



CHRISTINA RENEE DUDLEY

License Number: PA9105184

Data As Of 8/11/2025

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|--|---|
| Profession | Physician Assistant |
| License | PA9105184 |
| License Status | Clear/Active |
| License Expiration Date | 1/31/2026 |
| License Original Issue Date | 09/17/2009 |
| Address of Record | 1920 DON WICKHAM RD. #220 Orlando Health Heart Institute CLERMONT, FL 34711 |
| Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain) | No |
| Discipline on File | No |
| Public Complaint | No |

Secondary Locations

Address

10000 W. Colonial Dr Suite 282 Suite 484
OCOE, FL 34761

Address

1222 South Orange Avenue 4th Floor Orlando Health Heart Institute
ORLANDO, FL 32806

Address

9401 Turkey Lake Rd
ORLANDO, FL 32819

Address

725 RODEL COVE Orlando Health Heart Institute
LAKE MARY, FL 32746

Address

521 W. SR 434, #307 Orlando Health Heart Institute
LONGWOOD, FL 32750

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 |
|----------------------|--------------------------------------|----------------|---------|----------------|
| BASHEER, SYED FAROOQ | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 107142 | 08/16/2016 |
| FARRELL, DION DUVAI | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 99270 | 08/16/2016 |

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

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