## LINA GABRIELA DAVIS

## License Number: APRN9337840

Data As Of 6/25/2025

Profession Advanced Practice Registered Nurse

License APRN9337840
License Status Clear/Active

Qualifications Autonomous Practice APRN

Nurse Practitioner

License Expiration Date 4/30/2027 License Original Issue Date 07/27/2016

Address of Record 1342 Colonial Blvd, H57

Fort Myers

No

FORT MYERS, FL 33907

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **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**

No Discipline Found

## **Public Complaints**

No Public Complaint Found

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

Name	Relationship	Profession	License	Effective Date
	APRN CONVERSION	REGISTERED NURSE	9337840	10/19/2018

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

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