#### **BRIDGET JERNIGAN TAYLOR**

### License Number: RN9287161

Data As Of 7/9/2025

Profession Registered Nurse
License RN9287161
License Status Clear/Active

Qualifications Single-state License

License Expiration Date 7/31/2026

License Original Issue

original 133uc

01/22/2009

Date

Address of Record 6640 78th avenue north suite A

PINELLAS PARK, FL 33781

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            |
|-----------------------------|---------|--------------------|---------------|-------|-----------|-------------------------|
| TAYLOR, BRIDGET<br>JERNIGAN | 9287161 | REGISTERED<br>NURS | PINELLAS PARK | FL    | 201707050 | SUSPENSION<br>SATISFIED |

### **Public Complaints**

| Name                        | License | Profession          | City          | State | Case#     | Action Taken |
|-----------------------------|---------|---------------------|---------------|-------|-----------|--------------|
| TAYLOR, BRIDGET<br>JERNIGAN | 9287161 | REGISTERED<br>NURSE | PINELLAS PARK | FL    | 201707050 | 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         | ADVANCED PRACTICE REGISTERED NURSE | 9287161 | 10/19/2018     |

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

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