BRIAN MITCHELL LEE

License Number: ME79663

Data As Of 6/7/2025

Profession Medical Doctor
License ME79663
License Status REVOKED/
License Expiration Date 1/31/2016
License Original Issue Date 01/24/2000

Address of Record If further information is needed, please contact the Department of Health at (850) 488-

0595. Yes

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File Yes
Public Complaint Yes

Secondary Locations

Address

P.O. BOX 34307

PENSACOLA, FL 32507

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case#	Action Taken
LEE, BRIAN MITCHELL	79663	MEDICAL DOCTOR	PENSACOLA	FL	201400249	REVOCATION

Public Complaints

Name	License	Profession	City	State	Case#	Action Taken
LEE, BRIAN MITCHELL	79663	MEDICAL DOCTOR	PENSACOLA	FL	201400249	AC FILED
LEE, BRIAN MITCHELL	79663	MEDICAL DOCTOR	PENSACOLA	FL	201400249	AC FILED

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.

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