



## DANIELLE NICOLE DEAN

### License Number: PA9103910

Data As Of 12/15/2025

|  |   |
|--|---|
| Profession   | Physician Assistant   |
| License  | PA9103910   |
| License Status   | Clear/Active  |
| Qualifications   | Prescribing   |
| License Expiration Date  | 1/31/2026   |
| License Original Issue Date  | 09/13/2006  |
| Address of Record  | 1210 SOUTH OLD DIXIE HWY<br>JUPITER MEDICAL CENTER<br>JUPITER, FL 33458 |
| Controlled Substance Prescriber<br>(for the Treatment of Chronic Non-malignant Pain) | No  |
| Discipline on File   | Yes   |
| Public Complaint   | Yes   |

### Secondary Locations

No secondary locations found.

### Discipline/Admin Action

#### Emergency Actions

No Emergency Actions Found

#### Discipline Cases

| Name                  | License | Profession      | City    | State | Case #    | Action Taken               |
|-----------------------|---------|-----------------|---------|-------|-----------|----------------------------|
| DEAN, DANIELLE NICOLE | 9103910 | PHYSICIAN ASSIS | JUPITER | FL    | 202107510 | OBLIGATION(S)<br>SATISFIED |

#### Public Complaints

| Name                  | License | Profession             | City    | State | Case #    | Action Taken |
|-----------------------|---------|------------------------|---------|-------|-----------|--------------|
| DEAN, DANIELLE NICOLE | 9103910 | PHYSICIAN<br>ASSISTANT | JUPITER | FL    | 202107510 | AC FILED     |

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 |
|----------------------------|--------------------------------------|----------------|---------|----------------|
| BOWRY, RIDDHI MD           | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 110397  | 04/30/2020     |
| CHANGELA, DHRUPA S         | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 121378  | 08/28/2021     |
| HABER-KUO, SHERYL ANN      | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 72323   | 08/11/2021     |
| HICKS, JOHN O'BRYAN        | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 113270  | 02/15/2016     |
| INGEMAN, JEFFREY EDWARD MD | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 66023   | 02/16/2017     |
| PROSE, CHRISTINA G         | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 137610  | 07/23/2021     |
| REYES-FARINAS, PEDRO       | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 95749   | 04/30/2020     |

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

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