

## Licensee Information

### Stephanie Deal Roberts - MD

**License #:** 34334      **License Status:** Active      **Public Action:** No  
**Issue Date:** 07/20/1991      **Renewal Date:** 12/19/2026

#### Active Supervisees

Name	Type	Status	Approved
Jones, Kathleen Rose	Physician Assistant	Active	04/22/2015
Richey, Emily Brooke	Physician Assistant	Active	08/22/2017
Smith, Carrie Rae	Physician Assistant	Active	04/26/2016

#### North Carolina Hospital Admitting Privileges

##### Location

None Reported

#### Out of State Active/Inactive Licenses

##### State

None Reported

#### Out of Country Active/Inactive Licenses

##### Country

None Reported

#### Address

Physicians East P.A.  
 Urgent Care Center  
 1711 E. Arlington Blvd  
 Greenville, NC 27858-5872  
[252-355-4357](tel:252-355-4357)  
[www.PhysiciansEast.com](http://www.PhysiciansEast.com)

#### Information

**Days patients are seen at this practice:**

**Practice philosophy:**

**Non-English languages in which office is able to provide clinical services (e.g. Hindi, Spanish):**

**Non-English languages in which practitioner is able to provide clinical services (e.g. Hindi, Spanish):**

**Participates in Medicare:**

Yes

**Accepting new Medicare patients:**

No

**Participates in Medicaid:**

No

**Accepting new Medicaid patients:**

No

**Uses electronic medical records:**

Yes

**Medical School**

School	Graduation
East Carolina Univ	1990

**Post Graduate Training**

"Last Year" does not necessarily mean that the licensee completed his/her training program. (In NC, a physician can be licensed without completing such a program.)

Institution	Specialty	State, Country	Training Program	Last Year
Pitt County Memorial Hospital	Family Medicine	NC, US	Residency	1993
Pitt County Memorial Hospital	Family Medicine	NC, US	Internship	1991

**Current Board Certification and Year of Certification/Recertification**

Physicians should not list non-ABMS or non-AOA specialty boards unless the board meets the criteria set forth in the NC Medical Board's Advertising and Publicity Position Statement.

Primary/Subspecialty	Year
Family Medicine	2014

**Area of Practice**

Area Of Practice	Primary
Family Medicine	Yes
Urgent Care	

**Current Membership in Medical Professional Organizations**

Membership
American Academy of Family Physicians

**Honors & Awards**

Honor/Award	Given By	Date
None Reported		

**Public Service**

Name of Clinic	Service Description	Date
None Reported		

**Current Academic Appointments**

Title	Institution	City, State, Country
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None Reported

## Publications

Title
None Reported

## Section 1: Adverse Actions

### North Carolina Medical Board Public Actions

Date	Description	Link
None Reported		

### Other Regulatory Board or Agency Public Actions

Date	Name of Board/Agency	Action Taken	Link
None Reported			

### Health Care Institution Suspensions and Revocations

Date	Health Care Institution	Action Taken
None Reported		

## Section 2: Administrative Actions

Actions listed in this section are considered non-disciplinary by the Board. In situations where administrative actions are taken, the licensee may not have met certain statutory requirements or may have failed to follow correct administrative procedures.

### North Carolina Medical Board Reentry Agreement

Date	Description	Link
None Reported		

### North Carolina Special Purpose Licensing Agreement

Date	Description	Link
None Reported		

### Malpractice Information

Incident Date	Payment Date	Area of Practice	City, State, Country	Response
None Reported				

### Misdemeanor/DUI/DWI Conviction Information

Conviction Date	Conviction	Jurisdiction	Sentence
None Reported			

### Felony Conviction Information

Conviction Date	Conviction	Jurisdiction	Sentence
None Reported			

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