



## TIFFANY RENEE COMERIE

### License Number: PA9108164

Data As Of 7/25/2025

Profession	Physician Assistant
License	PA9108164
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2026
License Original Issue Date	09/04/2014
Address of Record	5000 W OAKLAND PARK BLVD FORT LAUDERDALE, FL 33313
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### Address

401 NW 42nd Ave Plantation General Hospital  
PLANTATION, FL 33317

#### Address

1100 NW 95TH ST. NORTH SHORE MEDICAL CENTER  
MIAMI, FL 33150

#### Address

21644 STATE ROAD 7  
BOCA RATON, FL 33428

### 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
HAROW, B CORY	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	92932	04/21/2025

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

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