

## Licensee Information

John Thomas Atkins, III - MD

**License #:** 2009-01834      **License Status:** Active      **Public Action:** No  
**Issue Date:** 10/09/2009      **Renewal Date:** 10/07/2026

### Active Supervisees

| Name                    | Type                | Status | Approved   |
|-------------------------|---------------------|--------|------------|
| Kittleson, Jeanie Marie | Physician Assistant | Active | 10/27/2022 |

### North Carolina Hospital Admitting Privileges

| Location      |
|---------------|
| None Reported |

### Out of State Active/Inactive Licenses

| State          |
|----------------|
| Georgia        |
| Pennsylvania   |
| South Carolina |

### Out of Country Active/Inactive Licenses

| Country       |
|---------------|
| None Reported |

### Address

Dorn VA Medical Center  
 6439 Garners Ferry Road  
 Columbia, SC 29209  
[803-776-4000](tel:803-776-4000)

### Information

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

Mon - Thur

**Practice philosophy:**

I treat patients with pulmonary disease to include COPD and asthma as well as sleep disorders. I emphasize lifestyle changes to include smoking cessation, weight reduction through dietary modification and exercise, and compliance with medical treatments.

**Non-English languages in which office is able to provide**

**Participates in Medicare:**

Yes

**Accepting new Medicare patients:**

Yes

**Participates in Medicaid:**

Yes

**Accepting new Medicaid patients:**

clinical services (e.g. Hindi, Spanish):

Yes

None

Uses electronic medical records:

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

Yes

None

## Medical School

| School   | Graduation |
|--|------------|
| University of North Carolina at Chapel Hill School of Medicine | 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 |
|-------------------------------|---|----------------|------------------|-----------|
| Brooke Army Medical Center    | Other - Pulmonary Disease/ Critical Care Medicine | TX, US         | Fellowship       | 1996      |
| Brooke Army Medical Center    | Internal Medicine                                 | TX, US         | Residency        | 1993      |
| Letterman Army Medical Center | Other - Medicine                                  | CA, 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 |
|------------------------|------|
| Critical Care Medicine | 2009 |
| Internal Medicine      | 2009 |
| Pulmonary Disease      | 2009 |

## Area of Practice

| Area Of Practice                                       | Primary |
|--|---------|
| Critical Care Medicine                                 |         |
| Pulmonary Disease and Critical Care, Internal Medicine | Yes     |

## Current Membership in Medical Professional Organizations

| Membership                           |
|--------------------------------------|
| American College of Chest Physicians |
| American College of Physicians       |
| American Medical Association         |

## 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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