



## KAREN WIEDENBECK

License Number: PA9111352

Data As Of 4/20/2026

Profession	Physician Assistant
License	PA9111352
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2028
License Original Issue Date	07/05/2018
Address of Record	601 E Rollins Street ORLANDO, FL 32803
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

## Secondary Locations

### Address

200 North Lakemont  
WINTER PARK, FL 32792

### Address

201 North Park Ave  
APOPKA, FL 32703

### Address

601 East Altamonte Drive  
ALTAMONTE SPRINGS, FL 32701

### Address

2000 Fowler Grove Blvd  
WINTER GARDEN, FL 34787

### Address

400 Celebration Place  
CELEBRATION, FL 34747

### Address

7727 Lake Underhill Drive  
ORLANDO, FL 32822

### Address

2450 North Orange Blossom Tr  
KISSIMMEE, FL 34744

### Address

950 Rinehart Road  
LAKE MARY, FL 32746

## 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.

## Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
BORRERO-MENDOZA, ANDRES ELIAS MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	140971	06/25/2025
MOORE, ROSS AARON	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	136093	06/18/2025
PACHECO PARES, LUIS	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	167514	07/21/2025

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

### [Address](#)

200 North Lakemont  
WINTER PARK, FL 32792

### [Address](#)

201 North Park Ave  
APOPKA, FL 32703

### [Address](#)

601 East Altamonte Drive  
ALTAMONTE SPRINGS, FL 32701

### [Address](#)

2000 Fowler Grove Blvd  
WINTER GARDEN, FL 34787

### [Address](#)

400 Celebration Place  
CELEBRATION, FL 34747

### [Address](#)

7727 Lake Underhill Drive  
ORLANDO, FL 32822

### [Address](#)

2450 North Orange Blossom Tr  
KISSIMMEE, FL 34744

### [Address](#)

950 Rinehart Road  
LAKE MARY, FL 32746

## 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.

## Supervising Practitioners

Name	Relationship	Profession	Effective License Date
BORRERO-MENDOZA, ANDRES ELIAS MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	140971 06/25/2025
MOORE, ROSS AARON	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	136093 06/18/2025
PACHECO PARES, LUIS	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	167514 07/21/2025

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.