## KATHLEEN HAROWITZ MCMICHAEL

## License Number: PA9105881

Data As Of 12/7/2025

Profession Physician Assistant

License PA9105881 License Status Clear/Active Qualifications Prescribing License Expiration Date 1/31/2026 License Original Issue Date 01/10/2011

Address of Record 455 Pinellas Street

Suite 320

BayCare Medical Group, Inc CLEARWATER, FL 33756

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No **Public Complaint** No

## **Secondary Locations**

#### Address

300 PINELLAS STREET CLEARWATER, FL 33756

1201 5th Avenue N., Suite 402 BayCare Medical Group, Inc

SAINT PETERSBURG, FL 33705

#### Address

1200 7TH AVENUE N St. Anthony's Hospital

SAINT PETERSBURG, FL 33705

#### Address

1201 5th Avenue North Suite 402 SAINT PETERSBURG, FL 33705

## 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
KAYATTA, MICHAEL OWEN MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	136589	08/08/2018

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

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