



VALERIE A WASHINGTON

License Number: PN5148805

Data As Of 12/22/2024

Profession	Licensed Practical Nurse
License	PN5148805
License Status	EMERG RESTRICT/Active
Qualifications	Single-state License
License Expiration Date	7/31/2025
License Original Issue Date	12/13/2000
Address of Record	1312 W. Walnut St LAKELAND, FL 33815
Discipline on File	Yes
Public Complaint	Yes
Alerts	Enforcement Alert 11/12/2024 12:36:39 PM Emergency Restriction Order filed 08/29/2024.....Voluntary Relinquishment Pending Board Action filed 11/12/2024.

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

Name	License	Profession	City	County	State	Case #	Action Taken	Action Date
WASHINGTON, VALERIE	5148805	LICENSED PRACTICAL NURSE	LAKELAND	POLK	FL	202429166	ERO ISSUED	08/29/2024

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
WASHINGTON, VALERIE A	5148805	LICENSED PRACTICAL NURSE	LAKELAND	FL	200734266	PROBATION SATISFIED
WASHINGTON, VALERIE A	5148805	LICENSED PRACTICAL NURSE	LAKELAND	FL	200734268	PROBATION
WASHINGTON, VALERIE A	5148805	LICENSED PRACTICAL NURSE	LAKELAND	FL	200920926	SATISFIED-REVOCATION PENALTY STAYED

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
WASHINGTON, VALERIE A	5148805	LICENSED PRACTICAL NURSE	LAKELAND	FL	202429166	AC FILED
WASHINGTON, VALERIE A	5148805	LICENSED PRACTICAL NURSE	LAKELAND	FL	200734266	AC FILED
WASHINGTON, VALERIE A	5148805	LICENSED PRACTICAL NURSE	LAKELAND	FL	200734268	AC FILED

Name	License	Profession	City	State	Case #	Action Taken
WASHINGTON, VALERIE A	5148805	LICENSED PRACTICAL NURSE	LAKELAND	FL	200920926	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.

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