



## GRACE V BENEMERITO

License Number: APRN1758402

Profession Advanced Practice Registered Nurse  
License Status Clear/Active  
Year Began Practicing 06/01/1991  
License Expiration 04/30/2027  
Date

## General Information

### Primary Practice Address

GRACE V BENEMERITO  
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: [graceviadobenemerito@yahoo.com](mailto:graceviadobenemerito@yahoo.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 |
|----------------------------|--------------|---------------------|-----------------|
| ST. JUDE SCHOOL OF NURSING | RN/BSN       | 1/1/1974 - 1/1/1979 | 04/01/1979      |
| FLORIDA INTERNATIONAL UNIV | ARNP         | 1/1/1989 - 1/1/1991 | 03/01/1991      |

### 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 |
|----------------------------------|---------------|----------------|----------------------|-------------|------------------|---------------------|-------------------|
| FLORIDA INTERNATIONAL UNIVERSITY | OTHER PROGRAM | OTHER          | ADULT EDUCATION/MSN  | NORTH MIAMI | FLORIDA          | 01/01/1992          | 01/01/1994        |

# 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   |
|----------------|-------------|-------|---------|
| ARNP PRECEPTOR |             | MIAMI | FLORIDA |

# Specialty Certification

## Specialty Certification

The practitioner did not provide this mandatory information.

# Financial Responsibility

## Financial Responsibility

My Florida license is active, but I do not practice in the State of Florida.

# 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 not provided any professional or community service activities, honors, or awards.

### 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 indicated that the following languages other than English are used to communicate with patients, or that a translation service is available for patients, at his/her primary place of practice.

SPANISH  
TAGALOG FILIPINO

### Other Affiliations

This practitioner has provided the following national, state, local, county, and professional affiliations:

| Affiliation                                    |
|--|
| FLORIDA INTERNATIONAL UNIVERSITY ALUMNI ASSOC. |