



## HOLLIE JO HICKMAN

### License Number: OS9337

Data As Of 4/9/2025

Profession	Osteopathic Physician
License	OS9337
License Status	CLEAR/Active
Qualifications	Dispensing Practitioner
License Expiration Date	3/31/2026
License Original Issue Date	08/31/2004
Address of Record	209 PONTE VEDRA PARK DRIVE PONTE VEDRA BEACH, FL 32082
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### Address

4866 Big Island Drive #5 Ideal Image  
JACKSONVILLE, FL 32246

#### Address

5472 First Coast Highway #3  
FERNANDINA BEACH, FL 32034

#### Address

480 Town Plaza Ave #150  
PONTE VEDRA, FL 32081

#### Address

11512 Lake Mead Avenue #513  
JACKSONVILLE, FL 32256

#### Address

304 Ashourian Ave Unit 107  
ST AUGUSTINE, FL 32092

#### Address

314 Paseo Reyes Dr. St.  
ST AUGUSTINE, FL 32095

### 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
<a href="#">OLDENBURG, KATELYN ELIZABETH</a>	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9106063	1/19/2024
<a href="#">SPARROW, TIFFANY MOMOKO</a>	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9116575	11/11/2022

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

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