Florida HEALTH Department of Health

TROY DAVID LOWELL

License Number: ME65629

Data As Of 11/25/2026

Profession	Medical Doctor
License	ME65629
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2029
License Original Issue Date	02/04/1994
Address of Record	This practitioner does not have an address of record on file with the department. If you have any questions, please contact the department at (850) 488-0595.
Address of Record	NOT PRACTICING
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

No secondary locations found.

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	License	Effective Date
NORDELO, KIM ANTHONY	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	3498	10/16/2026

Name	Relationship	Profession	License	Effective Date
OCALA ORTHOPAEDIC CARE, PL	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	2704	7/31/2009
RAYFIELD, TINA ANNETTE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	2044	10/19/2026

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.

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