

## Licensee Information

### Benjamin Granger Atkeson - MD

**License #:** 9701232      **License Status:** Active      **Public Action:** No  
**Issue Date:** 04/01/2004      **Renewal Date:** 06/21/2027

#### Active Supervisees

Name	Type	Status	Approved
Atik, Adam Aydin	Physician Assistant	Active	06/04/2025
Ballard, Stacy Leigh	Nurse Practitioner	Active	10/08/2025
Beaumont, Jolene	Nurse Practitioner	Active	11/04/2025
Benson, Stephanie Michelle	Nurse Practitioner	Active	02/22/2026
Bryan, Brianna Nicole	Physician Assistant	Active	08/20/2021
Edgerton, Markiesha Willette	Nurse Practitioner	Active	09/29/2016
Grinham, Keleigh Clare	Physician Assistant	Active	12/17/2025
Jarolimek, Cherie Lynn	Nurse Practitioner	Active	09/02/2025
Locklear, Anthony Elijah	Physician Assistant	Active	03/11/2026
Mooring, Shannon Brittain	Nurse Practitioner	Active	07/01/2015
Pattan, Seth William	Physician Assistant	Active	01/07/2015
Pusey, Kyle Jacob	Physician Assistant	Active	10/06/2014
Stanley, Karson Makenna	Physician Assistant	Active	11/10/2021
Tapia, Michael Anthony	Physician Assistant	Active	08/24/2021
Zurcher, Latesha Pait	Nurse Practitioner	Active	01/23/2026

#### North Carolina Hospital Admitting Privileges

Location
Johnston Medical Center Smithfield
Johnston Memorial Hospital
Rex Healthcare

#### Out of State Active/Inactive Licenses

State
North Carolina

Ohio

## Out of Country Active/Inactive Licenses

Country
None Reported

## Address

NCHV  
2076 NC Hwy 42 W  
Clayton, NC 27520  
[216-359-0322](tel:216-359-0322)

## Information

Days patients are seen at this practice:

Participates in Medicare:

Practice philosophy:

Accepting new Medicare patients:

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

Participates in Medicaid:

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

Accepting new Medicaid patients:

Uses electronic medical records:

## Medical School

School	Graduation
Georgetown University School of Medicine	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
Cleveland Clinic	Cardiology	OH, US	Fellowship	2004
Duke University Medical Center	Internal Medicine	NC, US	Residency	1999
Duke University Medical Center	Internal Medicine	NC, US	Internship	1997

## 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
Cardiology	2014
Internal Medicine	1999

## Area of Practice

Area Of Practice	Primary
Cardiology	Yes
Cardiovascular Disease	
Nuclear Cardiology	

## Current Membership in Medical Professional Organizations

Membership
FACC

## 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
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None Reported
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### 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			