



LAUREN ALYSSE SHAW

License Number: PA9110682

Data As Of 8/20/2025

Profession	Physician Assistant
License	PA9110682
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2026
License Original Issue Date	09/18/2017
Address of Record	6410 W Gulf to Lake Hwy CRYSTAL RIVER, FL 34429
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

502 W. HIGHLAND BLVD. CITRUS MEMORIAL HOSPITAL
INVERNESS, FL 34452

Address

10740 Palm River Road Suite 200 TGH Brandon HelathPlex
TAMPA, FL 33619-4572

Address

3621 E. FOREST DR. GASTROENTEROLOGY ASSOICATES
INVERNESS, FL 34453

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.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
WEIN, DAVID ABRAHAM	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	99292	04/11/2025

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

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