



ELENA S CRUZ-HUNTER

License Number: APRN2170132

Profession	Advanced Practice Registered Nurse
License Status	Clear/Active
Year Began Practicing	01/01/1984
License Expiration Date	04/30/2026

General Information

Primary Practice Address

ELENA S CRUZ-HUNTER
601 E UNIVERSITY BLVD
MELBOURNE, FL 32901

Medicaid

This practitioner DOES participate in the Medicaid program.

Staff Privileges

APRNs are not required to provide this information.

Email Address

Please contact at: ecruzhunter@gmail.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
ALABAMA	NURSING

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
HUNTER/BELLEVUE SCH OF NURSING	B.S.N.	9/1/1972 - 12/1/1977	12/01/1977
DOWNSTATE UNIVERSITY OF N.Y.	CERT	1/1/1983 - 1/1/1984	11/09/1984

Other Health Related Degrees

Although APRNs could have other health related degrees, they are not required to provide this information.

Professional and Postgraduate Training

This practitioner has completed the following graduate medical education:

Program Name	Program Type	Specialty Area	Other Specialty Area	City	State or Country	Dates Attended From	Dates Attended To
STONY BROOK UNIVERSITY	OTHER PROGRAM	OTHER	NURSING/CNM	STONY BROOK	NEW YORK	09/01/1998	05/01/1999
EMORY UNIVERSITY	OTHER PROGRAM	OTHER	ADV CLIN PRACT/COLPOSCOPY	ATLANTA	GEORGIA	04/01/2000	01/01/0001

Academic Appointments

Graduate Medical Education

This practitioner has had the responsibility for graduate medical education within the last 10 years.

Academic Appointments

This practitioner currently holds faculty appointments at the following medical/health related institutions of higher learning:

Title	Institution	City	State
ASST CLIN PROFESSOR		HUNTSVILLE	ALABAMA

Specialty Certification

Specialty Certification

This practitioner holds the following certifications from specialty boards recognized by the Florida board which regulates the profession for which he/she is licensed:

Specialty Board	Certification	Date Certified
AMERICAN MIDWIFERY CERTIFICATION BOARD (AMCB)	CERTIFIED NURSE MIDWIFE	01/01/1984
AMERICAN MIDWIFERY CERTIFICATION BOARD (AMCB)	CERTIFIED NURSE MIDWIFE	07/12/1986

Financial Responsibility

Financial Responsibility

I practice exclusively as an officer, employee, or agent of the federal government, or of the state or its agencies or subdivisions.

Proceedings and Actions

Proceedings & Actions

Criminal Offenses

The criminal history information, if any exists, may be incomplete; federal criminal history information is not available to the public. Information is verified by the Department at the time of initial licensure and renewal.

This practitioner has indicated that he/she has no criminal offenses required to be published on this profile.

Medicaid Sanctions and Terminations

This practitioner has not been sanctioned or terminated for cause from the Medicaid program.

Final Disciplinary Actions Reported by the Department of Health within the last 10 years:

The information below is self reported by the practitioner.

Final disciplinary action taken by a specialty board within the last 10 years:

This practitioner has indicated that he/she has *NOT* had any final disciplinary action taken against him/her within the last 10 years by a specialty board.

Final disciplinary action taken by a licensing agency within the last 10 years:

This practitioner has indicated that he/she has *NOT* had any final disciplinary action taken against him/her within the last 10 years by a licensing agency.

Disciplinary action taken by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center within the last 10 years:

This practitioner has indicated that he/she has *NOT* had any final disciplinary action taken against him/her within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center.

The following discipline has been reported as required under 456.041(5), F.S. within the previous 10 years.

Resignation from or non-renewal of medical staff membership or the restriction or revocation of staff privileges within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center in lieu of or in settlement of a pending disciplinary case related to competence or character.

This practitioner has indicated that he/she has *NEVER* been asked to or allowed to resign from or had any medical staff privileges restricted or revoked within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center.

Liability Claims Exceeding \$100,000.00 Within last 10 years.

This profession is not required by F.S., to report bankruptcy and liability claims.

Additional claims information may have been reported to the Department of Financial Services. To check their web site, please click [here](#).

There have not been any reported liability actions, which are required to be reported under section 456.049, F. S., within the previous 10 years.

Optional Information

Committees/Memberships

This practitioner has not indicated any committees on which they serve for any health entity with which they are affiliated.

Professional or Community Service Awards

This practitioner has provided the following professional or community service activities, honors, or awards:

Community Service/Award/Honor	Organization
ASSISTANT SCOUT MASTER	BOY SCOUTS OF AMERICA
CO CHAIR PERSON	AMERICAN CANCER SOCIETY SISTERS ALIRE

Publications

This practitioner has not provided any publications that he/she authored in peer-reviewed medical literature within the last ten years.

Professional Web Page

This practitioner has not provided any professional web page information.

Languages Other Than English

This practitioner has indicated that the following languages other than English are used to communicate with patients, or that a translation service is available for patients, at his/her primary place of practice.

SPANISH

Other Affiliations

This practitioner has provided the following national, state, local, county, and professional affiliations:

Affiliation

FAC APPT: ASST CLIN PROF-UNIVERSITY OF ALABAMA-HUNTSVILLE