MICHAEL MARK LEIGHTON MD

License Number: ME66635

Data As Of 6/9/2025

Profession Medical Doctor License ME66635 License Status CLEAR/Active

Qualifications Dispensing Practitioner

License Expiration Date 1/31/2027 License Original Issue Date 07/07/1994

Address of Record 4215 BURNS ROAD

SUITE 100

PALM BEACH GARDENS, FL 33410

Controlled Substance Prescriber (for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No **Public Complaint** No

Secondary Locations

7701 Southern Blvd Suite 100 WEST PALM BCH, FL 33411

Address

1411 N FLAGLER DRIVE Suite 9800 WEST PALM BEACH, FL 33401

Address

2055 Military Trail Suite 200 JUPITER, FL 33458

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.

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
HAGAN-BZURA, KELSEY LOUISE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9112977	1/14/2022
PALM BEACH ORTHOPAEDIC INSTITUTE, P.A.	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	779	12/24/2008
PALM BEACH ORTHOPAEDIC INSTITUTE, P.A.	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	780	12/24/2008
PALM BEACH ORTHOPAEDIC INSTITUTE, P.A.	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	781	12/24/2008

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.