KYLIE WINQUIST

License Number: PA9116022

Data As Of 8/25/2025

Profession Physician Assistant

License PA9116022
License Status Clear/Active
Qualifications Prescribing
License Expiration Date 1/31/2026
License Original Issue Date 06/02/2022

Address of Record 701 W Plymouth Avenue

Advent Health Deland DELAND, FL 32720-3236

Controlled Substance Prescriber N

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

Secondary Locations

Address

85112 Williamson Blvd Advent Health Port Orange

PORT ORANGE, FL 32128-6101

Address

60 Memorial Medical Parkway AdventHealth Palm Coast

PALM COAST, FL 32164-5980

Address

401 Palmetto Street AdventHeatlh New Smyrna

NEW SMYRNA BEACH, FL 32168

Address

1055 Saxon Blvd Advent Health Fish Memorial

ORANGE CITY, FL 32763-8568

Address

3120 Howland Blvd Advent Health Deltona

DELTONA, FL 32725-2905

Address

301 Memorial Medical Pkwy AdventHealth Daytona

DAYTONA BEACH, FL 32117

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:

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
MCNAMEE, JUSTIN JAMES	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	12888	05/27/2022

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.