

RAVIENDER BUKKAPATNAM MD

License Number: ME90062

Data As Of 10/31/2026

Profession	Medical Doctor
License	ME90062
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	04/12/2004
Address of Record	1 Davis Blvd Ste 604 FLORIDA UROLOGY PARTNERS TAMPA, FL 33606
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

3140 S Falkenburg Road Ste 203
RIVERVIEW, FL 33578

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.

Subordinate Practitioners

Name	Relationship	Profession	Effective License Date
------	--------------	------------	------------------------

Name	Relationship	Profession	Effective	
			License	Date
ANDERSON, SARAH KATHRYN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9113640	2/8/2024
FLORIDA UROLOGY PARTNERS, LLP	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	2965	1/15/2009
MCKENZIE, JAMES MARVIN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101307	10/20/2026
MOAN, AMY CHRISTINE	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101907	1/19/2016

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

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.

Secondary Locations

Address

3140 S Falkenburg Road Ste 203
RIVERVIEW, FL 33578

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.

Subordinate Practitioners

Name	Relationship	Profession	Effective	
			License	Date
ANDERSON, SARAH KATHRYN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9113640	2/8/2024
FLORIDA UROLOGY PARTNERS, LLP	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	2965	1/15/2009
MCKENZIE, JAMES MARVIN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101307	10/20/2026
MOAN, AMY CHRISTINE	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101907	1/19/2016

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

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.