JAMIE GRIFFIN HERR

License Number: PA9105359

Data As Of 7/7/2025

Profession Physician Assistant

License PA9105359
License Status Clear/Active
Qualifications Prescribing

Dispensing Practitioner

License Expiration Date 1/31/2026
License Original Issue Date 01/13/2010
Address of Record 2100 NE 30th Ave

Bldg 300

OCALA, FL 34470

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

Secondary Locations

No secondary locations found.

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 Effectiv	ve Date
O'MALLEY-KEYES, JULIA MEGAN MD	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	102993 07/19/2	018
O'MALLEY-KEYES, JULIA MEGAN MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	102993 07/19/2	018

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

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