

## Licensee Information

### Douglas Landry Jarvis - MD

**License #:** 2020-02933      **License Status:** Active      **Public Action:** No  
**Issue Date:** 06/15/2020      **Renewal Date:** 07/17/2026

#### Licensee Photograph



#### Active Supervisees

| Name                          | Type                | Status | Approved   |
|-------------------------------|---------------------|--------|------------|
| Andrews, Jamie Michael        | Physician Assistant | Active | 03/13/2022 |
| Arreguin, Jodi Ann            | Physician Assistant | Active | 12/28/2021 |
| Binzer, Anna Marie            | Physician Assistant | Active | 03/24/2022 |
| Frebel, Kevin Patrick William | Physician Assistant | Active | 11/12/2022 |
| Linchuck, Benjamin Leonard    | Physician Assistant | Active | 08/31/2020 |
| Riznyk, Michael John          | Physician Assistant | Active | 04/14/2021 |
| Tuten, Taylor Amanda          | Physician Assistant | Active | 03/10/2026 |
| Vance, Kristen Elizabeth      | Physician Assistant | Active | 09/26/2023 |

#### North Carolina Hospital Admitting Privileges

| Location                                    |
|---|
| Novant Health Charlotte Orthopedic Hospital |
| Novant Health Matthews Medical Center       |
| Novant Health Presbyterian Medical Center   |

#### Out of State Active/Inactive Licenses

| State         |
|---------------|
| None Reported |

#### Out of Country Active/Inactive Licenses

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

## Country

None Reported

## Address

Novant Health Orthopedic & Sports Medicine Ballantyne  
10905 Providence Road W  
Suite 270  
Charlotte, NC 28277

## 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 |
|---|------------|
| University of Texas Southwestern Medical Center at Dallas | 2014       |

## 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 School of Medicine | Other - Orthopedic Surgery Hip Preservation | NC, US         | Fellowship       | 2021      |
| Duke University School of Medicine | Orthopedic Sports Medicine                  | NC, US         | Fellowship       | 2020      |
| Wake Forest School of Medicine     | Orthopedic Surgery                          | NC, US         | Residency        | 2019      |
| Wake Forest School of Medicine     | Orthopedic Surgery                          | NC, US         | Internship       | 2015      |

## 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 |
|----------------------|------|
| Orthopaedic Surgery  | 2022 |

## Area of Practice

| Area Of Practice           | Primary |
|----------------------------|---------|
| Orthopedic Sports Medicine | Yes     |
| Orthopedic Surgery         |         |

## Current Membership in Medical Professional Organizations

### Membership

|   |
|---|
| American Orthopedic Society for Sports Medicine |
|---|

|   |
|---|
| Arthroscopic Association of North America |
|---|

|                             |
|-----------------------------|
| Piedmont Orthopedic Society |
|-----------------------------|

### 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   |            |              |          |