# **BRIAN MITCHELL PARNES**

## License Number: ME117474

Data As Of 7/29/2025

Profession Medical Doctor
License ME117474
License Status Clear/Active

Qualifications STATE OF PRINCIPAL LICENSURE

License Expiration Date 1/31/2026
License Original Issue Date 09/05/2013

Address of Record 7069 Phillips Cove Ct ORLANDO, FL 32819

Controlled Substance Prescriber No

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

#### Address

1173 Blackwood Ave OCOEE, FL 34761

#### Address

17323 Pagonia Rd #227 CLERMONT, FL 34711

## 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
BENNETT, STEPHANIE RENEE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105981	10/12/2020
BRUEFACH, TINA MARIE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	2755	2/16/2023

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

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