

**STATE OF FLORIDA
DIVISION OF ADMINISTRATIVE HEARINGS**

DEPARTMENT OF HEALTH, BOARD
OF OSTEOPATHIC MEDICINE,

Petitioner,

vs.

Case No. 24-4162PL

HEIDI MARJAANA LAHTENMAA,
D.O.,

Respondent.

_____ /

RECOMMENDED ORDER

On August 5, 2025, a final hearing in this case was conducted before Administrative Law Judge (“ALJ”) Robert S. Cohen of the Division of Administrative Hearings (“DOAH”) via Zoom conference.

APPEARANCES

For Petitioner: Michael E. Morris, Esquire
 Department of Health
 4052 Bald Cypress Way, Bin C-65
 Tallahassee, Florida 32399

For Respondent: Heidi Marjaana Lahtenmaa, D.O.
 311 Golf Road, Suite 1000, No. 1007
 West Palm Beach, Florida 33407

STATEMENT OF THE ISSUES

Whether Respondent is unable to practice osteopathic medicine with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, or chemicals or any other type of material or as a result of any mental or physical condition in violation of section 459.015(1)(w), Florida Statutes (2023); and, if so, what discipline should be imposed.

PRELIMINARY STATEMENT

On August 26, 2024, Petitioner, Department of Health (“Department”), filed a one-count Administrative Complaint against Respondent, Heidi Marjaana Lahteenmaa, D.O., alleging that Respondent violated section 459.015(1)(w) by being unable to practice osteopathic medicine with reasonable skill and safety to patients due to Respondent’s unspecified psychosis.

On November 7, 2024, the Department referred this matter to DOAH pursuant to Respondent’s request for an administrative hearing involving disputed issues of material fact. The hearing was originally scheduled for January 23 and 24, 2025, but after a series of continuances at the request of the parties, the final hearing occurred on August 5, 2025, via Zoom conference.

At the final hearing, Petitioner’s Exhibits 1 through 6 and 10 and Respondent’s Exhibits 1 through 6 were admitted into evidence. The Department offered the testimony of Robert Dahlin, D.O.; Niaah Ellis; [REDACTED] D.O.; and Theodore R. Treese, M.D. Respondent testified on her own behalf and did not present any other witnesses, in her words, due to credible fears of intimidation from mafia/organized crime and Teladoc Health (“Teladoc”) elements.

The two-volume Transcript of the final hearing was filed on September 10, 2025. The parties timely filed proposed recommended orders on September 22, 2025, that have been considered in the issuance of this Recommended Order. Unless otherwise indicated, citations to the Florida Statutes or rules of the Florida Administrative Code refer to the version in effect at the time that the violation was committed.

FINDINGS OF FACT

1. The Department is the state agency charged with regulating the practice of osteopathic medicine in the state of Florida, pursuant to section 20.43 and chapters 456 and 459, Florida Statutes.
2. At all times material to this proceeding, Respondent was licensed to practice as an osteopathic physician within the state of Florida, having been issued license number OS 16911.
3. At all times material to this proceeding, Respondent's address of record with the Department was 3540 South Ocean Boulevard, Suite 805, Palm Beach, Florida 33480. Respondent is currently residing in Finland.
4. On or about November 20, 2023, Robert Dahlin, D.O. ("Dr. Dahlin"), reported Respondent to the Professionals Resource Network ("PRN"), an impaired practitioner program, based on concerns that Respondent was experiencing a mental health crisis.
5. Dr. Dahlin is a licensed physician in the state of Minnesota and currently practices in the field of neurosurgery.
6. Dr. Dahlin and Respondent initially met while in medical school in or around 2009, where they became very good friends. Respondent was Dr. Dahlin's "best man" at his wedding and was present for the birth of Dr. Dahlin's first child.
7. Approximately two years ago, Dr. Dahlin became concerned about Respondent's mental health because Respondent began exhibiting signs of delusions and paranoia.
8. During that time, Respondent believed that people were out to get her, that someone planted cameras in her house, that her electronics had been hacked, that people were following and spying on her, and that her telemedicine patients were actors working with Teladoc. Additionally, Respondent had all of her food delivered because she believed that she could not safely leave her apartment.

9. At the core of Respondent's claims, was her belief that that she was a whistleblower against her former employer, Teladoc. Respondent believed that everything she was experiencing was a result of retaliation from Teladoc.

