



ALFRED IZELL RUSH III

License Number: APRN9260658

Data As Of 12/22/2024

Profession	Advanced Practice Registered Nurse
License	APRN9260658
License Status	DELINQUENT/
Qualifications	Autonomous Practice APRN Nurse Practitioner
License Expiration Date	7/31/2024
License Original Issue Date	07/02/2018
Address of Record	909 E. 20TH AVE TAMPA, FL 33605
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	Yes
Alerts	Enforcement Alert 8/29/2024 4:26:28 PM Emergency Restriction Order filed 08/29/2024.

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

Name	License	Profession	City	County	State	Case #	Action Taken	Action Date
RUSH, ALFRED	9260658	ADVANCED PRACTICE REGISTERED NURSE	TAMPA	HILLSBOROUGH	FL	202240036	ESO ISSUED	08/29/2024

Discipline Cases

No Discipline Found

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
RUSH, ALFRED IZELL	9260658	ADVANCED PRACTICE REGISTERED NURSE	TAMPA	FL	202240036	AC FILED
RUSH, ALFRED IZELL	9260658	ADVANCED PRACTICE REGISTERED NURSE	TAMPA	FL	202240036	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	9260658	10/19/2018

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

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.