



## STACY MATHEW

## License Number: PA9119928

Data As Of 1/12/2026

Professional	Physician Assistant
License	PA9119928
License Status	Clear/Active
Qualifications	Prescribing Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	02/28/2025
Address of Record	11406 S. US Highway US-301 RIVERVIEW, FL 33578
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

## Secondary Locations

## Address

13531 State Rd. 54  
ODESSA, FL 33556

## Address

22945 State Rd. 54, Lutz  
LUTZ, FL 33549

## Address

4949 4th Street N.  
SAINT PETERSBURG, FL 33703

## Address

13856 N. Dale Mabry Hwy.  
TAMPA, FL 33618

## Address

2810 W. Martin Luther King Jr.  
TAMPA, FL 33607

## Address

6182 N. US Hwy. 41  
APOLLO BEACH, FL 33572

## Address

40545 US Hwy. 19 N.  
TARPON SPRINGS, FL 34689

## Address

7601 Seminole Blvd.  
SEMINOLE, FL 33772

## Address

3251 66th Street North  
SAINT PETERSBURG, FL 33710

## Address

3301 W. Gandy Blvd.  
TAMPA, FL 33611

## Address

564 Channelside Dr.  
TAMPA, FL 33602

**Address**

303 W. Palm Ave.  
TAMPA, FL 33602

**Address**

5464 Lithia Pinecrest Dr.  
LITHIA, FL 33547

**Address**

16521 US-301  
WIMAUMA, FL 33598

**Address**

799 W Lumsden Rd.  
BRANDON, FL 33511

**Address**

5504 Gateway Blvd.  
WESLEY CHAPEL, FL 33544

**Address**

4505 Gunn Hwy.  
TAMPA, FL 33624

**Address**

11969 Sheldon Rd.  
TAMPA, FL 33626

## 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
NANDA, PAUL KALRA	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	117861	06/17/2025
NANDA, PAUL KALRA	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	117861	06/17/2025

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

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