10. In November 2023, Dr. Dahlin visited Respondent to check on her. At that time, he observed that Respondent continued exhibiting delusional and paranoid behavior such as hearing noises outside or on the roof and attributing the noise to someone spying on her and believing that strangers were listening to her or following her while in public.

11. Dr. Dahlin asked Respondent if she had any legitimate evidence to support her claims, which Respondent was unable to provide.

12. Respondent's behavior was dramatically different from how she had usually behaved over the course of her and Dr. Dahlin's 14- to 15-year friendship. Dr. Dahlin talked to Respondent about getting psychological care, but Respondent refused the assistance.

13. Respondent's unusual and concerning behavior motivated Dr. Dahlin to report Respondent to PRN.

14. PRN attempted to contact Respondent but was unsuccessful, resulting in PRN closing Respondent's file on or about December 21, 2023. PRN subsequently referred the matter to the Department for investigation into Respondent's ability to safely practice osteopathic medicine.

15. In response to the Department's investigation, Respondent sent several emails to Department employees which they believed were incoherent, paranoid, and/or delusional in nature.

16. Respondent reported that her email account was compromised due to the ongoing "hacking situation/cyberwar," and that the website for the Florida Board of Osteopathic Medicine ("Board") diverted to identical sites that were actually "hacker sites."

17. Respondent also directed the Department to contact the Federal Bureau of Investigation (“FBI”) to confirm the alleged existence of an active investigation into the Teladoc hackers that were harassing Respondent.

18. Based upon the information obtained during the Department’s investigation, including the PRN records and Respondent’s behavior, the Department issued an Order Compelling Examination to determine whether Respondent was able to safely practice as an osteopathic physician.

19. On April 16, 2024, Respondent underwent the Department-ordered evaluation with Theodore R. Treese, M.D. (“Dr. Treese”). Dr. Treese is Board-certified in psychiatry, neurology, and addiction medicine.

20. During the evaluation, Respondent reiterated her claims that she was being surveilled, not only by Teladoc but also by larger groups outside of Teladoc such as government agencies, due to her reported whistleblowing. Dr. Treese attempted to verify Respondent’s claims of persecution, but Respondent did not provide any evidence to support or corroborate her contentions.

21. In speaking with Respondent, Dr. Treese observed that Respondent exhibited delusional thinking, disorganized speech, significant emotional distress, social or professional withdrawal, neglect of personal needs, and professional and personal dysfunction.

22. Dr. Treese diagnosed Respondent with unspecified psychosis not due to a known substance or psychological condition and indicated the need to rule out the possibility of stimulant-induced psychotic disorder.

23. Psychosis refers to a loss of contact with reality. People having a psychotic episode are not able to think clearly, and they may have delusions or hallucinations.

24. Dr. Treese was unable to determine the root cause, or etiology, of Respondent’s psychosis.

25. Dr. Treese believed that Respondent's psychosis could be the result of a primary psychiatric disorder, could be substance-induced, or could be a symptom of another medical condition that has yet to be identified.

26. A substance-induced psychosis could be the result of substance abuse or an adverse reaction to prescription drugs. Between approximately June 2021 and May 2024, Respondent was prescribed one 20 mg-tablet of Adderall three times per day, which is considered a relatively high dose. Adderall is an amphetamine stimulant drug used to treat attention-deficit/hyperactivity disorder. Amphetamine use or abuse can cause or contribute to delusional or psychotic thinking, especially if combined with other substances.

27. Since Respondent failed to comply with the required toxicology testing in conjunction with her evaluation, Dr. Treese was unable to assess the potentiality of substance use being a cause or contributing factor of Respondent's psychosis.

28. Dr. Treese opined that it is also possible that Respondent's psychosis was caused by metastasized cancer of the brain. This theory is based upon Respondent's report of a breast mass that has not yet been thoroughly evaluated.

29. Regardless of the etiology, Respondent's psychosis has severely limited her insight and judgment, and her ability to perform complex reasoning. Judgment and complex reasoning are necessary skills for the safe practice of osteopathic medicine.

30. Accordingly, in Dr. Treese's expert medical opinion, Respondent's psychosis rendered her unable to practice as an osteopathic physician with reasonable skill and safety to patients.

31. Dr. Treese recommended that Respondent undergo a residential multi-day assessment and treatment and engage in monitoring by PRN.

