



## CODY EDWARD THOMPSON

License Number: PA9103535

Data As Of 4/23/2026

Profession	Physician Assistant
License	PA9103535
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2028
License Original Issue Date	10/11/2005
Address of Record	625 6TH AVE SOUTH SUITE 450 ST PETERSBURG, FL 33701
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### Address

5881 RAND BLVD. CHILDREN'S ORTHOPAEDIC & SCOLIOSIS SURGERY ASSOC.  
SARASOTA, FL 34238

#### Address

3850 TAMPA RD. CHILDREN'S ORTHOPAEDIC & SCOLIOSIS SURGERY ASSOC.  
PALM HARBOR, FL 34684

#### Address

4443 ROWAN RD. CHILDREN'S ORTHOPAEDIC & SCOLIOSIS SURGERY ASSOC.  
NEW PORT RICHEY, FL 34653

#### Address

3440 W. DR. MLK JR. STE 200 CHILDREN ORTHOPAEDIC & SCOLIOSIS SURGERY ASSOC.  
TAMPA, FL 33607

### 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
BENFANTI, PAUL LAWRENCE	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	107895	02/17/2017
BLAND, DANIEL CALEB	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	133230	10/05/2017
HAHN, GREGORY VERL MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	78419	02/22/2017
NEUSTADT, JEFFREY BRUCE MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	60369	02/22/2017
PHILLIPS, LEE GARRIT	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	121319	02/22/2017
WARNICK, DREW EUGENE	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	106837	02/22/2017

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.

## Secondary Locations

### Address

5881 RAND BLVD. CHILDREN'S ORTHOPAEDIC & SCOLIOSIS SURGERY ASSOC.  
SARASOTA, FL 34238

### Address

3850 TAMPA RD. CHILDREN'S ORTHOPAEDIC & SCOLIOSIS SURGERY ASSOC.  
PALM HARBOR, FL 34684

### Address

4443 ROWAN RD. CHILDREN'S ORTHOPAEDIC & SCOLIOSIS SURGERY ASSOC.  
NEW PORT RICHEY, FL 34653

### Address

3440 W. DR. MLK JR. STE 200 CHILDREN ORTHOPAEDIC & SCOLIOSIS SURGERY ASSOC.  
TAMPA, FL 33607

## 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
BENFANTI, PAUL LAWRENCE	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	107895	02/17/2017
BLAND, DANIEL CALEB	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	133230	10/05/2017
HAHN, GREGORY VERL MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	78419	02/22/2017
NEUSTADT, JEFFREY BRUCE MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	60369	02/22/2017
PHILLIPS, LEE GARRIT	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	121319	02/22/2017
WARNICK, DREW EUGENE	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	106837	02/22/2017

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.