### PETER GEORGE ALEXANDROV

# License Number: ME136233

Data As Of 10/23/2025

Profession Medical Doctor License ME136233 License Status Clear/Active License Expiration Date 1/31/2026 License Original Issue Date 04/27/2018

Address of Record Bld 1329 University of Florida

Department of Emergency Medicine

1515 SW Archer Road GAINESVILLE, FL 32610

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

#### Address

Shandscair 3 333 N Bryon Butler PKWY

PERRY, FL 32347

#### Address

Shandscair 2 The Villages Hospital ED / Shandscair Su 1450 El Camino Real

THE VILLAGES, FL 32159

#### Address

Shandscair 1 2101 SW 16th Ave

GAINESVILLE, FL 32608

### Address

7900 SE 135th St

SUMMERFIELD, FL 34491

#### Address

4701 NE 40th Terrace GAINESVILLE, FL 32609

# 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
FITZPATRICK, DESMOND EMMETT M	SUBORDINATE	MEDICAL DOCTOR	120756	7/1/2020
KAZAR, JAMIE LYNN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9117682	9/20/2023
SANCHEZ, DANIELA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9117523	9/11/2023
SHANDSCAIR, SHANDS HOSPITAL	SERVICE PROVIDER	EMS SERVICE PROVIDER ALS	103	9/30/2025
SUCKOW, WENDY SUE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101731	1/10/2023

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

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