



## SHELBY FIELD JOHNSON

License Number: PA9111213

Data As Of 4/23/2026

Profession	Physician Assistant
License	PA9111213
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2028
License Original Issue Date	04/09/2018
Address of Record	601 E Rollins Street ORLANDO, FL 32803
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

## Secondary Locations

### Address

7727 Lake Underhill Road Advent Health East Orlando  
ORLANDO, FL 32822

### Address

200 N Lakemont Ave  
WINTER PARK, FL 32792

### Address

2100 Ocoee Apopka Road Advent Health Apopka  
APOPKA, FL 32703

### Address

2450 N Orange Blossom Trail Advent Health Kissimmee  
KISSIMMEE, FL 34744

### Address

400 Celebration Place Advent Health Celebration  
CELEBRATION, FL 34747

### Address

601 E Altamonte Dr Advent Health Altamonte  
ALTAMONTE SPRINGS, FL 32701

### Address

1000 Waterman Way Advent Health Waterman  
TAVARES, FL 32778

## Discipline/Admin Action

### Emergency Actions

No Emergency Actions Found

### Discipline Cases

No Discipline Found

### Public Complaints

No Public Complaint Found

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
OLIVEIRA, EDUARDO C CAMACHO MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	81926	12/15/2021

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.

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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

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