JOSEPH ADAM SUJKA

License Number: ME144490

Data As Of 8/4/2025		
Profession	Medical Doctor	
License	ME144490	
License Status	Clear/Active	
License Expiration Date	1/31/2026	
License Original Issue Date	03/04/2020	
Address of Record	12901 Bruce B Downs Blvd	
	Harbourside Medical Tower Suite 740-15	
	TAMPA, FL 33612	
Controlled Substance Prescriber	No	
(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.

Subordinate Practitioners

Name	Relationship	Profession	License Effective Date
DEWITT, MORGAN JUSTINE PA-C	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111990 10/4/2023
PERSAUD, AMANDA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9112348 10/4/2023
STRAHL, KATHERINE CLARICE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9118057 2/21/2024

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

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