



## DEBORAH IRENE FRANK

License Number: APRN1001592

Profession	Advanced Practice Registered Nurse
License Status	Clear/Active
Year Began Practicing	Not Provided
License Expiration Date	04/30/2027

## General Information

### Primary Practice Address

DEBORAH IRENE FRANK  
2065 DELTA WAY SUITE 1  
TALLAHASSEE, FL 32303

### 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: [deborah-frank@hotmail.com](mailto:deborah-frank@hotmail.com)

### Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
FLORIDA	APRN
FLORIDA	MFT
FLORIDA	RN

## Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
BOSTON UNIVERSITY	M.S.N.	1/1/1971 - 1/1/1973	05/01/1973
FLORIDA STATE UNIVERSITY	PH.D.	1/1/1980 - 1/1/1982	04/01/1982
UNIVERSITY OF WISCONSIN	B.S.N.	1/1/1966 - 1/1/1970	05/01/1970

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 STATE UNIVERSITY	OTHER PROGRAM	OTHER	POST MAST NURSE PRACT	TALLAHASSEE	FLORIDA	01/01/1994	08/01/1994
MASTERS & JOHNSON INSTITUTE	OTHER PROGRAM	OTHER	SEX THERAPY	ST LOUIS	MISSOURI	01/01/1976	01/01/1977

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 does not hold any certifications from specialty boards recognized by the Florida board which regulates the profession for which he/she is licensed.

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
NURSING EXCELLENCE 1994	TALLAHASSEE COMMUNITY HOSPITAL
TEACHING INCENTIVE PROGRAM AWARD 1995 & 1999	FLORIDA STATE UNIVERSITY
PROFESSOR EXCELLENCE AWARD 1999	FLORIDA STATE UNIVERSITY

Publications

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

Title	Publication	Date
CLINICAL EXCELLENCE FOR NURSE PRACTITIONERS	NURSES SELF-PERFORMING AND TEACHING OTHERS BSE	
THE ABNJ JOURNAL	SOCIAL SUPPORT AND POSTPARTUM DEPRESSION IN AA WOMEN	
JOURNAL OF THE AMERICAN ACADEMY OF NURSE PRACTITIONERS	COPING STRATEGIES OF RURAL FAMILIES	
DIRECTIONS IN PSYCHIATRIC NURSING	GENERALIZED ANXIETY DISORDERS	
DIRECTIONS IN PSYCHIATRIC NURSING	ACUTE STRESS DISORDERS AS A PREDICTOR OF PTSD	

Title	Publication	Date
JOURNAL OF COMMUNITY HEALTH NURSING	CAREGIVERS OF CHRONICALLY ILL ELDERLY	
DIMENSIONS OF CRITICAL NURSING	MOOD DISORDERS FOLLOWING TRAUMATIC BRAIN INJURY	
ADOLESCENCE	RURAL AND URBAN ADOLESCENTS PERCEPTIONS OF MENTAL HEALTH	
APPLIED NURSING RESEARCH	THE EFFECT OF AN ICU TELEPHONE INTERVENTION	
PERSPECTIVES IN PSYCHIATRIC CARE	A WANDERERS GROUP FOR INSTITUTIONALIZED CLIENTS	

### 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 SEX EDUCATORS COUNSELORS & THERAPI
CERT: A.A.S.E.C.T. - SEX THERAPISTS & EDUCATOR - 1978-PRES
CERT: M.F.S. - MARRIAGE & FAMILY THERAPISTS - 3/2003
ETA KAPPA LAMBDA
FAC APPT: ASST PROF NSG-UNIVERSITY OF WISCONSIN-1973-1976
FLORIDA NURSE ASSOCIATION
MARRIAGE & FAMILY THERAPY
PHI KAPPA PHI
SIGMA THETA TAU