



## MICHAEL DAVID TALHOUK

### License Number: PA9109253

Data As Of 12/16/2025

Profession	Physician Assistant
License	PA9109253
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2028
License Original Issue Date	12/15/2015
Address of Record	2502 W St. Isabel St. Suite B TAMPA, FL 33607
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### Address

3503 East Frontage Rd  
TAMPA, FL 33607

#### Address

300 Pinellas Street MS 36 Morton Plant Hospital  
CLEARWATER, FL 33756

#### Address

3001 W DMLK Blvd St Joseph's Hospital  
TAMPA, FL 33607

#### Address

4211 VanDyke Road St Joseph's Hospital North  
LUTZ, FL 33558

#### Address

6901 Simmons Loop St Joseph's Hospital South  
RIVERVIEW, FL 33578

#### Address

6901 Simmons Loop  
RIVERVIEW, FL 33578

#### Address

4211 VanDyke Road  
LUTZ, FL 33558

### 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
WALDREP, NATHAN KEITH	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	58834	04/29/2020

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

## Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
GONNELLA, DAVID	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9114776	11/3/2021

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

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