



SUPRITH BADARINATH

License Number: ME80727

Data As Of 4/19/2025

Profession	Medical Doctor
License	ME80727
License Status	CLEAR/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2027
License Original Issue Date	07/11/2000
Address of Record	2 SHIRCLIFF WAY Mary Virginia Terry Cancer Center JAX, FL 32204
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

725 Skymarks Drive Suite 10-1
JACKSONVILLE, FL 32218

Address

1658 St Vincent's Way Suite 230
MIDDLEBURG, FL 32068

Address

300 Elizabeth Way Suite 230
SAINT JOHNS, FL 32259

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
DODANI, NAIMISHA P	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9102067	10/12/2017
DODANI, NAIMISHA P	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9102067	10/2/2017
INTEGRATED COMMUNITY ONCOLOGY NETWORK LL	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3150	1/21/2010
PLOTKIN, CHERYL SCHLESINGER	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	2202	11/25/2015

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

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