

## Licensee Information

### Margie Jean Deck - PA-C

**License #:** 0010-07679      **License Status:** Active      **Public Action:** No  
**Issue Date:** 10/19/2017      **Renewal Date:** 03/28/2027

### Licensee Photograph



### Active Supervisor

| Name                    | Type | Status | Approved   |
|-------------------------|------|--------|------------|
| Keith, Stephen Paul, MD | MD   | Active | 11/21/2025 |

### 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

Southeast X-Ray  
 4113 Capitol Street  
 Durham, NC 27704  
[919-294-6007](tel:9192946007)

### Information

**Days patients are seen at this practice:**  
 1

**Participates in Medicare:**

**Accepting new Medicare patients:**

**Practice philosophy:**

I strive to provide compassionate, respectful, and reliable service as a medical provider working in completing Veteran's disability examinations.

**Participates in Medicaid:**

**Accepting new Medicaid patients:**

**Uses electronic medical records:**

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

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

**PA School**

| School  | Graduation |
|---|------------|
| Interservice Physician Assistant Program (IPAP) | 2005       |

**Area of Practice**

| Area Of Practice         | Primary |
|--------------------------|---------|
| Veteran Disability Exams | Yes     |

**Current Membership in Medical Professional Organizations**

| Membership                         |
|------------------------------------|
| Triangle Area Physician Assistants |

**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   |            |              |          |