

**CAMBRIDGE**  
INSTITUTE OF ALLIED HEALTH & TECHNOLOGY



**INSTITUTIONAL CATALOG  
ADDENDUM  
Altamonte Springs Campus  
July 18, 2016**

## **FACULTY & ADMINISTRATION:**

### **CORPORATE ADMINISTRATION**

Dr. Terrence W. LaPier, Ph.D. - President

David Colozzi-Chief Operating Officer

Julie Orloff, M.Ed., CMA, RMA, CPC – Vice President of Compliance & Regulatory

Laura Selvey – Corporate Director of Financial Aid

Dominique Werner – Corporate Registrar

Adrian Rorie, BBM – Controller

### **CAMPUS ADMINISTRATION**

Dr. Vicente Quinones - Campus Director – Full Time

Gordon Hunt – Director of Admissions – Full Time

Silvana Junike - Financial Aid Manager – Full time

Kristie McCarthy – Registrar – Full Time

Theresa Mantovani - Career Services Director – Full Time

Heather Arrington - Librarian

### **EDUCATION**

#### **Dr. Jennifer L. Norton RT(R), DOM – Full Time**

Niagara County Community College

Sanborn, New York

Florida College of Integrative Medicine

Orlando, Florida

Medical Assistant Program Director

#### **Yolande Bain, LPN – adjunct**

Valencia Community College, Orlando FL.

AS General Education

PN, Lincoln Technical, Orlando FL.

Nursing Assistant Clinical Instructor

#### **Carmen Brown, RN, BSN - adjunct**

Central Michigan University, Michigan

Medgar Evers College, New York

Nursing Assistant Instructor

#### **Marsha Pearce, LPN – Full Time**

Seminole Community College

Sanford, Florida

Patient Care Technician Instructor

#### **Heather Cintron, RN -adjunct**

Rollins College – BS Psychology

Seminole State College – AS Nursing

PN Instructor

**Rosalie Villecco, BSN, RN, CARN – Full Time**  
Daytona State College – Daytona Beach  
University of Central Florida - Orlando  
Program Director, Practical Nursing

**Brandy Greer, RN – adjunct**  
University of Central Florida - BSN, Orlando FL  
Seminole State College – AS Nursing, FL  
Practical Nursing Instructor

**Duane Carr, RN - adjunct**  
Nursing – Valencia Community College – Orlando, FL  
Phlebotomy Instructor

**Robin Hobbs, RN - adjunct**  
Nursing – Excelsior College – Albany, NY  
Practical Nursing Instructor

**Fiona Mackay, RN, MSN - adjunct**  
Chamberlain College of Nursing, Online  
Practical Nursing Instructor

**Mohammad Hassan Khan, NP - adjunct**  
FIU – Master of Science Nursing—Miami, FL  
FIU – Bachelors of Science Nursing – Miami, FL  
Practical Nursing Instructor

**Karen Schmitt, RN - adjunct**  
Seminole State College—Sanford, FL  
Practical Nursing Instructor

**Skye Roberts, RN, BSN - Fulltime**  
Bethune-Cookman University—Daytona Beach, FL  
Practical Nursing Clinical Coordinator

**Samantha Paramesvaran, BSN, MSN - adjunct**  
Johns Hopkins University—Baltimore, MD  
University of Central Florida—Orlando, FL  
Practical Nursing Instructor

**Megan Crane, RN, MSN – adjunct**  
Masters – University of Central Florida, Orlando  
BSN – University of Florida, Gainesville  
Practical Nursing Instructor

**Caron Drake, BSN, RN - adjunct**  
Bachelors-Nursing-Union College-Lincoln, Nebraska  
Practical Nursing Instructor

**Laura Dana, ASN, RN, MSN - Program Director - Fulltime**  
MSN – Walden University  
BSN – University of Central Florida  
ASN – Seminole State College

**Stephanie Staton, RN, BSN - adjunct**  
BSN – Florida Hospital College of Health Science  
ADN – Seminole State  
Practical Nursing Instructor

**Betty Ann Hodge, MSN, RN – adjunct**  
MSN – University of Central Florida  
BSN – University of Central Florida  
AAS – Manhattan Community College, NY

