



WILLIAM ALEXANDER MAHONEY

License Number: ME160726

Data As Of 12/3/2024

Profession	Medical Doctor
License	ME160726
License Status	CLEAR/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2025
License Original Issue Date	01/30/2023
Address of Record	5985 Silver Falls Run Suite 101 SARASOTA, FL 34202
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

5741 Bee Ridge Rd Suite 450 SARASOTA
SARASOTA, FL 34233

Address

5504 Pinebrook Rd Suite 201
NORTH VENICE, FL 34275

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
LAMBERT, CHASE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111810	9/27/2023
THOMPSON, MEGAN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111631	9/27/2023

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

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