

Licensee Information

Amy Elizabeth Hinton - MD

License #: 2020-00888 **License Status:** Active **Public Action:** No
Issue Date: 03/28/2020 **Renewal Date:** 07/06/2026

Active Supervisees

Name	Type	Status	Approved
Doying, Joy Beth	Nurse Practitioner	Active	02/16/2024
English, Cara Lynn	Physician Assistant	Active	09/13/2022
Keller, Jennifer Ardell	Nurse Practitioner	Active	12/09/2025
Norris, Leslie Watkins	Nurse Practitioner	Active	03/02/2026
Stamey, Emily Nicole	Nurse Practitioner	Active	04/21/2020

North Carolina Hospital Admitting Privileges

Location
Harris Regional Hospital
Highlands-Cashiers Hospital, Inc.

Out of State Active/Inactive Licenses

State
Texas
Washington

Out of Country Active/Inactive Licenses

Country
None Reported

Address

Four Seasons
 571 South Allen Rd
 Flat Rock, NC 28731
 828-692-6178

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):

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

Participates in Medicaid:

Accepting new Medicaid patients:

Uses electronic medical records:

Medical School

School	Graduation
Baylor College of Medicine	2010

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
University of Florida at Jacksonville	Other - Hospice and Palliative Medicine	FL, US	Fellowship	2018
University of Texas Health Science Center at Tyler	Family Medicine	TX, US	Residency	2013

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
Family Medicine	2013
Hospice and Palliative Medicine	2018

Area of Practice

Area Of Practice	Primary
Family Medicine - Hospice and Palliative Medicine	Yes

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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