Florida HEALTH Department of Health

ELIZABETH ANNE BURKETT

License Number: OS6882

Data As Of 11/1/2026

Profession	Osteopathic Physician
License	OS6882
License Status	Clear/Active
License Expiration Date	3/31/2028
License Original Issue Date	07/12/1994
Address of Record	16916 NW US Hwy 441 HIGH SPRINGS, FL 32643
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Discipline on File	No
Public Complaint	No

Secondary Locations

No secondary locations found.

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
CHIEFLAND MEDICAL CENTER	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3262	1/13/2010
CHIEFLAND MEDICAL CENTER, LLC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT		1/14/2009

Name	Relationship	Profession	License	Effective Date
DAWSON, JAMES CHRISTOPHER	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9119454	10/15/2024
HINCAPIE, CATALINA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9118973	2/11/2025
LEE, HEATHER HOBBS	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101298	4/29/2025
MCCARTHY, ESTHER	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9118977	8/20/2024
PEREZ, GABRIELLE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9122058	7/23/2026
ROSALES, DAVID	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9120589	10/6/2025
TANEJA, PRIYA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9121213	4/16/2026
VOIGHT, MARY ALLISON	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9121907	7/14/2026
WALTERS, SEAN WALTERS	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9122021	7/14/2026

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.

Secondary Locations

No secondary locations found.

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
CHIEFLAND MEDICAL CENTER	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3262	1/13/2010
CHIEFLAND MEDICAL CENTER, LLC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT		1/14/2009
DAWSON, JAMES CHRISTOPHER	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9119454	10/15/2024
HINCAPIE, CATALINA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9118973	2/11/2025
LEE, HEATHER HOBBS	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101298	4/29/2025
MCCARTHY, ESTHER	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9118977	8/20/2024
PEREZ, GABRIELLE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9122058	7/23/2026
ROSALES, DAVID	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9120589	10/6/2025
TANEJA, PRIYA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9121213	4/16/2026
VOIGHT, MARY ALLISON	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9121907	7/14/2026
WALTERS, SEAN WALTERS	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9122021	7/14/2026

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.