



## SHANNON M KEATING

License Number: APRN9189449

Profession Advanced Practice Registered Nurse  
License Status Clear/Active  
Year Began Practicing 01/01/2000  
License Expiration 04/30/2026  
Date

## General Information

### Primary Practice Address

SHANNON M KEATING  
ST. MARY'S MEDICAL CENTER  
901 45TH ST  
WEST PALM BEACH, FL 33407

### Medicaid

This practitioner DOES participate in the Medicaid program.

### Staff Privileges

APRNs are not required to provide this information.

Institution Name	City	State
	PLANTATION	
	TAMARAC	
	N MIAMI BEACH	

### Email Address

Please contact at: [skeatingdnp@gmail.com](mailto:skeatingdnp@gmail.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
TENNESSEE	NURSE PRACTITIONER-INACTIVE STATUS
COLORADO	NURSE PRACTITIONER

## Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
VANDERBILT UNIVERSITY	MSN-ACNP	1/1/1998 - 1/1/2000	01/01/2000

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
VANDERBILT UNIVERSITY MASTERS IN NURSING	OTHER PROGRAM	AN - CRITICAL CARE MEDICINE		NASHVILLE	TENNESSEE	08/01/1998	08/01/2000
VANDERBILT UNIVERSITY MASTERS IN NURSING PROGRAM	OTHER PROGRAM	AN - CRITICAL CARE MEDICINE	ACUTE CARE NURSE PRACTITIONER	NASHVILLE	TENNESSEE	08/01/1998	08/01/2000
VANDERBILT UNIVERSITY	OTHER PROGRAM	FP - FAMILY PRACTICE	EMERGENCY MEDICINE	NASHVILLE	UNITED STATES	08/20/2012	04/30/2013
VANDERBILT UNIVERSITY	OTHER PROGRAM	OTHER	DNP STUDENT CURRENT	NASHVILLE	UNITED STATES	08/20/2012	03/20/2014

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
CLINICAL INSTRUCTOR OF CLINICAL BIOMEDICAL SCIENCE	FLORIDA ATLANTIC UNIVERSITY	BOCA RATON	FLORIDA
VANDERBILT UNIVERSITY - ADJUNCT INSTRUCTOR IN NURSING		NASHVILLE	TENNESSEE

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 NURSES CREDENTIALING CENTER	ACUTE CARE NURSE PRACTITIONER	
AMERICAN NURSES CREDENTIALING CENTER	FAMILY NURSE PRACTITIONER	
AMERICAN ACADEMY OF NURSE PRACTITIONERS	EMERGENCY NURSING	01/18/2017

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:

Membership Committee, American Academy of Emergency Nurse Pr

### Professional or Community Service Awards

This practitioner has not provided any professional or community service activities, honors, or awards.

Publications

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

Title	Publication	Date
OPHTHALMIC SLIT LAMP EXAMINATION (ADVANCED PRACTICE)	LIPPINCOTT PROCEDURES	04/30/2016

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 ACADEMY OF EMERGENCY NURSE PRACTITIONERS
AMERICAN ASSOCIATION OF NURSE PRACTITIONERS
FLORIDA NURSE PRACTITIONER NETWORK
THE NURSE PRACTITIONER COUNCIL OF PALM BEACH COUNTY