### **DIMITRY MICHAEL PALCESKI**

### License Number: OS9674

Data As Of 8/5/2025

Profession Osteopathic Physician

License Status OS9674

Clear/Active

Qualifications Dispensing Practitioner

License Expiration Date 3/31/2026
License Original Issue Date 10/14/2005

Address of Record 440 W. Morse Blvd

WINTER PARK, FL 32789

Controlled Substance Prescriber No

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

## **Secondary Locations**

#### Address

875 Outer Road Reflections Dermatology & Ctr for Skin C ORLANDO, FL 32814

## 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
ARTHUR, ALLISON KAYE	SUPERVISOR	MEDICAL DOCTOR	113349	04/06/2015
CROTTY, CHRISTOPHER PAUL	SUPERVISOR	MEDICAL DOCTOR	50669	04/06/2015

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

# **Subordinate Practitioners**

Name	Relationship	Profession	License	Effective Date
MOSEY, NICOLE TAYLOR	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9119773	3 4/16/2025
MOSEY, NICOLE TAYLOR	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9119773	3 4/16/2025
REFLECTION DERMATOLOGY & CENTER FOR SKIN	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3217	2/2/2010

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.