## JACLYN LORI MASCARIN

## License Number: PA9107043

Data As Of 11/21/2025

Profession Physician Assistant

License PA9107043
License Status Clear/Active
Qualifications Prescribing
License Expiration Date 1/31/2026
License Original Issue Date 01/08/2013

Address of Record 300 PINELLAS ST

CLEARWATER, FL 33756

Controlled Substance Prescriber No.

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

#### Address

8839 BRYAN DAIRY RD. BARDMOOR EMERGENCY CENTER

LARGO, FL 33777

#### Address

3231 McMullen Booth Rd SAFETY HARBOR, FL 34695

#### Address

601 Main st

DUNEDIN, FL 34698

# 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
WALDREP, NATHAN KEITH	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	58834	04/21/2020

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

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