



GEORGES-CHRIS WOODBRIDGE PA-C

License Number: PA9106907

Data As Of 8/4/2025

Profession	Physician Assistant
License	PA9106907
License Status	Military Active/
Qualifications	Prescribing Dispensing Practitioner
License Expiration Date	1/31/2026
License Original Issue Date	10/04/2012
Address of Record	US ARMY HEALTH CLINIC WIESBADEN, UNIT 24316, BOX 0059 APO, AE 09005-4316
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

2007 Palm Beach Lakes Blvd
WEST PALM BCH, FL 33409

Address

4570 Lantan Rd
LAKE WORTH, FL 33463

Address

6699 W. Boynton Beach Blvd., Ste. D44
BOYNTON BEACH, FL 33437

Address

601 Unton Blvd
DELRAY BEACH, FL 33444

Address

14701 S. Military Trail
DELRAY BEACH, FL 33484

Address

1625 S. Federal Hwy
BOYNTON BEACH, FL 33435

Address

11551 Southern Blvd, Ste 4
ROYAL PALM BEACH, FL 33411

Address

2272 N. Congress Ave
BOYNTON BEACH, FL 33426

Address

2007 Palm Beach Lakes Blvd
WEST PALM BEACH, FL 33409

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	Effective	
			License	Date
MAY, DUSTIN WEBSTER CAMPBELL	SUPERVISING DISPENSING PRACTITIONER	OSTEOPATHIC PHYSICIAN	13262	05/06/2022
MAY, DUSTIN WEBSTER CAMPBELL	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	13262	05/06/2022

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

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