### JENNIFER PAIGE ROSS

### License Number: APRN3143762

Data As Of 12/14/2025

Profession Advanced Practice Registered Nurse

License APRN3143762
License Status Obligations/Active
Qualifications Nurse Practitioner

Certified Registered Nurse Anesthetist

License Expiration Date 7/31/2026
License Original Issue Date 02/24/2006

Address of Record 16244 S Military Trail

DELRAY BEACH, FL 33484

Controlled Substance Prescriber (for the Treatment of Chronic Non-

(10) the fredtherit of Official

malignant Pain)

Discipline on File Yes
Public Complaint Yes

# **Secondary Locations**

No secondary locations found.

## Discipline/Admin Action

Please also check the Discipline/Admin action of the other license by clicking on the "Other License" tab.

### **Emergency Actions**

No Emergency Actions Found

### **Discipline Cases**

Name	License	Profession	City	State	Case#	Action Taken
ROSS, JENNIFER PAIGE	3143762	ADV PRACTICE RN	DELRAY BEACH	FL	201824407	SUSPENSION SATISFIED
ROSS, JENNIFER PAIGE	3143762	ADV PRACTICE RN	DELRAY BEACH	FL	202124298	SUSPENSION

### **Public Complaints**

Name	License	Profession	City	State	Case#	Action Taken
ROSS, JENNIFER PAIGE	3143762	ADVANCED PRACTICE REGISTERED NURSE	DELRAY BEACH	FL	202124298	AC FILED
ROSS, JENNIFER PAIGE	3143762	ADVANCED PRACTICE REGISTERED NURSE	DELRAY BEACH	FL	201824407	AC FILED
ROSS, JENNIFER PAIGE	3143762	ADVANCED PRACTICE REGISTERED NURSE	DELRAY BEACH	FL	201824407	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.

### Other License

Name	Relationship	Profession	License	Effective Date
	APRN CONVERSION	REGISTERED NURSE	3143762	10/19/2018

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

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