## **General Education Instructors**

**Adrian Isaza, DCM**  
Palmer College of Chiropractic Medicine – Doctor in Chiropractic Medicine  
Hofstra University – Hempstead, NY – BS Spanish  
NY School of Medical Assistant – Long Island, NY – Medical Assistant – Diploma

**Theresa Madison, PhD**  
Barry University – Miami Florida – Leadership Education and Counseling  
University of Georgia – Georgia – Masters in Social Work  
Georgia State – Georgia - Bachelors in Social Work  
Clayton College, Ga – AS in Psychology  
Vocational Technical Center – Orlando – Medical Assistant – Diploma

**Colette Purcell, MBA**  
Nova Southeastern University, South Florida – Masters in Business Administration  
Atlantic Union College – South Lancaster, Mass – Bachelors in computer Information Systems

**Ursula Scott, PhD**  
Capella University – Online – PhD in Higher Education  
Nova Southeastern University – online – Masters in English  
South Carolina State, Orangeburg SC – BA in Professional English

**Avner Stein, MBA**  
University of South Florida – Tampa, FL – MBA  
University of Florida – Gainesville, FL – Bachelors in Computer, Information Science

## ACADEMIC SCHEDULE

The following dates are potential start dates for each program of study and the expected completion date. These dates are subject to change, according to enrollment numbers and changes in a student's progression through the program.

<b>PROGRAM START CALENDAR</b>			
<b>PROGRAM</b>	<b>SHIFT</b>	<b>START DATE</b>	<b>ANTICIPATED END DATE</b>
<b>Patient Care Technician</b>	<b>Day</b>		
		7/28/2016	4/27/2017
		9/6/2016	6/1/2017
		10/4/2016	6/30/2017
		10/19/2016	7/21/2017
		11/15/2016	8/18/2017
		12/8/2016	9/11/2017
<b>Nursing Assistant</b>	<b>Day</b>		
		8/9/2016	9/14/2016
		9/19/2016	10/24/2016
		10/25/2016	11/30/2016
		12/5/2016	1/24/2017
<b>Phlebotomy</b>	<b>Day</b>		
		8/24/2016	11/9/2016
		11/14/2016	1/24/2016
<b>Practical Nursing</b>	<b>Day</b>		
		8/1/2016	9/22/2017
		11/7/2016	12/22/2017
<b>Practical Nursing</b>	<b>Eve</b>		
		10/17/2016	4/9/2018
<b>Associate of Science in Nursing</b>	<b>Day</b>		
		8/29/2016	8/31/2018
<b>Medical Assistant</b>	<b>Day</b>		
		8/2/2016	7/28/2017
		8/29/2016	8/8/2017
		10/3/2016	9/29/2017
		11/1/2016	10/25/2017
		11/30/2016	11/17/2017

Scheduled Breaks:
Spring 2016: March 21-25
Summer 2016: July 4-8
Winter 2016: December 19-30 January 2-6

## Holiday Schedule

*Students do not attend class on the following holidays:*

New Year's Day  
 Martin Luther King, Jr. Day  
 President's Day  
 Memorial Day  
 Independence Day (Observed)  
 Labor Day  
 Veterans Day  
 Thanksgiving Day & day after Thanksgiving Day  
 Christmas Eve & Christmas Day

## Hours of Operation

Monday thru Friday 8:30am – 10:00pm

## Tuition

Program	Application Fee	Tuition	Other Fees not in Tuition
Medical Assistant	\$50.00**	\$14,000.00	\$30.00 Grad Fee
AS in Nursing	\$50.00**	\$46,750.00	\$30.00 Grad Fee
Phlebotomy	\$50.00**	\$1,916.00	N/A
Practical Nursing	\$50.00**	\$21,825.00	\$30.00 Grad Fee
Nursing Assistant	\$50.00**	\$1,056.00	N/A
Patient Care Technician	\$50.00**	\$11,840.00	\$30.00 Grad Fee

The above tuition prices include the cost of textbooks, one set of scrubs & lab fees.

**\*\* Indicated all application fees are Non Refundable**

# Update to the Catalog Page 27 Drug and Alcohol Policy

## **DRUG FREE CAMPUS AND WORKPLACE POLICY**

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Cambridge Institute of Allied Health and technology is committed to providing a drug-free campus and workplace environment. As an institution of higher education, the College recognizes the need to establish a drug and alcohol awareness program to educate faculty, staff and students about the dangers of drug and alcohol abuse. This policy is established as required by the Drug-Free Workplace Act of 1988 and the Drug-Free Schools and Communities Act of 1989.

