

Licensee Information

Matthew Stuart McKinney - MD

License #: 2009-00427 **License Status:** Active **Public Action:** No
Issue Date: 03/30/2009 **Renewal Date:** 07/19/2026

Active Supervisees

Name	Type	Status	Approved
Balls, Jason Willard	Physician Assistant	Active	06/19/2025
Barham, Jordan Painter	Physician Assistant	Active	02/04/2022
Barnett, Ryan Matthew	Nurse Practitioner	Active	10/01/2024
Conroy, Lauren Michelle	Nurse Practitioner	Active	11/13/2020
Everhart, Carmen Jane	Nurse Practitioner	Active	07/23/2024
Garey, Summer Elizabeth	Nurse Practitioner	Active	08/26/2025
Haymore, Amber Dawn	Nurse Practitioner	Active	09/21/2025
Hicks, Lauren Nicole	Nurse Practitioner	Active	05/31/2024
Johnson, Renita Miriam	Physician Assistant	Active	12/02/2024
Kenney, Jenna Marie	Physician Assistant	Active	08/16/2023
Park, Hanna	Nurse Practitioner	Active	07/21/2025
Prince, Mariah Shaquanda	Nurse Practitioner	Active	04/07/2017
Russell, Zoe Elise	Physician Assistant	Active	10/01/2025
Scott, Ashley	Nurse Practitioner	Active	08/07/2023
Venable Wolff, Caitlyn Jean	Nurse Practitioner	Active	06/14/2025
Wyman, Kimberly Michelle	Nurse Practitioner	Active	07/18/2017

North Carolina Hospital Admitting Privileges

Location

Duke University Hospital

Out of State Active/Inactive Licenses

State

None Reported

Out of Country Active/Inactive Licenses

Country

None Reported

Address

Duke Hematologic Malignancies
2400 Pratt Street
Box 3872 DUMC
Durham, NC 27705
[919-684-8964](tel:919-684-8964)
<https://www.dukehealth.org/locations/duke-blood-cancer-center>

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
Duke University School of Medicine	2006

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
Duke University Medical Center	Other - Hematology/Medical Oncology	NC, US	Fellowship	2013
Duke University Medical Center	Internal Medicine	NC, US	Residency	2009

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
Hematology	2014
Internal Medicine	2009
Medical Oncology	2019

Area of Practice

Area Of Practice	Primary
Hematology and Oncology, Internal Medicine	Yes
Internal Medicine	

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

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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