



## BRIAN CHRISTOPHER DOWDELL MD

### License Number: ME76009

Data As Of 6/5/2025

Profession	Medical Doctor
License	ME76009
License Status	CLEAR/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2026
License Original Issue Date	06/19/1998
Address of Record	2290 w eau gallie blvd Ste 210 B MELBOURNE, FL 32935
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	Yes
Discipline on File	Yes
Public Complaint	Yes

### Secondary Locations

#### Address

308 South Harbor City Blvd Ste C  
MELBOURNE, FL 32901

### Discipline/Admin Action

#### Emergency Actions

No Emergency Actions Found

#### Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
DOWDELL, BRIAN CHRISTOPHER	76009	MEDICAL DOCTOR	MELBOURNE	FL	201620805	OBLIGATION(S) SATISFIED

#### Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
DOWDELL, BRIAN CHRISTOPHER	76009	MEDICAL DOCTOR	MELBOURNE	FL	201620805	AC FILED

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	Effective License	Date
BOWERS, BRADLEY GUY	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109384	3/13/2023
INTERVENTIONAL SPINE INSTITUTE OF FLORID	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT		1/5/2009
INTERVENTIONAL SPINE INSTITUTE OF FLORID	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	952	1/5/2009

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

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