### **DRUG FREE AWARENESS PROGRAM**

All employees and students are informed that the college has established a Drug Free Awareness Program informing students and employees via institutional catalog and posted flyers on campus about:

- Our policy of maintaining a drug-free school;
- Any available drug counseling, rehabilitation, and student assistance programs; and
- The penalties that may be imposed upon students for drug violations occurring on campus property, as defined in the sanctions section below.
- Available referral to drug counseling and rehabilitation for employees can be obtained through United Way and students may contact the United Way for counseling and rehabilitation at 211 or [www.211.org](http://www.211.org). A list of resources is also available in Appendix V.

### **POSSESSION, SALE AND/OR CONSUMPTION OF NON-PRESCRIPTION AND ILLEGAL DRUGS**

No student may be in illegal possession of, deliver, dispense, distribute, administer, manufacture or wholesale any controlled substance, including marijuana, narcotics, hallucinogens, and other chemical analog or drug-related paraphernalia prohibited by State or Federal Drug Laws. (Federal law requires that students be informed that Federal and State laws prohibit possession and/or use of illicit drugs. Cambridge Institute complies with Federal and State laws regarding illicit drugs. The campus reserves the right to investigate any suspicious activity regarding nonprescription and illegal drugs. Investigation may include but is not limited to classroom and/or vehicle inspection, canine drug scan or drug screening in cases of strong suspicion of drug use. (Refusal to submit to these measures at time of request may be viewed as strong evidence, which may result in suspension.)

Cambridge Institute has a “Zero-Tolerance” policy regarding the unlawful use, sale, possession or distribution of illegal drugs and alcohol on School property, or as part of any School activity. Misconduct violations relating to the Student, Faculty and/or Employee Codes of Conduct are subject to disciplinary actions. Consequences for inappropriate behavior can be severe, up to and including dismissal from the college. If any individual is apprehended for violating any alcohol or other drug related law while at a college location or activity, the college will fully cooperate with federal and state law enforcement agencies. The college abides by federal Drug-Free Workplace and Drug-Free Schools and Communities Act regulations regardless of individual state legalization.

## **SANCTIONS**

The following are prohibited under the Code of Conduct applicable to students:

- Use, possession or distribution of narcotic or other controlled substances, except as expressly permitted by law, or being under the influence of such substances.
- Use, possession or distribution of alcoholic beverages, except as expressly permitted by law and Cambridge College regulation.

The sanctions listed below may be imposed upon any covered person found to have violated the Code of Conduct. The listing of the sanctions should not be construed to imply that covered persons are entitled to progressive discipline.

The sanctions may be used in any order and/or combination that Cambridge Institute deems appropriate for the conduct in question.

- a. Warning - A verbal or written notice that the respondent is in violation of or has violated Cambridge Institute regulations.
- b. Probation - A written reprimand with stated conditions in effect for a designated period of time, including the probability of more severe disciplinary sanctions if the respondent is found to be violating any Cambridge Institute regulation(s) during the probationary period.
- c. Cambridge Institute Suspension – temporary separation of the respondent from all Cambridge Institute locations.
- d. Cambridge Institute Expulsion - Permanent separation of the respondent from all Cambridge Institute locations.

## **Faculty and Staff**

Faculty and Staff of the institution are prohibited from:

- Performing school business under the influence of a controlled substance.
- Possession, use, sale of a controlled substance.
- Furnishing a controlled substance to a minor.

Sanctions for these violations could lead up to termination of employment. These sanctions are in addition to any criminal sanctions that may be imposed.



## STATE STATUTES

The State Statutes that govern sale and consumption of alcoholic beverages for both Florida and Georgia are listed in Appendix IV.

