



## SCOTT WILLIAM PETERSON

## License Number: ME80915

Data As Of 1/31/2026

Profession	Medical Doctor
License	ME80915
License Status	Clear/Active
License Expiration Date	1/31/2028
License Original Issue Date	08/10/2000
Address of Record	1020 Crosspointe Dr. Suite 103 NAPLES, FL 34110
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	Yes
Public Complaint	Yes

## Secondary Locations

## Address

5110 Seashell Avenue  
NAPLES, FL 34103

## Discipline/Admin Action

## Emergency Actions

No Emergency Actions Found

## Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
PETERSON, SCOTT WILLIAM	80915	MEDICAL DOCTOR	NAPLES	FL	202349424	OBLIGATION(S) SATISFIED

## Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
PETERSON, SCOTT WILLIAM	80915	MEDICAL DOCTOR	NAPLES	FL	202349424	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, Box 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
HARBOUR, KENNETH WAYNE	RADIOLOGIST ASSISTANT	RADIOLOGIST ASSISTANT	28	12/9/2011

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

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