Florida HEALTH Department of Health

VANESSA GUILLEN

License Number: PA9113842

Data As Of 11/21/2026

Profession	Physician Assistant
License	PA9113842
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2028
License Original Issue Date	11/17/2020
Address of Record	1065 NE 125th Street NORTH MIAMI, FL 33161
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address
7201 N University Drive Un Hospital Medical Ctr
TAMARAC, FL 33321

Address
5301 S Congress Avenue JFK Medical Ctr-North Campus
ATLANTIS, FL 33462

Address
1601 N Palm Avenue Suite 211 Compass Health Systems, PA
PEMBROKE PINES, FL 33026-3204

Address
2801 North Street Road 7 HCA Florida NW Hospital
MARGATE, FL 33063

Address
2201 45th Street HCA Florida University Hospital
WEST PALM BEACH, FL 33407

Address
3476 South University Drive HCA Florida University Hospital
DAVIE, FL 33328

Address
1100 NW 95th Street Steward Florida Medical Center
MIAMI, FL 33150

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
DE SOUZA MORAIS, MICHELE	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	142733	12/19/2022
GREENSTEIN, YAKOV	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	114006	12/19/2022
WATNICK, JERETT YALE	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	15560	12/21/2022

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

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