32. As of the date of the final hearing, Respondent has not undergone the recommended evaluation, has not engaged in any treatment, and is not under monitoring.

33. Based upon the events since her diagnosis, Respondent's psychosis has remained, and she continues to be unable to safely practice osteopathic medicine.

34. In August 2024, Respondent's colleagues noticed Respondent's worsening delusions, including Respondent's belief that her patients were FBI agents.

35. Respondent's colleagues contacted emergency services, which resulted in Respondent's involuntary admission to Delray Medical Center ("Delray") (pursuant to the Baker Act, chapter 394, Florida Statutes) on August 12, 2024.

36. At the time of her admission to Delray, Respondent reported that Teladoc had hacked her phone and laptop, hacked her friend's phone, hired people to break into her home, and took control of the ride-share company Uber, which resulted in her being picked up by the "mafia." Respondent further asserted that her health insurance and a plane ticket that she purchased were cancelled by Teladoc or unnamed entities working with Teladoc. Respondent claimed that she went into T-Mobile and reported that her phone had been hacked; an employee assisted her with getting a new phone; and Respondent believed that the employee was a party of the Teladoc conspiracy against her.

37. During her hospital intake, Respondent reported that she was taking Adderall and Trazadone, an antidepressant medication that is sometimes used off-label to treat insomnia.

38. The attending physician noted that Respondent may have been suffering from a stimulant induced psychosis with delusions, and that the addition of Trazadone may be causing sleep disturbances, exacerbating the psychosis. The physician ordered that Respondent's Adderall be discontinued.

The physician also ordered that Respondent begin taking Paliperidone, an antipsychotic medication, which was administered to Respondent while in the hospital.

39. On August 16, 2024, a Delray physician re-evaluated Respondent and found that she was no longer spontaneously offering overt delusions regarding cyberattacks or stalking. Because Respondent did not appear to be an imminent danger to herself or others, Respondent was discharged pursuant to the limitations of her admission under the Baker Act.

40. Respondent's discharge diagnosis was delusional disorder, persecutory type and substance-induced psychotic disorder with delusions.

41. However, although Respondent's symptoms of psychosis appeared to have temporarily improved while in the hospital, they have not resolved.

42. Petitioner took Respondent's deposition in this matter on December 10, 2024. The deposition was admitted into evidence at the final hearing. During the deposition, Respondent claimed that she was still having "massive cyber-hacking" by Teladoc on all her devices over the previous two years, and that the hackers were preventing her from getting medical care by cancelling her appointments or intercepting her calls. She was even told by her bank that her account had been cancelled, something she says she did not do herself.

43. In March 2025, Respondent sent Dr. Dahlin numerous text messages in which Respondent continued to assert that she was being targeted and hacked by cyber criminals, that the "Miami mafia" was torturing her, and that the FBI engaged in a prolonged campaign to psychologically torture her. Again, Respondent attributed these acts to a conspiracy of retaliation for being a whistleblower against Teladoc.

44. Respondent's text messages were consistent with her delusional rants and claims against the cyber conspiracy against her.

45. At the final hearing, as noted by Dr. Treese, who participated in the hearing, as well as the undersigned, the ongoing nature of Respondent's psychosis was evident.

46. In addition to reasserting her previous claims about hacking, Respondent testified that she was essentially held prisoner in her home for over a year because cyber attackers intercepted her Uber requests, and that the Governor of Florida advised her that he could not help her due to orders "from D.C." None of these claims were supported by credible and competent evidence. Respondent's testimony demonstrated that she is still in a delusional state.

47. Throughout the previous two years, Respondent has repeatedly demonstrated paranoid delusions regarding what she believes is a vast conspiracy against her launched by Teladoc, despite the lack of evidence to support her claims and her friends and family telling her that they are untrue beliefs. Other than her testimony offered at hearing, Respondent was unable to supply any concrete evidence of this conspiracy, through bank records, text messages, emails, recorded telephone calls, or the like.

48. Respondent continues to believe that technological issues or inconveniences, common to all users of technology, are evidence of the alleged conspiracy, such as receiving spam phishing emails or texts, her laptop restarting, her thermostat not working, her Uber going to the wrong address, or issues with her wireless internet router. Respondent's attribution of simple technological problems or random coincidences to a coordinated conspiracy are not based in reality, and no credible evidence was produced by her of conspiratorial reasons for any of these alleged problems she suffered.

