

DMITRIY BORISOVICH MODEL

License Number: ME88320

Data As Of 8/5/2025

Profession Medical Doctor
License ME88320
License Status Clear/Active

Qualifications Dispensing Practitioner

License Expiration Date 1/31/2027 License Original Issue Date 07/30/2003

Address of Record 1633 RACETRACK ROAD 101

SUITE 101

Yes

AVECINA MEDICAL

JACKSONVILLE, FL 32259

Controlled Substance Prescriber Yes

(for the Treatment of Chronic Non-

malignant Pain)

Authorized to Order (Medical and

Low-THC Cannabis)

Discipline on File No Public Complaint No

Secondary Locations

Address

4160 Southside Bld 10 JACKSONVILLE, FL 32216

Address

3600 SW Archer RD A-1 ORANGE PARK, FL 32608

Address

2020 Kingsley Ave 1A ORANGE PARK, FL 32073

Address

1811 Blanding Bld 101 MIDDLEBURG, FL 32068

Address

5915 Normandy bld

JACKSONVILLE, FL 32205

Address

9850 APPLECROSS ROAD 106 SUITE 106

JACKSONVILLE, FL 32222

Address

7011 W Newberry Rd ,Ste B GAINESVILLE, FL 32605

Address

2800 SW College Rd, Suite 102

OCALA, FL 34474

Address

30 Epic Blvd ,Unit 100

SAINT AUGUSTINE, FL 32086

Address

105 Badger Park Dr ,Suite 8 S SAINT JOHNS , FL 32259

Address

4815 Sweetgrass Place, 201 JACKSONVILLE, FL 32224

Address

9925 San Jose Bld, Unit 1 JACKSONVILLE, FL 32257

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
CLAYTON, DANA RENEE	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9112109	10/5/2023
DONALDSON, MAEVE MCCLAM	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9108018	8/1/2024
DONALDSON, MAEVE MCCLAM	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9108018	8/1/2024
FIFER, NICOLE ELAINE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9108411	4/22/2016
HARRIS, FRANCESCA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9116092	10/28/2022
JACKSON, COURTNEY CARSON	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9116193	10/11/2022
JEAN, MELCHISEDEK	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9115291	2/14/2022
JEAN, MELCHISEDEK	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9115291	2/14/2022
KIGHT, MICHAEL DREW JR	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105828	2/12/2025
MCCARTHY, ELAINE MARY	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9115601	10/28/2024
MCCARTHY, ELAINE MARY	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9115601	10/28/2024
MUSTA-KINA, SONILA	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109193	12/28/2018
MUSTA-KINA, SONILA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109193	12/28/2018
RODRIGUEZ, IRINA	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105237	3/12/2025
RODRIGUEZ, IRINA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105237	3/12/2025
SCHROEDER, REGINA MARIE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9118245	6/12/2024
SIZEMORE, SULE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9110643	4/25/2022
WIERINGA, KIMBERLY MATTSON	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105525	5/31/2017

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