



RAMASWAMI KRISHNAN

License Number: ME89430

Data As Of 8/31/2025

Profession	Medical Doctor
License	ME89430
License Status	Clear/Active
License Expiration Date	1/31/2026
License Original Issue Date	01/02/2004
Address of Record	661 E. Altamonte Dr. Suite 130 ALTAMONTE SPRINGS, FL 32701
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

[Address](#)

5821 S. Williamson Blvd Suite 100
PORT ORANGE, FL 32128

[Address](#)

960 Rinehart Rd Suite 100
LAKE MARY, FL 32746

[Address](#)

8000 Red Bug Lake Rd Suite 120
OVIEDO, FL 32765

[Address](#)

12301 Lake Underhill Rd Suite 113
ORLANDO, FL 32828

[Address](#)

9975 Tavistock Lakes Blvd Suite 120
ORLANDO, FL 32827

[Address](#)

2488 E. Irlo Bronson Memorial Highway, Suite 101
KISSIMMEE, FL 34744

[Address](#)

1551 Future Way
CELEBRATION, FL 34747

[Address](#)

25 S. Terry Avenue Suite 220
ORLANDO, FL 32805

[Address](#)

1919 E. Highway 50 Suite 101
CLERMONT, FL 34711

[Address](#)

1480 W. Orange Blossom Trail
APOPKA, FL 32712

[Address](#)

265 E. Rollins Street Suite 1000
ORLANDO, FL 32804

[Address](#)

2200 Fowler Grove Blvd Suite 060
WINTER GARDEN, FL 34787

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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