## **BRETT CHRISTOPHER PUCKETT**

## License Number: ME91111

Data As Of 12/26/2024

Profession Medical Doctor
License ME91111
License Status CLEAR/Active

Qualifications Dispensing Practitioner

License Expiration Date 1/31/2026 License Original Issue Date 07/30/2004

Address of Record 2627 RIVERSIDE AVENUE

# 300

Yes

JACKSONVILLE, FL 32204

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

### Address

10475 CENTURION PARKWAY N. Suite 220 JACKSONVILLE, FL 32216

### Address

232 PONTE VEDRA PARK DRIVE PONTE VEDRA, FL 32082

## Address

4565 US Highway 17 Ste 200 FLEMING ISLAND, FL 32003

### Address

15255 MAX LEGGETT PRKWY Suite 5300 JACKSONVILLE. FL 32218

## 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 |
|----------------------|--------------------------------|---------------------|---------|----------------|
| HAKIM, FARID ANTOINE | SUBORDINATE                    | MEDICAL DOCTOR      | 69963   | 8/24/2020      |
| MELDRUM, JACLYN TYO  | DISPENSING PHYSICIAN ASSISTANT | PHYSICIAN ASSISTANT | 9103502 | 6/21/2022      |

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

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