HEATHER B WOOD

License Number: PA2109

Data As Of 8/21/2025

Profession Physician Assistant

License PA2109
License Status Clear/Active
Qualifications Prescribing
License Expiration Date 1/31/2026
License Original Issue Date 08/10/1989

Address of Record 4500 San Pablo Road

Mayo Clinic

JACKSONVILLE, FL 32224

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File Yes
Public Complaint No

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
WOOD, HEATHER B	2109	PHYSICIAN ASSIS	JACKSONVILLE	FL	201314611	DISCIPLINARY CITATION SATISFIED

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
BLOCK, ERNEST FRANCIS	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	60765	09/25/2017
SAMOTOWKA, MICHAEL ALEXANDER	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	133082	09/25/2017

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

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