### JORGE IGNACIO ACEVEDO MD

# License Number: ME77843

Data As Of 6/25/2025

Profession Medical Doctor
License ME77843
License Status Clear/Active

Qualifications Dispensing Practitioner

License Expiration Date 1/31/2026
License Original Issue Date 04/21/1999

Address of Record 2627 RIVERSIDE AVENUE,

#300

3RD FLOOR

JACKSONVILLE, FL 32204

Controlled Substance Prescriber Yes

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

### Address

232 PONTE VEDRA PARK DRIVE PONTE VEDRA, FL 32082

#### Address

10475 CENTURION PARKWAY N. #220

JACKSONVILLE, FL 32216

### Address

4565 US Highway 17, Ste. 200 FLEMING ISLAND, FL 32003

#### Address

15255 MAX LEGGETT PRKWY, Suite 5300

JACKSONVILLE, FL 32218

# 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
DUFFY, GAVAN PATRICK MD	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	80485	02/19/2021

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

# **Subordinate Practitioners**

Name	Relationship	Profession	License	Effective Date
CENTER FOR BONE AND JOINT SURGERY	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT		1/27/2010
PEPPERS, STEPHEN ANDREW	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9106457	12/15/2020
PEPPERS, STEPHEN ANDREW	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9106457	11/20/2024

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

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