



JAMIE JESSE JOHNSON

License Number: PA9111384

Data As Of 1/10/2026

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| Profession | Physician Assistant |
| License | PA9111384 |
| License Status | Clear/Active |
| Qualifications | Prescribing |
| License Expiration Date | 1/31/2028 |
| License Original Issue Date | 07/12/2018 |
| Address of Record | 951 N Washington Ave TITUSVILLE, FL 32796 |
| Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain) | Yes |
| Discipline on File | No |
| Public Complaint | No |

Secondary Locations

Address

401 Palmetto Street Advent Health New Smyrna
NEW SMYRNA BEACH, FL 32168

Address

60 Memorial Medical Parkway Advent Health Palm Coast
PALM COAST, FL 32164

Address

58112 Williamson Blvd AdventHealth Port Orange
PORT ORANGE, FL 32128

Address

701 W Plymouth Avenue Advent Health Deland
DELAND, FL 32720

Address

1055 Saxon Blvd Advent Health Fish Memorial
ORANGE CITY, FL 32763

Address

3120 Howland Blvd AdventHealth-Deltona
DELTONA, FL 32725

Address

6300 N Wickham Road Suite 101 Premier Urgent Care
MELBOURNE, FL 32940

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 | Effective License | Date |
|-----------------------------|--------------------------------------|-----------------------|-------------------|------------|
| BARRY, WAYNE S MD | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 51146 | 09/21/2018 |
| CANALIZO, JOHN BUCKLEY | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 67318 | 09/21/2018 |
| CANTU, MONICA EDITH | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 122370 | 09/21/2018 |
| HUGHES, KATHLEEN M MD | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 45813 | 09/21/2018 |
| PODHAJSKY, LINDSAY MARIE MD | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 117041 | 09/21/2018 |
| RAJAN, CHRISTOPHER HENRY | SUPERVISING PRESCRIBING PRACTITIONER | OSTEOPATHIC PHYSICIAN | 17613 | 02/04/2025 |
| RIGA, PETER J | SUPERVISING PRESCRIBING PRACTITIONER | OSTEOPATHIC PHYSICIAN | 10944 | 12/06/2022 |

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