



MARLENE CESAR

License Number: ARNP3085972

Profession	Adv Reg Nurse Practitioner
License Status	Revoked/
Year Began Practicing	Not Provided
License Expiration Date	04/30/2018

General Information

Primary Practice Address

MARLENE CESAR
2020 NE 135TH STREET
NORTH MIAMI
NORTH MIAMI, FL 33181

Medicaid

This practitioner DOES participate in the Medicaid program.

Staff Privileges

ARNPs are not required to provide this information.

Email Address

Please contact at: marlenecesar51@gmail.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
PENNSYLVANIA	REGISTERED NURSE
PENNSYLVANIA	CRNP
NEW YORK	REGISTERED NURSE
NEW YORK	FAMILY NP
NEW YORK	PSYCHIATRIC NP

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
BARRY UNIVERSITY	MSN	8/1/1999 - 7/1/2002	08/13/2002
MIAMI DADE COMMUNITY COLLEGE	ADN,RN	1/1/1994 - 12/1/1994	12/01/1994

Other Health Related Degrees

Although ARNPs 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 MIAMI	OTHER PROGRAM	PYN - PSYCHIATRY/NEUROLOGY		CORAL GABLES	FLORIDA	08/29/2005	05/02/2006
DOCTOR NURSE PRACTICE	OTHER PROGRAM	FPP - PSYCHIATRY/FAMILY PRACTICE	NURSING	MIAMI	FLORIDA	01/08/2009	12/17/2009

Academic Appointments

Graduate Medical Education

The practitioner did not provide this mandatory information.

Academic Appointments

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

Title	Institution	City	State
CLINICAL INSTRUCTOR	UNIVERSITY OF MIAMI	MIAMI	FLORIDA

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 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:

For instructions on how to order copies of final disciplinary actions, please click [here](#).

[View Discipline Narratives](#)

[View Board Actions](#)

Taken By	Date Of Action	Description of Disciplinary Action	Under Appeal
FLORIDA DEPARTMENT OF HEALTH	07/20/2017	REVOCATION	NO

Type	Imposed	Due	Completed	Amt Due	Amt Recvd
RETURN LICENSE	8/7/2017		8/7/2017	\$ 0.00	\$ 0.00

The information below is self reported by the practitioner. For Florida health care practitioner discipline, see information listed above.

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:

AMERICAN ACADEMY OF NURSE PRACTITIONERS
SIGMA TETA THAU
AMERICAN NURSES ASSOCIATION
HAITIAN AMERICAN NURSES ASSOCIATION

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
CLINICAL PRACTICE NURSE AWARD	FNA

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.

FRENCH

CREOLE

SPANISH

Other Affiliations

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