

THIS IS TO CERTIFY THAT

Regan Elizabeth Riley

is licensed / registered by the New Mexico Regulation and Licensing Department
in accordance with provisions of laws in the State of New Mexico

License / Registration No.	License / Registration Type
A-2032-17	Doctor of Osteopathy
03/14/2017	07/01/2017
Signature of holder:	

State of New Mexico



BOARD OF OSTEOPATHIC MEDICAL EXAMINERS

THIS IS TO CERTIFY THAT

Regan Elizabeth Riley

LICENSE NUMBER: A-2032-17

HAVING COMPLIED WITH THE LAWS OF THE STATE OF NEW MEXICO REGULATING OSTEOPATHIC MEDICINE IS HEREBY AUTHORIZED TO PRACTICE OSTEOPATHIC MEDICINE AND SURGERY.

ISSUE DATE: 03/14/2017

DATE EXPIRES: 07/01/2017

THIS CERTIFICATE MUST BE CONSPICUOUSLY POSTED IN PLACE OF BUSINESS



NEW MEXICO BOARD OF OSTEOPATHIC MEDICAL EXAMINERS

New Mexico Regulation and Licensing Department

BOARDS AND COMMISSIONS DIVISION

Toney Anaya Building ▪ PO Box 25101 ▪ Santa Fe, New Mexico 87504
(505) 476-4622 ▪ Fax (505) 476-4665 ▪ www.RLD.state.nm.us/boards

March 14, 2017

Regan Elizabeth Riley
[REDACTED]

Dear Dr. Regan Elizabeth Riley:

The New Mexico Board of Osteopathic Medical Examiners has reviewed and approved your application for licensure. You are now able to practice osteopathic medicine in the State of New Mexico. Your License Number is: A-2032-17. Enclosed is a computer-generated license to hang on your wall with a wallet card.

All current New Mexico osteopathic licenses expire on July 1 of every year. We will e-mail you a renewal form on or before May 15. You are required by Board Statute and Board Rule to keep the Board informed at all times of your current practice location information, home address, and phone numbers so that we can communicate with you on a timely basis. The board assumes no responsibility for renewal applications not received by the licensee for any reason. It is the licensee's responsibility to make timely request for the renewal form if one has not been received thirty days prior to license expiration date. You can access our Rules and Statute on the boards web page www.RLD.state.nm.us/boards for current Board news. It is important that this be checked periodically, especially for any upcoming legislation changes or rule changes.

Although the Board mails out notices to renew your license, it is the responsibility of the licensees to ensure the license to practice is renewed in a timely manner, whether the notice has been received or not.

If you should have any questions please feel free to give me a call.

Congratulations! We are glad to have you on board.

Sincerely,

Pamela Tivis

Pamela Tivis
Licensing Specialist

Copy

New Mexico Regulation and Licensing Department

Board of Osteopathic Medical Examiners

Toney Anaya Building • PO Box 25101 • Santa Fe, New Mexico 87504
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Non-refundable \$400 Application Fee

All licensing information provided is public information.

APPLICATION FOR LICENSURE

THE BOARD DOES NOT HAVE THE AUTHORITY TO GRANT A WAIVER OF ANY REQUIREMENT. IF THIS APPLICATION IS INCOMPLETE UPON ONE (1) YEAR OF RECEIPT, THE APPLICATION AND SUPPORTING DOCUMENTATION WILL BECOME NULL AND VOID.

Full Name:	Regan Elizabeth Riley	JAN25 17 9:35AM
Mailing address:	[REDACTED]	
City/State/Zip:	[REDACTED]	
Contact Phone:	[REDACTED]	
Email:	[REDACTED]	
Date of Birth:	M80	Place of Birth: Seattle, WA
Social Security Number:	[REDACTED]	
DEA Number:	AB7003469-B1554	
Are you an AOA member?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	AOA Member Number: 337079

EXAMINATION INFORMATION

This application is for licensure by endorsement of:

FLEX National Board USMLE COMLEX State Exam (State _____)

Date Final Part Exam Passed: 04-15-2015

MEDICAL EDUCATION

Date entered into program on August 2009 at the Midwestern University - College of Osteopathic Medicine
(DATE MATRICULATED) (NAME OF UNIVERSITY)

located in Glendale, AZ
(CITY AND STATE)

POST GRADUATE MEDICAL EDUCATION

Hospital/Institution Location	Month/Year	to	Month/Year
Internship: University of New Mexico	June 2013		June 2014
Residency: University of New Mexico	July 2014		current (June 2018)

