



## JERE JOSEPH MAMMINO DO

### License Number: OS6033

Data As Of 4/30/2026

Profession	Osteopathic Physician
License	OS6033
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	3/31/2028
License Original Issue Date	12/10/1990
Address of Record	1410 W. Broadway Suite 205 OVIEDO, FL 32765
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

No secondary locations found.

### 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	Effective License Date
GALLEGO, SHEILA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9114983 12/1/2024

Name	Relationship	Profession	License	Effective Date
LEAVITT MEDICAL GROUP	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3095	1/28/2010
LEAVITT MEDICAL GROUP	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3094	1/28/2010
LEAVITT MEDICAL GROUP	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3093	1/28/2010
NEY, CHRISTOPHER ALLAN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9115352	4/10/2025
NIEVES, BRANDON JOSHUA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107503	7/8/2016

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.

## Secondary Locations

No secondary locations found.

## 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
GALLEGO, SHEILA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9114983	12/1/2024
LEAVITT MEDICAL GROUP	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3095	1/28/2010
LEAVITT MEDICAL GROUP	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3094	1/28/2010

Name	Relationship	Profession	License	Effective Date
LEAVITT MEDICAL GROUP	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3093	1/28/2010
NEY, CHRISTOPHER ALLAN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9115352	4/10/2025
NIEVES, BRANDON JOSHUA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107503	7/8/2016

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.