



## JASON ANTHONY MANSOUR

License Number: ME96393

Data As Of 12/22/2024

Profession	Medical Doctor
License	ME96393
License Status	CLEAR/Active
License Expiration Date	1/31/2026
License Original Issue Date	07/26/2006
Address of Record	BROWARD HEALTH MEDICAL CENTER 1625 SE 3RD AVE FT LAUDERDALE, FL 33316
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
APPEL, RACHEL	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9102351	4/24/2017
PETRUK, DIANA MICHELLE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9108430	11/22/2020

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

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