



ARIYANA NICOLE MILLER

License Number: PA9120173

Data As Of 4/20/2026

Profession	Physician Assistant
License	PA9120173
License Status	Clear/Active
Qualifications	Prescribing Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	04/30/2025
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 Road 54
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. Blvd
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
WESTCHASE, 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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