

ANAIS AURORA BADIA

License Number: OS7304

Data As Of 9/18/2026

Profession	Osteopathic Physician
License	OS7304
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	3/31/2028
License Original Issue Date	09/23/1996
Address of Record	13691 METROPOLIS AVE. FT MYERS, FL 33912
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	Yes
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

13681 Metropolis Avenue
FORT MYERS, FL 33912

Address

615 Williams Avenue
LEHIGH ACRES, FL 33972

Address

4037 DEL PRADO BLVD. S
CAPE CORAL, FL 33904

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
DREW, BROOKE ELIZABETH	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9106268	7/17/2019
DREW, BROOKE ELIZABETH	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9106268	7/17/2019
FLORIDA SKIN CENTER	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT		7/23/2010
FLORIDA SKIN CENTER, INC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	2422	10/5/2009
SCALZI, BAILEY REBECCA	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9119211	9/8/2026
TRIANA, SOLEDAD	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111573	9/8/2026
VALLARAPU, SHIRISHA RAO	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9103090	5/16/2019
VALLARAPU, SHIRISHA RAO	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9103090	6/13/2019

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

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