	Medical Doctor	
License	ME137136	
License Status	Clear/Active	
Qualifications	Dispensing Practitioner	
License Expiration Date	1/31/2026	
License Original Issue Date	07/05/2018	
Address of Record	200 SE Hospital Ave	
	STAURT, FL 34995	
Controlled Substance Prescriber	No	
(for the Treatment of Chronic Non-		
malignant Pain)		
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
CRUZ, YVETTE LYNN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9104295	4/29/2019
GOZAR, JOHN ALVIN MD	SUBORDINATE	MEDICAL DOCTOR	91258	3/16/2019
GRAVES, CLARENCE RICHARD III	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9106480	4/29/2019

Name	Relationship	Profession	License Effective Date
PATEL, HETAL MIHIR	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9103240 3/16/2019

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.