



## FAITH PEARSALL BLOCKER

License Number: APRN2503482

Profession	Advanced Practice Registered Nurse
License Status	Clear/Active
Year Began Practicing	03/27/1979
License Expiration Date	04/30/2026

## General Information

### Primary Practice Address

FAITH PEARSALL BLOCKER  
5632 NATURE LANE  
TALLAHASSEE, FL 32303

### Medicaid

This practitioner does NOT participate in the Medicaid program.

### Staff Privileges

APRNs are not required to provide this information.

### Email Address

Please contact at: FAITHBLOCKER@GMAIL.COM

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NORTH CAROLINA	REG NURSE (INACTIVE)

## Education and Training

## Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
OAKWOOD COLLEGE		9/1/1967 - 3/1/1969	
ANDREWS UNIVERSITY	BSN	9/1/1969 - 6/4/1972	06/04/1972
FORMERLY KNOWN AS UNIVERSITY HOSP OF JACKSONVILL	DIPL	1/2/1979 - 3/23/1979	03/23/1979
EMORY UNIV-REG TRAINING CNTR	N.P.	1/30/1980 - 11/30/1980	11/30/1980
UNIVERSITY OF FLORIDA	NSE COLPOS	6/12/1995 - 3/15/1996	03/15/1996
UNIVERSITY OF NORTH CAROLINA	MSN	8/1/1987 - 5/1/1991	05/01/1991

## 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
UNIVERSITY OF NORTH CAROLINA	OTHER PROGRAM	OTHER	CLIN NURSE SPEC/PARENT CHILD	CHARLOTTE	NORTH CAROLINA	09/01/1986	05/11/1991
POST MASTERS NURSE EDUCATOR-FSU	OTHER PROGRAM	OTHER		TALLAHASSEE	UNITED STATES	09/01/2005	12/15/2006

## Academic Appointments

### Graduate Medical Education

This practitioner has not had the responsibility for graduate medical education within the last 10 years.

### Academic Appointments

This practitioner does not currently hold faculty appointments at any medical/health related institutions of higher learning.

## 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
NATIONAL CERTIFICATION CORPORATION FOR THE OBSTETRIC,	WOMENS HEALTH NURSE PRACTITIONER	09/08/1986

## Financial Responsibility

### Financial Responsibility

I have obtained and will maintain Professional liability coverage of at least \$100,000 per claim with a minimum annual aggregate of at least \$300,000 from an authorized insurer under Section 624.09, F.S., a surplus lines insurer under Section 626.914(2), F.S., a joint underwriting association under Section 627.351(4), F.S., a self-insurance plan under Section 627.357, F.S., or a risk retention group under Section 627.942, F.S.

## 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 an affiliation with the following committees:  
CAPN

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
GUARD CARE	GADSDEN COUNTY HEALTH DEPARTMENT
HURRICANE ANDREW DISASTER RELIEF	DEPARTMENT OF HEALTH
DISCUSSION ON TEENS & STD'S	WJZY TELEVISION STATION - CHARLOTTE, N.C.
AGENCY TO AGENCY ROUND TABLE DISCUSSION	MECKLENBURG COUNTY COUNCIL ON ADOLESCENT PREGNANCY-CHARLOT

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 not indicated that any languages other than English are used to communicate with patients, or that any translation service is available for patients, at his/her primary place of practice.

Other Affiliations

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

Affiliation
AMERICAN NURSES ASSOCIATION
CERT: NCC-WOMENS HLTH NURSE PRACTITIONER
FLORIDA NURSES ASSOCIATION
TALLAHASSEE AREA CAPN INC