ALLISON LYNSEY ESPOSITO

License Number: PA9104196

Data As Of 6/13/2025

Profession Physician Assistant

License PA9104196
License Status CLEAR/Active
Qualifications Prescribing
License Expiration Date 1/31/2026
License Original Issue Date 06/26/2007

Address of Record 9400 TURKEY LAKE ROAD

DR. PHILLIPS HOSPITAL 10900 WONDER LANE ORLANDO, FL 32819

Controlled Substance Prescriber No

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

Secondary Locations

Address

9400 TURKEY LAKE ROAD DR. P. PHILLIPS HOSPITAL ORLANDO, FL 32819

Address

1414 S. ORANGE AVE ORLANDO REGIONAL MEDICAL CENTER

ORLANDO, FL 32806

Address

555 W SR 434 SOUTH SEMINOLE HOSPITAL

LONGWOOD, FL 32750

Address

92 W MILLER ST APHC

ORLANDO, FL 32806

Address

1900 DON WICKHAM DR. SOUTH LAKE HOSPITAL

CLERMONT, FL 34711

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.

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