



## TOD NORTHRUP

### License Number: OS7217

Data As Of 8/5/2025

Profession	Osteopathic Physician
License	OS7217
License Status	Clear/Active
License Expiration Date	3/31/2026
License Original Issue Date	06/05/1996
Address of Record	Spartan Orthopedic Institute 475 West Town Place Suite 106 ST AUGUSTINE, FL 32092
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	Yes
Public Complaint	Yes

### Secondary Locations

No secondary locations found.

### Discipline/Admin Action

#### Emergency Actions

No Emergency Actions Found

#### Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
NORTHRUP, TOD	7217	OSTEOPATHIC PHY	ST AUGUSTINE	FL	200703051	OBLIGATION(S) SATISFIED
NORTHRUP, TOD	7217	OSTEOPATHIC PHY	ST AUGUSTINE	FL	200101751	DISCIPLINARY CITATION ISSUED

#### Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
NORTHRUP, TOD	7217	OSTEOPATHIC PHYSICIAN	ST AUGUSTINE	FL	200703051	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.

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
FLORIDA SPORTS MEDICINE INSTITUTE	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	2606	11/3/2009
FLORIDA SPORTS MEDICINE INSTITUTE	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	2620	11/3/2009
KEPLER, EARNEST E	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	1917	2/16/2016

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

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