



JEROME MARTIN TRUE DC

License Number: CH5419

Profession Chiropractic Physician
 License Status Clear/Active
 Year Began Practicing 01/01/1985
 License Expiration 03/31/2028
 Date

General Information

Primary Practice Address

JEROME MARTIN TRUE DC
 921 SE. OCEAN BLVD
 NUMBER 1
 STUART, FL 34994

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

Email Address

Please contact at: jmtrue@gmail.com

Other State Licenses

This practitioner has not indicated any additional state licensures.

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
CLEVELAND CHIROPRACTIC COLLEGE	DC	1/1/1981 - 1/1/1984	01/01/1984

Other Health Related Degrees

This practitioner does not hold any additional health related degrees.

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
NEW YORK CHIROPRACTIC COLLEGE	RESIDENCY	N - NEUROLOGY		SENECA FALLS	NEW YORK	01/01/1988	02/20/1990

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 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
INTERNATIONAL ACADEMY OF CHIROPRACTIC NEUROLOGY	CHNE - CHIROPRACTIC NEUROLOGY	

Financial Responsibility

Financial Responsibility

I have obtained and will maintain professional liability coverage in an amount not less than \$100,000 per claim with a minimum annual aggregate of at least \$300,000 from an authorized insurer as defined under section 624.09, F.S., from an eligible surplus lines insurer as defined under s. 626.914(2), F.S., from the Joint Underwriting Association established under s.627.351(4), F.S., from a risk retention group as defined under s.627.942, F.S., from the Joint Underwriting Association established under s. 627.351(4), F.S., or through a plan of self-insurance as provided in s. 627.357, 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.

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 \$5,000.00 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
CHIROPRACTOR OF THE YEAR 2000	BROWARD COUNTY CHIROPRACTIC SOCIETY
CHIROPRACTOR OF THE YEAR 2019	FLORIDA CHIROPRACTIC ASSOCIATION

Publications

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

Title	Publication	Date
MYELOPATHY RADICULOPATHY AND PERIPHERAL ENTRAPMENT SYNDROMES	SCHOLARS CONSORTIUM LLC	01/01/2013
NERVE INJURIES IN COMPETITIVE SPORTS CHAPTER 7	CONSERVATIVE MANAGEMENT OF SPORTS INJURIES 2ED JONES AND BAR	04/01/2007
LASER THERAPY FOR THE TREATMENT OF RADICULOPATHY	HANDBOOK OF LOW LEVEL LASER THERAPY	01/01/2017
BEST PRACTICES IN COMPLEMENTARY HEALTHCARE LASER THERAPY SAFETY AND COMPLIANCE	LASER THERAPY SAFETY AND COMPLIANCE (FCA)	05/01/2020

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 ASSOCIATION OF SPINE PHYSICIANS
INTERNATIONAL ACADEMY OF CHIROPRACTIC NEUROLOGY