## DESCRIPTION OF HEALTH RISKS

The following are descriptions of dangerous drugs:

Drugs and/or alcohol use contribute to (Nature 2010; 468:475):

- 33% of all suicides
- 33% of all fatal motor vehicle accidents
- 50% of all homicides

**Alcohol** is a potentially addictive drug of significant physical and psychological consequence. Alcohol is a central nervous system depressant that affects all neurological functions. At relatively low levels it affects one's judgment and decision-making, and at higher levels it impairs the functioning of one's vital organs and can result in a coma or death. Alcohol is an irritant to the gastrointestinal tract and moderate overindulgence ordinarily results in nausea, vomiting, and diarrhea. In addition to these significant physical consequences, there are a number of less obvious consequences to alcohol use. For example, the effects of alcohol on sleep have been well documented. Consuming several drinks before bedtime has been found to decrease the amount of REM (rapid eye movement) or dreaming sleep. The consequences of being deprived of REM sleep are impaired concentration and memory, as well as anxiety, tiredness, and irritability. Additionally, research has demonstrated that alcohol tends to decrease fear and increase the likelihood that an individual will accept risks. This lack of inhibition and judgment is a major contributor to the extraordinarily high percentage of serious accidents and accidental deaths related to alcohol use. Prolonged and excessive use of alcohol usually causes progressively more serious erosion of the gastrointestinal tract lining ranging from gastritis to ulcers and hemorrhage. Damage to the pancreas is frequent among those who have used alcohol. Interestingly, while 10% of the adult population is estimated to be addicted to beverage alcohol, (i.e., they are alcoholics), this 10% of the population comprises 35% of those hospital in-patients who receive major surgery in any given year. Alcoholism is the third major killer in the United States, second to heart disease and cancer, and acute alcohol intoxication is the second leading cause of death by poisoning.

**Marijuana (Cannabis) (nicotina glauca)** is an illegal drug that impairs memory, perception, judgment, and hand-eye coordination skills. The tar content in cannabis smoke is at least 50% higher than that of tobacco and thus smokers run the added risk of lung cancer, chronic bronchitis, and other lung diseases. Recently, the medical community has diagnosed the existence of an AA motivational syndrome that affects moderate to chronic users and includes symptoms of loss of energy, motivation, effectiveness, concentration, ability to carry out long-term plans, and performance in school and work.

**LSD (Lysergic Acid Diethylamide)** is a semi-synthetic drug regarded as a hallucinogenic. Short-term effects of this drug are generally felt within an hour of consumption and may last from two to 12 hours. Physiologically the user experiences increased blood pressure, rise in body temperature, dilated pupils, rapid heartbeat, muscular weakness, trembling, nausea, chills,

numbness, loss of interest in food, and hyperventilation. Fine motor skills and coordination are usually impaired, as are perception, thought, mood, and psychological processes. Long-term effects may include flashbacks, weeks and even months after taking the drug, mental illness, prolonged depression, anxiety, psychological dependence, and suicidal thoughts.

**PCP (Phencyclidine Hydrochloride)** is a white crystalline powder that was originally used as a local anesthetic, but due to extreme side effects, was discontinued in 1967. In humans, PCP is a difficult drug to classify in that reactions may vary from stupor to euphoria and resemble the effects of a stimulant, depressant, anesthetic, or hallucinogen. Short-term effects include hyperventilation, increase in blood pressure and pulse rate, flushing and profuse sweating, general numbness of the extremities, and muscular in coordination. At higher doses it causes nausea, vomiting, blurred vision, loss of balance, and disorientation. It produces profound alteration of sensation, mood and consciousness, and can cause psychotic states in many ways indistinguishable from schizophrenia. Large doses have been known to cause convulsions, permanent brain damage, and coma.

**Psilocybin** is a hallucinogenic drug occurring naturally in about 20 species of Mexican mushrooms and is also produced synthetically. It is a white powder made of fine crystals and distributed in tablet, capsule, or liquid form. Shortly after taking psilocybin, a user may experience increased blood pressure, rapid heartbeat, and an increase in body temperature, dry mouth, dilated pupils, and some degree of agitation or excitement. This is followed by a decrease in the ability to concentrate or stay in touch with reality. (Hallucinations, as well as altered perceptions of time and space, may occur.) The effects are usually shorter lasting than those of LSD, yet the dangers are very similar.

**Cocaine** is a naturally occurring stimulant drug which is extracted from the leaves of the cocoa plant. Cocaine is sold as a white translucent crystalline powder frequently cut to about half its strength by a variety of other ingredients including sugars and cleaning powders. It is one of the most powerfully addictive drugs in use today. Short-term effects of cocaine include constricted peripheral blood vessels, dilated pupils, increased heart rate and blood pressure. It also causes appetite suppression, pain indifference, possible vomiting, visual, auditory, and tactile hallucinations, and occasionally paranoia. Long-term effects include nasal congestion, collapse of nasal septum, restlessness, irritability, anxiety, and depression. Overdoses or chronic use may result in toxicity which includes symptoms of seizures followed by respiratory arrest, coma, cardiac arrest, and/or death.

