#### ADETOLA OLALEKAN-OLUSEGUN AJIBADE

## License Number: ME121847

Data As Of 6/7/2025

Profession Medical Doctor
License ME121847
License Status CLEAR/Active

Qualifications Dispensing Practitioner

License Expiration Date 1/31/2027 License Original Issue Date 10/07/2014

Address of Record 3900 NORTH HAVERHILL ROAD

UNIT 222970

Yes

WEST PALM BEACH, FL 33422

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

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
DUQUESNAY, DANIELLE AMANDA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9108492 4/22/2022
INNIS, JAMIE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111601 4/22/2022

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

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