JUDY MAYNOR COMEAUX

License Number: APRN1615762

ProfessionAdvanced Practice Registered NurseLicense StatusClear/ActiveYear Began Practicing05/01/1996License Expiration04/30/2027DateClear/Active

General Information

Primary Practice Address

JUDY MAYNOR COMEAUX 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: jcomeaux@unf.edu

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
FL COMM COLLEGE OF JACKSONVILL	ASN	1/1/1982 - 12/1/1984	12/01/1984
UNIVERISTY OF N FLROIDA	BSN	9/1/1985 - 5/1/1991	05/01/1991
UNIVERSITY OF FLORIDA	MN	1/1/1994 - 8/1/1996	08/01/1996

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	Specialty	Other Specialty	St	tate or	Dates Attended	Dates Attended
	Type	Area	Area	City Co	ountry	From	To
UNIVERSITY OF FLORIDA		PD - PEDIATRICS		FL	LORIDA	01/01/0001	01/01/0001

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
ASSISTANT PROFESSOR - NURSING	UNIVERSITY OF NORTH FLORIDA	JACKSONVILLE	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	
	INTRAVENOUS NURSING	04/13/1990	

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 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
2014 LEADER OF LEADER AWARD	NATIONAL STUDENT NURSES ASSOCIATION
2013 GREAT 100 NURSES AWARD FLORIDA CLASS OF 2013	FLORIDA NURSES ASSOCIATION
GREAT 100 NURSES AWARD	GREAT 100 NURSES OF NORTHEAST FLORIDA INC
2005 OUTSTANDING ABSTRACT PRESENTATION	INFUSION NURSES SOCIETY
OUTSTANDING ALUMNI	FLORIDA COMMUNITY COLLEGE IN JACKSONVILLE
NURSE OF THE YEAR-PEDIATRICS	ST. VINCENT'S MEDICAL CENTER-JACKSONVILLE, FL

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 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

ASSOCIATION FOR VASCULAR ACCESS CERT: INFUSION NURSES SOCIETY - CRNI FLORIDA NURESES ASSOCIATION-FNA INFUSION NURSES SOCIETY-INS NATIONAL ASSOCIATION OF PEDIATRIC NURES PRACTITIONERS NATIONAL ASSOCIATION OF SCHOOL NURSES NATIONAL STUDENT NURSES ASSOCIATION - SUSTAINING MEMBER SIGMA THETA TAU-INTERNATIONAL HONOR SOCIETY OF NURSING