**Cocaine Free-Base or Crack** is the result of converting street cocaine to a pure base by removing the hydrochloric salt in many of the “cutting” agents. The end result is not water soluble, and therefore, must be smoked. It is much more dangerous than cocaine because it reaches the brain in seconds, and the intensified dose results in a sudden and intense physical reaction. This response lasts a few minutes and is followed by deep depression, loss of appetite, difficulty in sleeping, feeling revulsion for self, and worries and obsessions about getting more crack. Consequently, users often increase the dose and frequency of use resulting in severe addiction that includes physical debilitation and financial ruin. Physiologically, seizures followed by respiratory arrest and coma or cardiac arrest and death may accompany long-term use.

**Amphetamines** are central nervous system stimulants that were once used medically to treat a variety of symptoms including depression and obesity. They may be taken orally, sniffed, or injected into the veins. Short-term effects disappear within a few hours and include reduction of appetite, increased breathing and heart rate, raised blood pressure, dilation of pupils, dry mouth, fever, sweating, headache, blurred vision and dizziness. Higher doses may cause flushing, rapid and irregular heartbeat, tremor, loss of coordination, and collapse. Death has occurred from ruptured blood vessels in the brain, heart failure, and very high fever. Psychological effects include increased alertness, postponement of fatigue, a false feeling of well-being, restlessness, excitability, and a feeling of power. Long-term effects include drug dependence and the risk of drug induced psychosis. Withdrawal includes extreme fatigue, irritability, strong hunger, and deep depression that may lead to suicide.

**Opioids** are substances that act on opioid receptors to produce morphine-like effects. Opioids are most often used medically to relieve pain. Opioids include *opiates*, an older term that refers to such drugs derived from *opium*, including morphine itself. Other opioids are semi-synthetic and synthetic drugs such as hydrocodone, oxycodone and fentanyl; antagonist drugs such as naloxone and endogenous peptides such as the endorphins. Accidental overdose or concurrent use with other depressant drugs commonly results in death from respiratory depression. Because of opioid drugs' reputation for addiction and fatal overdose, most are highly controlled substances. Illicit production, smuggling, and addiction to opioids prompted treaties, laws and policing which have realized limited success. In 2013 between 28 and 38 million people used opioids illicitly (0.6% to 0.8% of the global population between the ages of 15 and 65). In 2011 an estimated 4 million people in the United States used opioids recreationally or were dependent on them. Current increased rates of recreational use and addiction are attributed to over-prescription of opioid medications and inexpensive illicit heroin.

## **DRUG AND ALCOHOL COUNSELING**

More information about alcohol and drugs and the risks they pose to health is available from the Campus Director at each campus. Outside counseling services and support groups are available. See page 78 of our catalog for a list of resources. Hyperlinks are provided for easy access. On most sites you can enter your Zip Code for centers closest to you. A comprehensive list of resources are available in Appendix V.

## **PARENT NOTIFICATION FOR DRUG AND ALCOHOL VIOLATIONS**

In accordance with the Higher Education Amendments of 1998 to the Family Educational Rights and Privacy Act (FERPA) of 1974, Cambridge Institute has the right to notify the parent or legal guardian of a student who is under the age of 21 when the student has been found guilty through disciplinary channels of violating any Cambridge Institute rule regarding alcohol or illegal drugs. Cambridge Institute also reserves the right to notify parents at any time regarding matters of student discipline.

