



### IFTIKHAR RASUL

License Number: ME88613

Data As Of 12/22/2024

Profession	Medical Doctor
License	ME88613
License Status	EMERG RESTRICT/Active
License Expiration Date	1/31/2026
License Original Issue Date	09/08/2003
Address of Record	6150 Metrowest Blvd Suite 101 ORLANDO, FL 32835
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint Alerts	Yes Enforcement Alert 4/5/2023 5:18:28 PM Order of Emergency Restriction of License was filed 04/05/2023.

### Secondary Locations

No secondary locations found.

### Discipline/Admin Action

#### Emergency Actions

Name	License	Profession	City	County	State	Case #	Action Taken	Action Date
RASUL, IFTIKHAR	88613	MEDICAL DOCTOR	ORLANDO	ORANGE	FL	202240854	ERO ISSUED	04/06/2023
RASUL, IFTIKHAR	88613	MEDICAL DOCTOR	ORLANDO	ORANGE	FL	202240855	ERO ISSUED	04/05/2023

#### Discipline Cases

No Discipline Found

#### Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
RASUL, IFTIKHAR	88613	MEDICAL DOCTOR	ORLANDO	FL	202240854	AC FILED
RASUL, IFTIKHAR	88613	MEDICAL DOCTOR	ORLANDO	FL	202004497	AC FILED
RASUL, IFTIKHAR	88613	MEDICAL DOCTOR	ORLANDO	FL	202240855	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.

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.

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