



A JUDITH CZERENDA

License Number: APRN2854792

Profession Advanced Practice Registered Nurse
License Status Clear/Active
Year Began Practicing 07/01/1981
License Expiration 07/31/2026
Date

General Information

Primary Practice Address

A JUDITH CZERENDA
1846 MARGARET ST
APT 9C
JACKSONVILLE, FL 32204

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: jczerenda@hotmail.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NEW YORK	NURSE PRACTITIONER
NEW YORK	RN
NEW YORK	NURSING HOME ADMINISTRATORS

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
			06/01/1969
SUNY BUFFALO	BSN	9/1/1969 - 5/1/1971	05/01/1971
ALFRED STATE COLLEGE	AAS	9/6/1967 - 5/1/1969	05/01/1969
BINGHAM UNIVERSITY	FNP	5/1/1979 - 9/1/1980	09/01/1980
BINGHAM UNIVERSITY	MSN	9/1/1977 - 5/1/1979	05/01/1979

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 not completed any graduate medical education.

Academic Appointments

Graduate Medical Education

This practitioner has 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 does not hold any certifications from specialty boards recognized by the Florida board which regulates the profession for which he/she is licensed.

Financial Responsibility

Financial Responsibility

My Florida license is active, but I am not engaged in autonomous practice in the State of Florida.

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
	AMERICAN NURSES ASSOCIATION
	FLORIDA NURSES ASSOCIATION

Publications

This practitioner has authored the following publications in peer-reviewed medical literature within the previous ten years:

Title	Publication	Date
UNITED HEALTH SERVICES ADVANCED PRACTICE NURSES	ENHANCING PRIMARY CARE OF ELDERLY	01/01/1998
AS SYSTEM -WIDE CASE MANGERS FOR NURSES" TYING IT ALL ...	PEOPLE JOURNAL OF CASE MANAGEMENT	01/01/1994

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 not provided any national, state, local, county, or professional affiliations.