MICHAEL DOUGLAS REES II

License Number: PA9112122

Data As Of 4/13/2025	
Profession	Physician Assistant
License	PA9112122
License Status	CLEAR/Active
Qualifications	Prescribing
	Dispensing Practitioner
License Expiration Date	1/31/2026
License Original Issue Date	04/03/2019
Address of Record	603 7th Street South
	Suite 360
	Emergency Physicians of St. Petersburg
	ST. PETERSBURG, FL 33701
Controlled Substance Prescriber	No
(for the Treatment of Chronic Non-	
malignant Pain)	
Discipline on File	No
Public Complaint	No

Secondary Locations

Address 701 6th St South SAINT PETERSBURG, FL 33701 Address 3070 Grand Ave PINELLAS PARK, FL 33781

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
GIRGIS, BETH ANN	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	92385	03/09/2020
GIRGIS, BETH ANN	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	92385	05/06/2019

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

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