JOHN PETER CHRISTENSEN

License Number: ME92135

Data As Of 4/27/2025

Profession Medical Doctor
License ME92135
License Status REVOKED/
License Expiration Date 1/31/2013
License Original Issue Date 12/14/2004

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

0595. No

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File Yes
Public Complaint Yes

Secondary Locations

Address

542 N. RIDGEWOOD AVE DAYTONA BEACH, FL 32114

Address

1731 S.W. GATLIN BLVD

PORT SAINT LUCIE, FL 34953-2757

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case#	Action Taken
CHRISTENSEN, JOHN PETER	92135	MEDICAL DOCTOR	WEST PALM BEAC	H FL	201111153	REVOCATION

Public Complaints

Name	License	Profession	City	State	Case#	Action Taken
CHRISTENSEN, JOHN PETER	92135	MEDICAL DOCTOR	WEST PALM BEAC	H FL	201111153	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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