



## BRIAN M. RIVARD

License Number: PA9111639

Data As Of 12/2/2024

Profession	Physician Assistant
License	PA9111639
License Status	CLEAR/Active
Qualifications	Prescribing
License Expiration Date	1/31/2026
License Original Issue Date	09/20/2018
Address of Record	3599 University Blvd S Bldg 300 JACKSONVILLE, FL 32216
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

## Secondary Locations

### Address

1350 13th Avenue South  
JACKSONVILLE, FL 32250

### Address

3599 University Blvd., S  
JACKSONVILLE, FL 32216

### Address

1900 Tebeau Street  
WAYCROSS, GA 31501

### Address

2001 Kingsley Avenue  
ORANGE PARK, FL 32073

### Address

800 Prudential Drive  
JACKSONVILLE, FL 32207

### Address

14550 St. Augustine Road  
JACKSONVILLE, FL 32258

### Address

3625 University Blvd., S  
JACKSONVILLE, FL 32216

### Address

3625 University Blvd., S  
JACKSONVILLE, FL 32216

## 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
ALSAHLI, HAITHAM	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	140232	08/28/2019
BEARDSLEY, SHANNON LEE	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	70257	07/18/2022
CUNNINGHAM, JAMES CHRISTOPHER	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	10705	08/28/2019
JOHN, CHRISTOPHER M	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	15940	08/28/2019
JOHNSON, CHARLES EDWARD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	110710	10/28/2022
KENT, AMANDA SUE	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	13930	02/06/2019
ROURA, DANIEL	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	133446	02/06/2019
TERHAAR, KENNETH	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	134708	03/18/2019

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

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.