#### **PURNA C PRASAD**

#### License Number: PS57848

Data As Of 6/13/2025

Profession Pharmacist License PS57848 License Status CLEAR/Active

Qualifications Certified To Administer Immunizations

Test and Treat Certification

License Expiration Date 9/30/2025

License Original Issue

06/29/2018 Date

Address of Record 21613 Violet Periwinkle Dr

Land O Lakes

LAND O LAKES, FL 34637

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

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