49. Respondent has experienced some issues with her personal accounts. It is possible that her identity has been compromised and that hackers could be the cause of some of these issues but she provided no credible evidence of these issues coming at the hands of Teladoc based upon her alleged whistleblower status that led to retaliation by the company.

Respondent's Unfounded Allegations Against the Department and Its Witnesses

50. The undersigned deems it necessary to provide a non-exhaustive list of allegations put forth by Respondent, for which no direct evidence or credible testimony was provided at hearing. Each of the following items were raised by Respondent, either in her filings throughout discovery (and introduced over objection into evidence), through her testimony at the final hearing, or in her Proposed Recommended Order:

a) Respondent called no witnesses, other than testifying herself, “due to credible fears of intimidation from mafia/organized crime and Teladoc elements.”

b) Respondent's “Whistleblower Exposé on Teladoc.” Respondent provided evidence of a contract to investigate a qui tam action against Teladoc, yet no evidence of findings or anything beyond a signed Contract for Limited Legal Representation to look into the matter with the law firm Price Armstrong, dated December 13, 2022, was introduced. No evidence or further documentation was provided as to the status, if any, of the investigation.

c) “Digital and Personal Torment” by hackers, “including mafia and cybergang infiltration (such as Miami-based operations, Chinese hackers, and Russian actors).”

d) The Department's “complicity” in refusing “to clarify duplicated Florida medical licenses”; “disregarding rampant hacking and torment inflicted upon a physician working for a telehealth giant”; and the “DOH's unconscionable complicity, executed without my informed consent or any intimation of a federal directive, has wrought catastrophic personal devastation.”

e) “Dr. Dahlin's Unauthorized Diagnostic Intervention and DOH's Reliance on an Illegally Procured Complaint.” Nothing was proven about Dr. Dahlin's complaint other than the fact that, personally knowing Respondent and being her friend for so many years, he feared for her safety and mental well-being.

f) “Denial of Forensic Device Evaluation.” “The court [DOAH] and DOH refused my repeated requests for a forensic evaluation of my devices, which could have substantiated my hacking claims and refuted the psychosis diagnosis.” It is true that neither the Department nor DOAH commissioned an independent forensic evaluation of thousands of pages of Respondent’s documents, four hard drives, fifteen cellphones, ten diaries, four laptops, and USB drives “containing evidence of hacking, retaliation and Teladoc’s actions.” However, the Department’s evaluation of this case was based upon a properly filed complaint, expert evaluation of Respondent by Dr. Treese, and an evaluation that proved she suffered from psychosis of unspecified origin. It was neither the Department’s responsibility nor the responsibility of DOAH to conduct an open-ended investigation of cyber crimes and hacking alleged by Respondent.

g) An allegation that the undersigned “misrepresented my ability to secure legal representation” when the undersigned stated, at various times throughout the pendency of the matter, that she was entitled to hire a lawyer at her expense. Her response to that was that there was “potential lawyer sabotage tied to the case,” yet nothing of the sort was testified to at hearing nor was evidence of sabotage presented by Respondent.

h) Conclusions of law that accused witnesses of perjury, falsification of the expert’s own report, the Department’s expert refusing to believe her claims of the worldwide conspiracy against her by Teladoc, and the lack of a fair hearing.

Ultimate Facts

51. In attempting to practice her profession under her perceived cloud that anyone out there could be part of the Teladoc or other conspiracies, it is hard to imagine her providing professional therapy and sound advice to patients who might suffer from delusions or perceived hacking of their technological devices. Based upon Respondent’s history, her presentation of her case at hearing, and her often outlandish stories of this conspiracy going as far up as

Washington, D.C., and involving Teladoc, the FBI, and highly-placed government officials, her symptoms of psychosis, as noted by Dr. Treese, the undersigned, and most likely, Department officials participating in this case, remain severe and uncontrolled.

52. Respondent received a fair hearing and was not restricted in any way from calling additional witnesses in her defense. Moreover, all of her voluminous exhibits were admitted into evidence over objection from the Department as to relevance. These exhibits made many allegations and included many “examples” of what she believed to be cyber hacking and unauthorized actions taken on her bank accounts, Uber orders, and cell phones. However, the undersigned cannot discern any illegal activity or evidence of conspiracies from these documents, which were not the subject of any direct testimony by Respondent or others as to their authenticity, creation by criminals and conspirators, or, somehow, actions of the Department designed to keep her from receiving a fair hearing.

