LYDIA VALLADARES WALLACE

License Number: OS10688

Data As Of 7/25/2025			
Profession	Osteopathic Physician		
License	OS10688		
License Status	Clear/Active		
Qualifications	Dispensing Practitioner		
License Expiration Date	3/31/2026		
License Original Issue Date	06/09/2009		
Address of Record	2671 West Norvell Bryant Hwy		
	LECANTO, FL 34461		
Controlled Substance Prescriber	Yes		
(for the Treatment of Chronic Non-			
malignant Pain)			
Discipline on File	No		
Public Complaint	No		

Secondary Locations

Address 8064 Weeping Willow St BROOKSVILLE, FL 34613

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
KARDON, LAURIE ANN M D	SUPER-DOSUBORDINATE	MEDICAL DOCTOR	66557	8/9/2016

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

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