THERESA ANN OSBOURNE

License Number: RN9317013

Data As Of 8/31/2025	
Profession	Registered Nurse
License	RN9317013
License Status	Emerg Restrict/Active
License Expiration Date	7/31/2026
License Original Issue Date	11/29/2010
Address of Record	808 SW DEL RIO BLVD
	PORT SAINT LUCIE, FL 34953
Discipline on File	No
Public Complaint	Yes
Alerts	Enforcement Alert
	6/23/2025 11:42:17 AM
	6.23.2025 - Order of Emergency Restriction.

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

Name	License	Profession	City	County	State	Case #	Action Taken	Action Date
OSBOURNE, THERESA	9317013	REGISTERED NURSE	PORT SAINT LUCIE	ST.LUCIE	FL	202511635	ERO ISSUED	06/23/2025
OSBOURNE, THERESA	9317013	REGISTERED NURSE	PORT SAINT LUCIE	ST.LUCIE	FL	202509195	ERO ISSUED	06/23/2025

Discipline Cases

No Discipline Found

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
OSBOURNE, THERESA ANN	9317013	REGISTERED NURSE	PORT SAINT LUCIE	FL	202509195	AC FILED
OSBOURNE, THERESA ANN	9317013	REGISTERED NURSE	PORT SAINT LUCIE	FL	202511635	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; 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.

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.

^{2.} Name and address where documents are to be sent; and