### **JODELL KAY ALLEN**

### License Number: ME111275

Data As Of 4/29/2025

Profession Medical Doctor
License ME111275
License Status NULL AND VOID/
Qualifications Dispensing Practitioner

License Expiration Date 1/31/2016
License Original Issue Date 10/06/2011

Address of Record If further information is needed, please contact the Department of Health at (850) 488-

0595.

Controlled Substance Prescriber No

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

#### Address

1135 NW 23RD AVENUE ALL WOMEN'S HEALTH CENTER

GAINESVILLE, FL 32609

#### Address

431 MAITLAND AVENUE

ALTAMONTE SPRINGS, FL 32701

# 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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