### MARTIN ANTONY FIDELIA

### License Number: PA9105354

Data As Of 8/13/2025

Profession Physician Assistant

License PA9105354
License Status Clear/Active
Qualifications Prescribing
License Expiration Date 1/31/2026
License Original Issue Date 01/12/2010

Address of Record 1800 SE Tiffany Ave

PORT SAINT LUCIE, FL 34952

Controlled Substance Prescriber Yes

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

## **Secondary Locations**

#### Address

7710 US Hwy 7710 US HIGHWAY 1 PORT SAINT LUCIE PORT SAINT LUCIE, FL 34952

## 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 |
|--------------------------|--------------------------------------|-----------------------|---------|----------------|
| FORD, ROBERT CHARLES III | SUPERVISING PRESCRIBING PRACTITIONER | OSTEOPATHIC PHYSICIAN | 12456   | 03/14/2016     |
| GAGEN, JAMES SHAWN       | SUPERVISING PRESCRIBING PRACTITIONER | OSTEOPATHIC PHYSICIAN | 10263   | 03/14/2016     |

| Name                  | Relationship                         | Profession     | License | Effective Date |
|-----------------------|--------------------------------------|----------------|---------|----------------|
| MCPHERSON, JOHN RAMEY | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 58708   | 03/14/2016     |

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.