

MONIKA SOOD

License Number: PA9106191

Data As Of 8/21/2025

Profession Physician Assistant

License PA9106191
License Status Clear/Active
Qualifications Prescribing

Dispensing Practitioner

License Expiration Date 1/31/2026
License Original Issue Date 09/28/2011

Address of Record 5851 Timuquana Rd STE 401

Jacksonville FL 32210 JACKSONVILLE, FL 32256

Controlled Substance Prescriber No

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File

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.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
GREENE, MICHAEL ANDREW	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	13010	07/01/2021
KOWALSKI, SCOTT M	SUPERVISING DISPENSING PRACTITIONER	OSTEOPATHIC PHYSICIAN	16975	07/01/2021

Name	Relationship	Profession	License	Effective Date
KOWALSKI, SCOTT M	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	16975	07/01/2021
POWELL, KENNETH A	SUPERVISING DISPENSING PRACTITIONER	OSTEOPATHIC PHYSICIAN	10548	07/01/2021
POWELL, KENNETH A	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	10548	07/01/2021

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.