The ongoing symptoms of Respondent’s psychosis have resulted in continued impairment of Respondent’s judgment, insight, and reasoning.

53. The ultimate facts present in this case lead the undersigned to conclude that Respondent is unable to practice her profession, osteopathic medicine, with reasonable skill and safety to her patients due to unspecified psychosis.

CONCLUSIONS OF LAW

54. DOAH has jurisdiction over the subject matter of this proceeding and of the parties thereto pursuant to sections 120.569 and 120.57(1), Florida Statutes (2025).

55. This is a proceeding in which the Department seeks to discipline Respondent’s license to practice osteopathic medicine. The Department has the burden of proving the allegations by clear and convincing evidence. *Reich v. Dep’t of Health*, 973 So. 2d 1233, 1235 (Fla. 4th DCA 2008) (citing *Dep’t of*

Banking & Fin. v. Osborne Stern & Co., 670 So. 2d 932, 933 (Fla. 1996)); and *Ferris v. Turlington*, 510 So. 2d 292 (Fla. 1987). As stated by the Supreme Court of Florida:

[C]lear and convincing evidence requires that the evidence must be found to be credible; the facts to which the witnesses testify must be distinctly remembered; the testimony must be precise and lacking in confusion as to the facts at issue. The evidence must be of such a weight that it produces in the mind of the trier of fact a firm belief or conviction, without hesitancy, as to the truth of the allegations sought to be established.

In re Henson, 913 So. 2d 579, 590 (Fla. 2005) (quoting *Slomowitz v. Walker*, 429 So. 2d 797, 800 (Fla. 4th DCA 1983)). This burden of proof may be met where the evidence is in conflict; however, “it seems to preclude evidence that is ambiguous.” *Westinghouse Elec. Corp. v. Shuler Bros.*, 590 So. 2d 986, 988 (Fla. 1st DCA 1991).

56. Because the regulation of health professions and occupations, and the specific sections applying to this matter, authorize suspension or revocation of a professional license, they are penal in nature and must be strictly construed in favor of the licensed professional. *Breesmen v. Dep’t of Pro. Regul., Bd. of Med.*, 567 So. 2d 469, 471 (Fla. 1st DCA 1990); *Munch v. Dep’t of Pro. Regul., Div. of Real Estate*, 592 So. 2d 1136, 1143 (Fla. 1st DCA 1992).

57. A hearing involving disputed issues of material fact under section 120.57(1) is a de novo hearing, and the Department’s initial action carries no presumption of correctness. § 120.57(1)(k), Fla. Stat.; *Moore v. Dep’t of HRS*, 596 So. 2d 759 (Fla. 1st DCA 1992).

58. The grounds proving the Department’s assertion that Respondent’s license should be disciplined must be those specifically alleged in the administrative complaint. *See, e.g., Trevisani v. Dep’t of Health*, 908 So. 2d 1108 (Fla. 1st DCA 2005); *Kinney v. Dep’t of State*, 501 So. 2d 129 (Fla. 5th

DCA 1987); and *Hunter v. Dep't of Pro. Regul.*, 458 So. 2d 842 (Fla. 2d DCA 1984).

59. Due process prohibits the Department from taking disciplinary action against a licensee based on matters not specifically alleged in the charging instrument, unless those matters have been tried by consent. *See Shore Vill. Prop. Owners' Ass'n v. Dep't of Env't Prot.*, 824 So. 2d 208, 210 (Fla. 4th DCA 2002); and *Delk v. Dep't of Pro. Regul.*, 595 So. 2d 966, 967 (Fla. 5th DCA 1992).

60. Section 459.015(1)(w) authorizes discipline against an osteopathic medical doctor for being unable to practice osteopathic medicine with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, or chemicals or any other type of material or as a result of any mental or physical condition.

61. The parties agree that the factual allegations contained in the Complaint, if proven by clear and convincing evidence, constitute impairment or disciplinable conduct.

62. The facts to which Dr. Treese, an expert in psychiatry, neurology, and addiction medicine, testified were distinctly remembered, and his testimony regarding the factual allegations contained in the Administrative Complaint was clear, direct, and weighty. Moreover, his testimony, regarding his conclusions based upon the examination he conducted of Respondent, was confirmed by his hearing her testify and conduct herself at the final hearing. The defense Respondent put forth at hearing of the allegations against her in the Administrative Complaint, through her own testimony, provided compelling evidence that she continues to exhibit signs of psychosis and is unable to practice osteopathic medicine with reasonable skill and safety to patients. Dr. Treese's testimony is credited.

