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**Person Information**

**Name:** KATIE IRENE GOSSELIN

**Address Information**

**Address(city state zipcode):** Sinking Spring PA 19608

**License Information**

**Type:** Registered Nurse **Secondary Type:**                      **Number:** RN519708L  
**Profession:** Nursing                      **Status:** Active  
**Issue Date:** 8/20/1997                      **Expires:** 10/31/2011 **Last Renewed:** 10/26/2009

**Discipline Action History**

No disciplinary actions were found for this license.

The Information above is considered primary source for verification of license credentials.