

Licensee Information

Dain Edsel Vines - MD

License #: 200001017 **License Status:** Active **Public Action:** No
Issue Date: 07/22/2000 **Renewal Date:** 06/16/2026

Active Supervisees

Name	Type	Status	Approved
Carlton, Nichole Renee	Physician Assistant	Active	04/05/2025
Cline-Grant, Amanda Michelle	Nurse Practitioner	Active	11/22/2024
Gamewell, Marilyn Martin	Nurse Practitioner	Active	03/17/2025
Headley-Duncan, Kendra Keneisha	Nurse Practitioner	Active	09/04/2025
Hooks, Cheryl	Nurse Practitioner	Active	03/13/2025
Hough, Charlotte Lee	Nurse Practitioner	Active	05/29/2025
Layton, Jennifer Linn	Nurse Practitioner	Active	11/27/2025
Mcdowell, Elizabeth Kathryn	Physician Assistant	Active	06/10/2025
Morley, Beth	Nurse Practitioner	Active	04/16/2025
Presley, Melissa Ann	Nurse Practitioner	Active	02/12/2025
Slade, Shykela	Nurse Practitioner	Active	04/06/2025
Smith, Angela	Nurse Practitioner	Active	03/31/2026

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

Family Centered Healthcare
 400 Millstone Dr, Ste 100
 PO Box 1119
 Hillsborough, NC 27278
 919-245-3247
 www.fchealthcare.com

Information

Days patients are seen at this practice:

Mon-Fri

Practice philosophy:

I aim to treat individuals and their families without regard to age, sex, education, ethnicity, or socio-economic status. I want each patient to feel heard, accepted, cared for, and supported.

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

None

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

None

Participates in Medicare:

Yes

Accepting new Medicare patients:

Yes

Participates in Medicaid:

Yes

Accepting new Medicaid patients:

Yes

Uses electronic medical records:

Yes

Medical School

School	Graduation
Univ. Of North Carolina	1996

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
University of North Carolina at Chapel Hill	Family Medicine	NC, US	Fellowship	2002
University of North Carolina at Chapel Hill	Family Medicine	NC, US	Residency	2000
University of North Carolina at Chapel Hill	Family Medicine	NC, US	Internship	1996

Current Board Certification and Year of Certification/Recertification

Physicians should not list non-ABMS or non-BOA 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	2000

Area of Practice

Area Of Practice	Primary
Family Medicine	
Family Practice	Yes

Current Membership in Medical Professional Organizations

Membership

None Reported

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
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

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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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