



## MICHAELA BROOKE CARSON

License Number: PA9117511

Data As Of 12/15/2025

Profession	Physician Assistant
License	PA9117511
License Status	Clear/Active
Qualifications	Prescribing Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	06/05/2023
Address of Record	7321 Park Blvd PINELLAS PARK, FL 33781
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### Address

10735 SR 64 E  
BRADENTON, FL 34212

#### Address

2200 Tamiami Trail  
PORT CHARLOTTE, FL 33948-2177

#### Address

8849 State Road 52  
HUDSON, FL 34667-6742

#### Address

13256 STATE ROAD 54  
ODESSA, FL 33556

#### Address

34621 US HIGHWAY 19  
PALM HARBOR, FL 34684

#### Address

2404 US HIGHWAY 19  
HOLIDAY, FL 34691

#### Address

4332 Cortez Rd  
BRADENTON, FL 34210

#### Address

10500 Ulmerton Road, Suite 202  
LARGO, FL 33771-3544

#### Address

26812 North Hwy 19  
CLEARWATER, FL 33761-3405

#### Address

3030 4th St N  
SAINT PETERSBURG, FL 33704

#### Address

2420 Gulf to Bay Blvd, Suite 5  
CLEARWATER, FL 33765

Address

2200 Tamiami Trail  
PORT CHARLOTTE, FL 33948-2177

Address

10943 Causeway Blvd  
BRANDON, FL 33511

Address

2102 S. Dale Mabry Hwy  
TAMPA, FL 33629

Address

12105 W Linebaugh Ave, Unit 20  
TAMPA, FL 33626

Address

408 East Brandon Blvd  
BRANDON, FL 33511-5318

Address

3700 US Hwy 98 N, Suite 101  
LAKE LAND, FL 33809-3861

Address

13610 Bruce B. Downs Blvd  
TAMPA, FL 33613-4650

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
DAVIS, RANDAL LEE	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	110579	03/11/2025
WALLACE, RICHARD PETERKIN	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	85690	06/19/2023

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

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