63. The facts to which Dr. Dahlin, who was a medical school classmate of Respondent's and a longtime friend, testified were distinctly remembered, and his testimony regarding the factual allegations contained in the

Administrative Complaint was clear, direct, and weighty. Dr. Dahlin's testimony is credited.

64. As observed firsthand by Dr. Treese at the final hearing, Respondent's own testimony provided compelling evidence that she continues to exhibit signs of psychosis and is unable to practice osteopathic medicine with reasonable skill and safety to patients.

65. The Department proved by clear and convincing evidence that Respondent was, and is currently, not able to practice osteopathic medicine with reasonable skill and safety to patients as a result of Respondent's unspecified psychosis.

66. The Department proved by clear and convincing evidence that Respondent violated section 459.015(1)(w) by being unable to practice as an osteopathic physician with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, or chemicals or any other type of material or as a result of any mental or physical condition.

67. Penalties in a licensure discipline case may not exceed those in effect at the time a violation was committed. *Willner v. Dep't of Pro. Regul., Bd. of Med.*, 563 So. 2d 805, 806 (Fla. 1st DCA 1990), *rev. denied*, 576 So. 2d 295 (Fla. 1991).

68. Section 456.079 requires the Board to adopt disciplinary guidelines for specific offenses. Penalties imposed must be consistent with any disciplinary guidelines prescribed by rule. *See Parrot Heads, Inc. v. Dep't of Bus. & Pro. Regul.*, 741 So. 2d 1231, 1233-34 (Fla. 5th DCA 1999).

69. Florida Administrative Code Rule 64B15-19.002 (effective November 24, 2020, to present) provides that the disciplinary range for a first-time violation of section 459.015(1)(w) is a minimum of probation and a \$2,500 fine up to a maximum of suspension until licensee is able to demonstrate to the Board ability to practice with reasonable skill and safety to be followed by probation and \$5,000 fine.

70. Respondent provided no evidence at hearing that she has taken any steps to become able to practice with reasonable skill and safety. Rather than seeking help for the diagnosis by Dr. Treese, as confirmed by her treatment when a patient under the Baker Act at Delray and by Dr. Treese's further observations at the final hearing, Respondent has continued to insist she is the target of a worldwide conspiracy involving Teladoc's intrusion into every aspect of her professional and personal life. However, she makes all these claims without a shred of credible, competent, and substantial evidence that any of her claims against Teladoc are, in fact, genuine. Therefore, the appropriate penalty would be imposition of a suspension until Respondent is able to demonstrate to the Board her ability to practice with reasonable skill and safety.

71. Whether Respondent ever is cleared to practice osteopathic medicine in the future is a question of how deep her psychosis goes. However, one thing is clear, without professional psychiatric treatment, she is unable to treat patients and she owes it to herself to take whatever steps necessary to rid herself of her demons represented at the forefront by Teladoc as the drive of the conspiracy against her. The undersigned wishes her the best of luck in seeking treatment and, hopefully, a cure of her psychosis.

RECOMMENDATION

Based on the foregoing Findings of Fact and Conclusions of Law, it is RECOMMENDED that the Board of Osteopathic Medicine enter a final order finding Heidi Marjaana Lahteenmaa, D.O., violated section 459.015(1)(w); suspending her license until she is able to demonstrate to the Board the ability to practice with reasonable skill and safety, with such demonstration of skill and safety including an evaluation by PRN; and imposing costs of investigation and prosecution.

DONE AND ENTERED this 14th day of October, 2025, in Tallahassee,
Leon County, Florida.

Handwritten signature of Robert S. Cohen in black ink, with a faint watermark "Case No. 22-4162PL" visible in the background.

ROBERT S. COHEN
Administrative Law Judge
DOAH Tallahassee Office

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Filed with the Clerk of the
Division of Administrative Hearings
this 14th day of October, 2025.

COPIES FURNISHED:

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NOTICE OF RIGHT TO SUBMIT EXCEPTIONS

All parties have the right to submit written exceptions within 15 days from the date of this Recommended Order. Any exceptions to this Recommended Order should be filed with the agency that will issue the Final Order in this case.