



AMANDA LEE ROGAN

License Number: PA9108155

Data As Of 4/20/2026

Profession	Physician Assistant
License	PA9108155
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2028
License Original Issue Date	09/04/2014
Address of Record	5979 Vineland Rd STE 101 ORLANDO, FL 32819
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

5555 E SR 44 unit 2
WILDWOOD, FL 34785

Address

9400 TURKEY LAKE RD. DR. PHILLIPS HOSPITAL
ORLANDO, FL 32819

Address

6900 TURKEY LAKE RD, SUITE 2-5 ADVANCED SURGERY CENTER OF ORLANDO, LLC
ORLANDO, FL 32819

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
DINH, NAM	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	131672	02/13/2020
NGUYEN, VUONG BINH	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	83185	02/13/2020
STEELE, JOHN LESLIE	SUPERVISING PRESCRIBING PRACTITIONER	PHYSICIAN ASSISTANT	2680	01/02/2024

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

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.

Secondary Locations

Address

5555 E SR 44 unit 2
WILDWOOD, FL 34785

Address

9400 TURKEY LAKE RD. DR. PHILLIPS HOSPITAL
ORLANDO, FL 32819

Address

6900 TURKEY LAKE RD, SUITE 2-5 ADVANCED SURGERY CENTER OF ORLANDO, LLC
ORLANDO, FL 32819

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
DINH, NAM	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	131672	02/13/2020
NGUYEN, VUONG BINH	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	83185	02/13/2020
STEELE, JOHN LESLIE	SUPERVISING PRESCRIBING PRACTITIONER	PHYSICIAN ASSISTANT	2680	01/02/2024

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

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of

Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.
