



JANET MARIE PARSELL

License Number: PA9106056

Data As Of 12/14/2025

Profession	Physician Assistant
License	PA9106056
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2026
License Original Issue Date	07/06/2011
Address of Record	239 N. RIDGEWOOD AVENUE FLORIDA HEALTH CARE PLANS EDGEWATER, FL 32132
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	Yes
Discipline on File	Yes
Public Complaint	Yes

Secondary Locations

Address

1340 RIDGEWOOD AVENUE FLORIDA HEALTH CARE PLANS
HOLLY HILL, FL 32117

Address

350 NORTH CLYDE MORRIS BLVD. FLORIDA HEALTH CARE PALNS
DAYTONA BEACH, FL 32114

Address

937 N. SPRING AVENUE FLORIDA HEALTH CARE PLANS
DELAND, FL 32720

Address

461 S. NOVA RD. FLORIDA HEALTH CARE PLANS
ORMOND BEACH, FL 32174

Address

1182 OCEAN SHORE BLVD. FLORIDA HEALTH CARE PLANS
ORMOND BEACH, FL 32176

Address

1184 OCEAN SHORE BLVD. FLORIDA HEALTH CARE PLANS
ORMOND BEACH, FL 32176

Address

740 DUNLAWTON AVENUE FLORIDA HEALTH CARE PLANS
PORT ORANGE, FL 32127

Address

320 NORTH CLYDE MORRIS FLORIDA HEALTH CARE PLANS
DAYTONA BEACH, FL 32114

Address

201 NORTH CLYDE MORRIS BLVD. FLORIDA HEALTH CARE PLANS
DAYTONA BEACH, FL 32114

Address

309 & 315 PALM COAST PARKWAY FLORIDA HEALTH CARE PLANS
PALM COAST, FL 32137

Address

2777 ENTERPRISE RD. FLORIDA HEALTH CARE PLANS
ORANGE CITY, FL 32763

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
PARSELL, JANET MARIE	9106056	PHYSICIAN ASSIS	EDGEWATER	FL	201521675	OBLIGATION(S) SATISFIED

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
PARSELL, JANET MARIE	9106056	PHYSICIAN ASSISTANT	EDGEWATER	FL	201521675	AC FILED

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
GRIGG, JOHNSIE CAROL	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	47294	07/25/2016
GUPTA, ANJALI	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	87066	07/25/2016
LE, ELIZABETH ANN	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	99663	02/06/2019
MCCARTHY, GREGORY EDWARD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	121306	07/25/2016
MERZENICH, ANGELA RENATE	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	116431	07/25/2016
NIPPER, NEIL BAKER MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	108608	02/06/2019
QUARBERG, RACHEL LOVE	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	111754	07/25/2016
ROSATI, SAMUEL M	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	103357	07/25/2016
VARGHESE, MILI KURIAN SAOJI	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	114974	07/25/2016

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