



## MIRANDA MARIE POWELL

License Number: PA9118890

Data As Of 12/2/2024

Profession	Physician Assistant
License	PA9118890
License Status	CLEAR/Active
Qualifications	Dispensing Practitioner Prescribing
License Expiration Date	1/31/2026
License Original Issue Date	06/13/2024
Address of Record	564 Channelside Dr TAMPA, FL 33602
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

## Secondary Locations

### Address

2810 W M.L.K Jr Blvd  
TAMPA, FL 33607

### Address

11969 Sheldon Road  
TAMPA, FL 33626

### Address

4505 Gunn Hightway  
TAMPA, FL 33624

### Address

11406 US Hwy 301 S  
RIVERVIEW, FL 33578

### Address

6182 N US Highway 41  
APOLLO BEACH, FL 33572

### Address

5464 Lithia Pinecrest Drive  
LITHIA, FL 33547

### Address

16521 US Hwy 301 S  
SUN CITY CENTER, FL 33573

### Address

799 W Lumsden Rd  
BRANDON, FL 33511

### Address

3301 W. Gandy Blvd  
TAMPA, FL 33611

### Address

5504 Gateway Blvd  
WESLEY CHAPEL, FL 33544

### Address

303 W Palm Ave  
TAMPA, FL 33602

### Address

7601 Seminole Blvd  
SEMINOLE, FL 33772

### Address

3251 66th St. North  
SAINT PETERSBURG, FL 33710

### Address

40545 US Hwy 19N Unit A  
TARPON SPRINGS, FL 34689

### Address

4949 4th Street N.  
SAINT PETERSBURG, FL 33703

### Address

13531 State Road 54  
ODESSA, FL 33556

### Address

13856 N Dale Mabry Hwy  
TAMPA, FL 33618

### Address

19027 Wingshooter Way  
LUTZ, FL 33558

### Address

22945 State Road 54  
LUTZ, FL 33549

## 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
NANDA, PAUL KALRA	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	117861	07/24/2024
NANDA, PAUL KALRA	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	117861	07/24/2024

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

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of

Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.

---