ANTONY GEORGE SANKOORIKAL

License Number: ME62422

Data As Of 5/10/2025

Profession Medical Doctor
License ME62422
License Status CLEAR/Active
License Expiration Date 1/31/2027
License Original Issue Date 06/22/1992

Address of Record 2655 STATE ROAD 580

Ste #201

Yes

Yes

CLEARWATER, FL 33761

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Authorized to Order (Medical and

Low-THC Cannabis)

Discipline on File No Public Complaint No

Secondary Locations

Address

42674 US HWY 19

TARPON SPRINGS, FL 34689

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.

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