



## RICHARD A TRUESDALE JR

License Number: ME47683

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	01/01/1983
License Expiration Date	01/31/2026
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

## General Information

### Primary Practice Address

RICHARD A TRUESDALE JR  
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

This practitioner has not indicated any staff privileges.

Institution Name	City	State
	OCALA	FLORIDA
	OCALA	FLORIDA
	OCALA	FLORIDA
	THE VILLAGES	FLORIDA
	SUMMERFIELD	FLORIDA

### Email Address

Please contact at: [rtruesjr76@gmail.com](mailto:rtruesjr76@gmail.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
FLORIDA	MEDICINE

### Florida Birth-Related Neurological Injury Compensation Association

If you are a Florida Allopathic (MD) or Osteopathic (DO) Physician, you are required to provide proof of payment of the Florida Birth-Related Neurological Injury Compensation Association (NICA) assessment as required by section 766.314, Florida Statutes. Payment of the initial and annual assessment are required of all Florida Allopathic and Osteopathic Physicians who do not qualify for an exemption as set forth in section 766.314(4)(b)4, Florida Statutes.

This practitioner has indicated that he/she is exempt from paying assessment.

# Education and Training

## Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
GEORGE WASHINGTON UNIVERSITY	MD	8/1/1979 - 5/1/1983	05/01/1983

## Other Health Related Degrees

This practitioner has completed the following other health related degrees:

School/University	City	State/Country	Dates Attended From	Dates Attended To	Degree Title
NORTHEASTERN UNIVERSITY	BOSTON	MASSACHUSETTS	09/06/1968	06/10/1973	B.S.P. BACHLOR OF SCIENCE IN PHARMACY
UNIVERSITY OF NORTH CAROLINA	CHAPEL HILL	NORTH CAROLINA	09/10/1977	08/15/1979	MPH MASTER OF PUBLIC HEALTH
UNIVERSITY OF FLORIDA	GAINESVILLE	FLORIDA	09/01/1973	08/01/1976	MS PHARMACY

## Professional and Postgraduate Training

This practitioner has completed the following graduate medical education:

Program Name	Program Type	Specialty Area	Other Specialty Area	State or City Country	Dates Attended From	Dates Attended To
WALTER REED ARMY MEDICAL HOSPITAL	INTERNSHIP	IM - INTERNAL MEDICINE		*** DISTRICT OF COLUMBIA	07/01/1983	06/30/1984
WALTER REED ARMY MEDICAL HOSPITAL	RESIDENCY	IM - INTERNAL MEDICINE		*** DISTRICT OF COLUMBIA	07/01/1984	06/30/1986
WALTER REED ARMY MEDICAL HOSPITAL	FELLOWSHIP	IM - GASTROENTEROLOGY		*** DISTRICT OF COLUMBIA	07/01/1988	06/30/1990

# 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
AMERICAN BOARD OF INTERNAL MEDICINE	IM - GASTROENTEROLOGY	

# Financial Responsibility

## Financial Responsibility

I have elected not to carry medical malpractice insurance however, I agree to satisfy any adverse judgments up to the minimum amounts pursuant to s. 458.320(5) (g)1, F. S. I understand that I must either post notice in a sign prominently displayed in my reception area or provide a written statement to any person to whom medical services are being provided that I have decided not to carry medical malpractice insurance. I understand that such a sign or notice must contain the wording specified in s. 458.320(5) (g), 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.

Settlement of a claim may occur for a variety of reasons that do not necessarily reflect negatively on the professional competence or conduct of the physician. A payment settlement of a medical malpractice action or claim should not be construed as creating a presumption that medical malpractice has occurred.

**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:  
CREDENTIALS COMMITTEE

Professional or Community Service Awards

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

Community Service/Award/Honor	Organization
AP ANATOMY PHYSIOLOGY TEACHER	TRINITY CATHOLIC HIGH SCHOOL
MEMBERSHIP	ALPHA OMEGA ALPHA HONOR SOCIETY
ANATOMY PHYSIOLOGY PROFESSOR	TRINITY CATHOLIC HIGH SCHOOL

Publications

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

Title	Publication	Date
HELICOBACTER PYLORI DIAGNOSES & TREATMENT	INTERNAL MEDICINE	09/01/1992
ANTIMICROBIAL VS. PLACEBO PROPHYLAXIS IN NON-CARDIAC	JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION	01/01/1979
COMPLIANCE, TREATMENT PRACTICES AND BLOOD PRESSURE CONTROL	JOURNAL OF CHRONIC DISEASES	01/01/1981
COMPLICATIONS OF ESOPHAGEAL VARICEAL SCLEROTHERAPY	GASTROENTEROLOGY CLINICS OF NORTH AMERICA	01/01/1991

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.