PRAGNESH HARSHADKUMAR PATEL MD

License Number: ME70958

Data As Of 7/6/2025

Profession Medical Doctor
License ME70958
License Status Clear/Active
License Expiration Date 1/31/2027
License Original Issue Date 07/15/1996

Address of Record 661 E. ALTAMONTE DR ste 315
ALTAMONTE SPRINGS, FL 32701

Controlled Substance Prescriber No

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

Secondary Locations

Address

7780 LAKE UNDERHILL RD STE 110 ALTAMONTE SPRINGS, FL 32822

Address

3111 CITRUS TOWER BLVD CLERMONT. FL 34711

Address

1142 KELTON AVE OCOEE, FL 34761

Address

7758 WALLACE ROAD, #J ORLANDO, FL 32819

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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