



DON ANTON DAYANTHA WISIDAGAMA

License Number: PA9113883

Data As Of 4/25/2026

| | |
|--|--|
| Profession | Physician Assistant |
| License | PA9113883 |
| License Status | Clear/Active |
| Qualifications | Prescribing Dispensing Practitioner |
| License Expiration Date | 1/31/2028 |
| License Original Issue Date | 12/04/2020 |
| Address of Record | 2438 S Kirkman Rd ORLANDO, FL 32811 |
| Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain) | No |
| Discipline on File | No |
| Public Complaint | No |

Secondary Locations

[Address](#)

5102 W SR 46
SANFORD, FL 32771

[Address](#)

901 Currency Cir, Unit 1001
LAKE MARY, FL 32746

[Address](#)

7460 University Blvd, Ste 110
WINTER PARK, FL 32792

[Address](#)

4670 Marigold Ave
POINCIANA, FL 34758

[Address](#)

1328 N Woodland Blvd
DELAND, FL 32720

[Address](#)

8972 Turkey Lake Rd South Ste A400
ORLANDO, FL 32819

[Address](#)

5845 Winter Garden Vineland Rd
WINDERMERE, FL 34786

[Address](#)

628 Cagan View Rd; Ste. 3&4
CLERMONT, FL 34714

[Address](#)

805 County Rd 466
LADY LAKE, FL 32159

[Address](#)

2438 S Kirkman Rd
ORLANDO, FL 32811

[Address](#)

92 E Mitchell Hammock Rd #1006
OVIEDO, FL 32765

Address

13935 Landstar Blvd #150
ORLANDO, FL 32824

Address

410 E Altamonte Dr #1020
ALTAMONTE SPRINGS, FL 32701

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 |
|-----------------------------|--------------------------------------|-----------------------|---------|----------------|
| GOLGOTIU, ADRIAN DAN | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 91383 | 02/02/2024 |
| GORSTEIN, JAY IRWIN | SUPERVISING PRESCRIBING PRACTITIONER | OSTEOPATHIC PHYSICIAN | 15081 | 07/01/2023 |
| SANCHEZ-HERRERA, PEDRO JOSE | SUPERVISING DISPENSING PRACTITIONER | MEDICAL DOCTOR | 134103 | 11/01/2025 |
| SANCHEZ-HERRERA, PEDRO JOSE | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 134103 | 10/18/2023 |

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

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