



## SUBATHA SUTHAKARAN

License Number: PA9119933

Data As Of 1/26/2026

Profession	Physician Assistant
License	PA9119933
License Status	Clear/Active
Qualifications	Prescribing Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	02/28/2025
Address of Record	5121 Rue Vendome LUTZ, FL 33558
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	Yes
Discipline on File	No
Public Complaint	No

## Secondary Locations

### Address

3301 W. Gandy Blvd  
TAMPA, FL 33611

### Address

5504 Gateway Blvd  
WESLEY CHAPEL, FL 33544

### Address

11969 Sheldon Road  
TAMPA, FL 33626

### Address

4505 Gunn Highway  
TAMPA, FL 33624

### Address

11406 US Hwy 301 S  
RIVERVIEW, FL 33578

### 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

799 W Lumsden Rd  
BRANDON , FL 33511-6261

### Address

16521 US Hwy 301 S  
WIMAUMA , FL 33573

### Address

564 Channelside Dr  
TAMPA, FL 33602

**Address**

5464 Lithia Pinecrest Drive

LITHIA, FL 33547

**Address**

40545 US Hwy 19N Unit A

TARPON SPRINGS, FL 34689

**Address**

6182 N US Highway 41

APOLLO BEACH, FL 33572

**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**

2810 W M.L.K. Jr Blvd

TAMPA, FL 33607

**Address**

22945 State Road 54

LUTZ, FL 33549

**Address**

19027 Wingshooter Way

LUTZ, FL 33558

## 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	06/17/2025
NANDA, PAUL KALRA	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	117861	06/17/2025

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

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