Florida HEALTH Department of Health

NEEKAYTAN SHARMA

License Number: ME50176

Data As Of 11/25/2026

Profession	Medical Doctor
License	ME50176
License Status	Clear/Active
License Expiration Date	1/31/2027
License Original Issue Date	02/26/1987
Address of Record	4790 BARKLEY CIRCLE BUILDING A FT MYERS, FL 33907
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

1303 SE 8th Terrace STE 101
CAPE CORAL, FL 33990

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
BARKLEY SURGICENTER INC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	2314	1/6/2009

Name	Relationship	Profession	License	Effective Date
GASTROENTEROLOGY ASSOCIATES OF SOUTHWEST	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	1588	12/24/2008
GASTROENTEROLOGY ASSOCIATES OF SW FL P.A	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	309	12/24/2008
MIKOL, KAREN ANNE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105644	9/10/2026

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

1303 SE 8th Terrace STE 101

CAPE CORAL, FL 33990

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
BARKLEY SURGICENTER INC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	2314	1/6/2009
GASTROENTEROLOGY ASSOCIATES OF SOUTHWEST	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	1588	12/24/2008
GASTROENTEROLOGY ASSOCIATES OF SW FL P.A	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	309	12/24/2008
MIKOL, KAREN ANNE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105644	9/10/2026

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.