STATE STATUTES (DRUG AND ALCOHOL)

FLORIDA STATE STATUES  
Title XXXIV  
ALCOHOLIC BEVERAGES AND TOBACCO  
Chapter 562  
BEVERAGE LAW: ENFORCEMENT

CHAPTER 562

BEVERAGE LAW: ENFORCEMENT

- 562.01 Possession of untaxed beverages.
- 562.02 Possession of beverage not permitted to be sold under license.
- 562.025 Possession of beverages as food ingredients.
- 562.03 Storage on licensed premises.
- 562.06 Sale only on licensed premises.
- 562.061 Misrepresentation of beverages sold on licensed premises.
- 562.07 Illegal transportation of beverages.
- 562.11 Selling, giving, or serving alcoholic beverages to person under age 21; providing a proper name; misrepresenting or misstating age or age of another to induce licensee to serve alcoholic beverages to person under 21; penalties.
- 562.111 Possession of alcoholic beverages by persons under age 21 prohibited.
- 562.12 Beverages sold with improper license, or without license or registration, or held with intent to sell prohibited.
- 562.121 Operating bottle club without license prohibited.
- 562.13 Employment of minors or certain other persons by certain vendors prohibited; exceptions.
- 562.131 Solicitation for sale of alcoholic beverage prohibited; penalty.
- 562.14 Regulating the time for sale of alcoholic and intoxicating beverages; prohibiting use of licensed premises.
- 562.15 Unlawful possession; unpaid taxes.
- 562.16 Possession of beverages upon which tax is unpaid.
- 562.165 Production of beer or wine for personal or family use; exemption.
- 562.17 Collection of unpaid beverage taxes.
- 562.18 Possession of beverage upon which federal tax unpaid.
- 562.20 Monthly reports by common and other carriers of beverages required.
- 562.23 Conspiracy to violate Beverage Law; penalty.
- 562.24 Administration of oaths by director or authorized employees.
- 562.25 State bonded warehouses.
- 562.26 Delivering beverage on which tax unpaid.
- 562.27 Seizure and forfeiture.
- 562.28 Possession of beverages in fraud of Beverage Law.
- 562.29 Raw materials and personal property; seizure and forfeiture.
- 562.30 Possession of beverage prima facie evidence; exception.
- 562.31 Possession of raw materials prima facie evidence; exception.

- 562.32 Moving or concealing beverage with intent to defraud state of tax; penalty.
- 562.33 Beverage and personal property; seizure and forfeiture.
- 562.34 Containers; seizure and forfeiture.
- 562.35 Conveyance; seizure and forfeiture.
- 562.36 Beverage on conveyance prima facie evidence; proviso.
- 562.38 Report of seizures.
- 562.408 Exercise of police power.
- 562.41 Searches; penalty.
- 562.42 Destruction of forfeited property.
- 562.44 Donation of forfeited beverages or raw materials to state institutions; sale of forfeited beverages.
- 562.45 Penalties for violating Beverage Law; local ordinances; prohibiting regulation of certain activities or business transactions; requiring nondiscriminatory treatment; providing exceptions.
- 562.451 Moonshine whiskey; ownership, possession, or control prohibited; penalties; rule of evidence.
- 562.452 Curb service of intoxicating liquor prohibited.
- 562.45 Curb drinking of intoxicating liquor prohibited.
- 562.45 Vendors to be closed in time of riot.
- 562.455 Adulterating liquor; penalty.
- 562.46 Legal remedies not impaired.
- 562.47 Rules of evidence; Beverage Law.
- 562.48 Minors patronizing, visiting, or loitering in a dance hall.
- 562.50 Habitual drunkards; furnishing intoxicants to, after notice.
- 562.51 Retail alcoholic beverage establishments; rights as private enterprise.
- 562.61 Sale, offer for sale, purchase, or use of alcohol vaporizing devices prohibited.

## **DRUG AND ALCOHOL COUNSELING RESOURCES**

### **Florida**

In Florida, the Substance Abuse and Mental Health (SAMH) Program, within the Florida Department of Children and Families (DCF), is the single state authority on substance abuse and mental health as designated by the federal Substance Abuse and Mental Health Services Administration.

The Florida Department of Health partners with DCF in seeking to prevent and reduce substance abuse and its negative effects on health. Providing this website ([www.floridahealth.gov](http://www.floridahealth.gov)) is one of many ways we hope to educate the public and health care providers.

### **TREATMENT AND REFERRAL SERVICES**

The U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration's (SAMHSA) National Drug and Alcohol Treatment Referral Service

provides free and confidential information in English and Spanish for individuals and family members facing substance abuse and mental health issues. 24 hours a day, 7 days a week.

SAMHSA's Toll-Free Treatment Referral Helpline: 1-800-662-HELP (4357)  
Online Treatment Facility Locator located on [www.floridahealth.gov](http://www.floridahealth.gov).