#### MICHAEL DAVID KUCZKOWSKI

### License Number: PA2852

Data As Of 8/25/2025

Profession Physician Assistant

License PA2852 License Status Clear/Active Qualifications Prescribing License Expiration Date 1/31/2026 License Original Issue Date 01/05/1995 Address of Record 4201 Belfort Rd

JACKSONVILLE, FL 32216

Controlled Substance Prescriber No

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No **Public Complaint** No

# **Secondary Locations**

#### Address

1 Shercliff Way St. Vincents Medical Center JACKSONVILLE, FL 32205

1580 BRANAN FIELD ST VINCENT MEDICAL CENTER CLAY COUNTY RIVERSIDE MIDDLEBURG, FL 32068

### 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
GEHRING, JEFFREY SCOTT MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	97562	09/30/2023

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

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