MORGANNE ELISE HEMINGER

License Number: PA9108230

Data As Of 8/20/2025

Profession Physician Assistant

License Status PA9108230

Clear/Active

Qualifications Dispensing Practitioner

License Expiration Date 1/31/2026
License Original Issue Date 09/11/2014

Address of Record 1500 E Hillsboro Blvd

Suite 107

DEERFIELD BEACH, FL 33441

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	Effective Date
MAY, DUSTIN WEBSTER CAMPBELL	SUPERVISING DISPENSING PRACTITIONER	OSTEOPATHIC PHYSICIAN	13262	05/06/2022

Name	Relationship	Profession	Effective License Date
MAY, DUSTIN WEBSTER	SUPERVISING PRESCRIBING	OSTEOPATHIC	13262 05/06/2022
CAMPBELL	PRACTITIONER	PHYSICIAN	

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

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