



CHELSIE LEIGH LUCAS

License Number: PA9110798

Data As Of 11/21/2024

Profession	Physician Assistant
License	PA9110798
License Status	CLEAR/Active
Qualifications	Dispensing Practitioner Prescribing
License Expiration Date	1/31/2026
License Original Issue Date	10/02/2017
Address of Record	410 E SR-436 Unit 1020 ALTAMONTE SPRINGS, FL 32701
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

No secondary locations found.

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
BOVELL, DON WALDO MD	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	81076	10/10/2019
BOVELL, DON WALDO MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	81076	02/09/2017
CHUA, RAYMUND MORELOS	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	95592	11/14/2023

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

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