### MISTY B SWENDRYCK DR

### License Number: APRN9287232

Profession Advanced Practice Registered Nurse

License Status Clear/Active
Year Began Practicing Not Provided
License Expiration 07/31/2026

Date

## **General Information**

### **Primary Practice Address**

MISTY B SWENDRYCK DR NOT PRACTICING

This practitioner does not have an address of record on file with the department. If you have any questions, please contact the department at (850) 488-0595.

### **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: Misty@DrSwendryck.com

### **Other State Licenses**

This practitioner has indicated the following additional state licensure:

State	Profession
FLORIDA	RN
FLORIDA	ARNP
	CVRN-BC: AMERICAN BOARD OF CARDIOVASCULAR MEDICINE & CREDENT
	PCCN-BC: AACN CERTIFICATION CORPORATION

# **Education and Training**

### **Education and Training**

Institution Name	Degree Title	Dates of Attendance	Graduation Date
UNIVERSITY OF SOUTH FLORIDA	DNP		08/01/2017
UNIVERSITY OF SOUTH FLORIDA	MSN		12/01/2017
OHIO UNIVERSITY	BSN		12/01/2013

### **Other Health Related Degrees**

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

### **Professional and Postgraduate Training**

The practitioner did not provide this mandatory information.

# **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.

Title	Institution	City	State
DOCTORAL STUDENT GRIEVANCE COMMITTEE, BOARD MEMBE	R UNIVERSITY OF SOUTH FLORIDA	A TAMPA	A FLORIDA

## **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	ADULT-GERONTOLOGY ACUTE CARE NURSE PRACTITIONER	08/22/2016

# 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 the following criminal offenses:

Description of Offense	Date	State or Jurisdiction	Under Appeal	Status	Date Of Corroboration
DWI	08/30/2006	OHIO	NO	NOT CORROBORATED	
ASSUALT (2903.13)	01/21/2001	OHIO	NO	NOT CORROBORATED	

#### **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: USF Doctoral Student Grievance Committee, Board Member

Heart Rhythm Society: Allied Health Professional Member

Florida Nurse Practitioner Network

Boston Scientific: Electrophysiology Fellow

American Board of Cardiovascular Medicine: Certification hol American Association of Critical-Care Nurses: Active member Preventative Cardiovascular Nursing Assoc.: Certification INA: Worldwide Leader in Healthcare & Top Doctor of Nursing Founder: #NPsWhoBrunch Club. www.facebook.com/NPsWhoBrunch

#### **Professional or Community Service Awards**

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

Community Service/Award/Honor	Organization
WORLDWIDE LEADER IN HEALTHCARE & TOP DOCTOR OF NURSING IN FL	INTERNATIONAL NURSES ASSOCIATION
CLINICAL NURSE EXCELLENCE AWARDEE	BAYCARE HEALTH SYSTEMS

#### **Publications**

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

Title	Publication	Date
PROMOTING EVIDENCE-BASED INSERTABLE CARDIAC MONITOR PATIENT EDUCATION AND INSTRUCTION: INTRODUCTION AND EVALUATION OF A STANDARD NURSE TRAINING PROTOCOL	UNIVERSITY OF SOUTH FLORIDA & BAYCARE HEALTH SYSTEMS	08/01/2017
POSTER PRESENTATION. IMPLEMENTATION AND EVALUATION OF A STANDARD NURSE TRAINING PROTOCOL FOR INSERTABLE CARDIAC MONITORS	UNIVERSITY OF SOUTH FLORIDA	08/01/2017
MEDTRONICTM REVEAL LINQ INSERTABLE CARDIAC MONITOR, PATIENT EDUCATION AND COMPLIANCE TRAINING PROTOCOL COLLABORATION & SUBMISSION	MEDTRONIC	08/01/2017
PATIENT EDUCATION COLLATERAL MATERIALS: CARDIAC CATHETERIZATION (BC1108), CARDIAC CATHETERIZATION INTERVENTIONS (BC1109), ELECTROPHYSIOLOGY STUDIES (BC1110), CATHETER ABLATION (BC1111), IMPLANTABLE CARDIOVERTER DEFIBRILLATOR (BC1112), AND PACEMAKER (BC1113).	BAYCARE HEALTH SYSTEMS, & [COAUTHOR] SWENDRYCK, M.	01/01/2013
AVOIDING WRONG ROUTE MEDICATION ERRORS INVOLVING ORAL LIQUID MEDICATIONS BY FOLLOWING NATIONAL PATIENT SAFETY RECOMMENDATIONS THROUGHOUT ST. JOSEPH¿S HOSPITAL	OHIO UNIVERSITY	01/01/2013
DISSEMINATION OF BAYCARE QUALITY IMPROVEMENT, EVIDENCE BASED PRACTICE PROJECT.	PODIUM PRESENTATION AT THE 4TH ANNUAL BAYCARE NURSING RESEARCH AND EBP CONFERENCE, TAMPA, FLORIDA.	04/01/2018

### **Professional Web Page**

www.DrSwendryck.com

### **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.