CHIN KYONG KIM MD

License Number: ME79541

Data As Of 6/21/2025		
Profession	Medical Doctor	
License	ME79541	
License Status	Clear/Active	
License Expiration Date	1/31/2026	
License Original Issue Date	12/28/1999	
Address of Record	1613 N. MILLS AVENUE	
	ORLANDO, FL 32803	
Controlled Substance Prescriber	Yes	
(for the Treatment of Chronic Non-		
malignant Pain)		
Discipline on File	No	
Public Complaint	No	

Secondary Locations

Address 2984 ALAFAYA TRAIL SUITE 1000 OVIEDO, FL 32765

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
HAWKINS, BROOKE LASSITER	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9113839 10/30/2023

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

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Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.