### **KEVIN D STAPLETON**

## License Number: PA2602

Data As Of 12/22/2024

Profession Physician Assistant

License PA2602
License Status CLEAR/Active
Qualifications Prescribing
License Expiration Date 1/31/2026
License Original Issue Date 02/19/1993

Address of Record SOUTH LAKE HOSPITAL ER
1099 CITRUS TOWER BLVD

CLERMONT, FL 34711

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File Yes
Public Complaint No

# **Secondary Locations**

#### Address

16966 Cagan Ridge Blvd CLERMONT, FL 34711

#### Address

22316 US 27

LEESBURG, FL 34748

## Address

2600 Westhall Lane AdventHealth Centra Care

MAITLAND, FL 32751

#### Address

1099 CITRUS TOWER BLVD. SOUTH LAKE HOSPITAL EMERGENCY DEPT.

CLERMONT, FL 34711

#### Address

1512 S. ORANGE AVE. ORLANDO, FL 32806

# Discipline/Admin Action

## **Emergency Actions**

No Emergency Actions Found

## **Discipline Cases**

Name	License	Profession	City	State	Case#	Action Taken
STAPLETON, KEVIN D	2602	PHYSICIAN ASSIS	CLERMONT	FL	200103104	OBLIGATIONS IMPOSED

## **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:

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.

# **Supervising Practitioners**

Name	Relationship	Profession	License	Effective Date
REDDY, MOVVA NAVIN	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	93812	11/22/2024

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

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