

SINDHU JAYARAM

License Number: PA9116133

Data As Of 9/10/2025

Profession Physician Assistant

License Status PA9116133
License Status Clear/Active

Qualifications Dispensing Practitioner

Prescribing

License Expiration Date 1/31/2026
License Original Issue Date 07/01/2022
Address of Record 7600 Majorca Pl

Apt 3050

ORLANDO, FL 32819

Controlled Substance Prescriber Yes

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

Secondary Locations

Address

7455 Chancellor Dr STE 11700 ORLANDO, FL 32809

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
MAGNESS, DAVID JEREMIAH	SUPERVISING DISPENSING PRACTITIONER	OSTEOPATHIC PHYSICIAN	11617	09/06/2024

Name Relationship Profession License Effective Date

MAGNESS, DAVID JEREMIAH SUPERVISING PRESCRIBING PRACTITIONER OSTEOPATHIC PHYSICIAN 11617 09/16/2024

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

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