# JAMES HARLEN LAWRENCE

# License Number: PA9118641

Data As Of 8/5/2025

Profession Physician Assistant

License PA9118641
License Status Clear/Active
Qualifications Prescribing

**Dispensing Practitioner** 

No

License Expiration Date 1/31/2026
License Original Issue Date 03/22/2024

Address of Record 799 W Lumsden Rd. BRANDON, FL 33511

Controlled Substance Prescriber (for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

#### Address

11406 S. US Highway US-301 RIVERVIEW, FL 33578

## Address

16521 US-301

WIMAUMA, FL 33598

#### Address

5504 Gateway Blvd.

WESLEY CHAPEL, FL 33544

## Address

4505 Gunn Hwy.

TAMPA, FL 33624

### Address

11969 Sheldon Rd.

TAMPA, FL 33626

## Address

5464 Lithia Pinecrest Dr.

LITHIA, FL 33547

# Address

303 W. Palm Ave.

TAMPA, FL 33602

## Address

564 Channelside Dr.

TAMPA, FL 33602

## Address

3301 W. Gandy Blvd.

TAMPA, FL 33611

#### Address

3251 66th Street North

SAINT PETERSBURG, FL 33710

# Address

7601 Seminole Blvd.

SEMINOLE, FL 33772

#### Address

40545 US Hwy. 19 N.

TARPON SPRINGS, FL 34689

#### Address

6182 N. US Hwy. 41

APOLLO BEACH, FL 33572

#### Address

2810 W. Martin Luther King Jr.

**TAMPA, FL 33607** 

## Address

13856 N. Dale Mabry Hwy.

**TAMPA, FL 33618** 

#### Address

4949 4th Street N.

SAINT PETERSBURG, FL 33703

#### Address

22945 State Rd. 54

LUTZ, FL 33549

#### Address

13531 State Rd. 54

ODESSA, FL 33556

# 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
LINZER, HOWARD	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	7727	04/08/2025
NANDA, PAUL KALRA	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	117861	04/10/2024
NANDA, PAUL KALRA	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	117861	04/10/2024
SALAZAR, GUILLERMO ELY M D	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	78930	04/08/2025

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

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