SPECIALTIES AND BOARD CERTIFICATIONS

Specialty	Board Certified	Board Eligible	Date Certified
Obstetrics + Gynecology	N/A	N/A	N/A

STATE LICENSES

STATE OR PROVINCE	LICENSE #	DATE ISSUED	DATE EXPIRED
New Mexico	RO7-2013	6-1-2017	current

Date: 1-25-17
 Amount \$ 400⁰⁰
 Check/MO/CC# 743
 Receipt# 1917917

OSTEOPATHIC PHYSICIAN APPLICATION

HOSPITAL AFFILIATIONS

List all hospital/clinical staffs on which you have served in the past five (5) years.		
Dates	Hospital/Clinic Name	Location (Address, City, State)
6/2013-current	University of New Mexico	2211 Lomas Blvd NE ALBU, NM 87106

GENERAL BACKGROUND INFORMATION

1. HAVE YOU EVER BEEN CHARGED WITH OR CONVICTED OF A FEDERAL, STATE, OR LOCAL STATUTE? Yes No
2. HAVE YOU, DURING THE PAST FIVE YEARS, HAD PERSONAL OR LEGAL PROBLEMS WITH ALCOHOL, NARCOTICS, STIMULANTS OR HABIT FORMING DRUGS? Yes No
3. HAVE YOU DURING THE PAST 5 YEARS BEEN TREATED OR HOSPITALIZED FOR MENTAL ILLNESS? Yes No
4. HAVE YOU EVER HAD ANY ACTION TAKEN AGAINST YOU FOR MEDICAID, MEDICARE, OR INSURANCE FRAUD? Yes No
5. HAVE YOU EVER SURRENDERED YOUR PROVIDER NUMBER OR THE STATUS OF A PROVIDER FOR THE MEDICARE OR MEDICAID PROGRAM BY ANY DIVISION OR AGENCY OF ANY STATE OR FEDERAL GOVERNMENT? Yes No
6. HAVE YOU EVER HAD A MEDICAL LICENSE DENIED, REVOKED, SUSPENDED OR LIMITED BY ANY STATE LICENSING BOARD OR PROVINCE? Yes No
7. HAVE YOU EVER FAILED TO PASS ANY EXAMINATION OR PART THEREOF, REQUIRED BY ANY STATE BOARD OR PROVINCE FOR LICENSURE? (FLEX, NATIONAL BOARD, STATE EXAM, COMLEX, USMLE) Yes No
8. HAVE YOU EVER RESIGNED OR WITHDRAWN YOUR APPLICATION FROM A HOSPITAL STAFF OR PROFESSIONAL MEDICAL GROUP? Yes No
9. HAVE YOUR HOSPITAL PRIVILEGES EVER BEEN REVOKED OR WITHDRAWN FOR ANY REASON? Yes No
10. HAVE YOU SURRENDERED HOSPITAL PRIVILEGES, STATE LICENSES, CONTROLLED SUBSTANCES REGISTRATION, OR DEA REGISTRATION AFTER DISCIPLINARY CASES OR INVESTIGATIONS WERE STARTED? Yes No
11. HAVE YOU EVER OR DO YOU HAVE ANY MALPRACTICE CLAIMS, SETTLEMENTS, JUDGMENTS OR MEDICALLY RELATED LAWSUITS AGAINST YOU OR PENDING? Yes No
12. HAVE YOU PREVIOUSLY APPLIED FOR A NEW MEXICO OSTEOPATHIC MEDICAL LICENSE OR PERMIT? Yes No
13. ARE YOU CURRENTLY MORE THAN THIRTY DAYS IN ARREARS IN PAYMENTS OF AMOUNTS REQUIRED TO BE PAID PURSUANT TO AN OUTSTANDING JUDGMENT AND ORDER FOR CHILD SUPPORT IN NEW MEXICO OR ANY OTHER STATE? Yes No

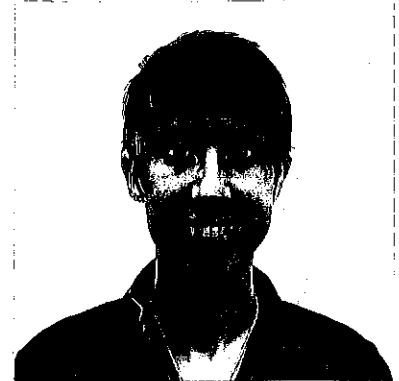
IF YOU HAVE ANSWERED "YES" TO ANY OF THE ABOVE QUESTIONS, GIVE A DETAILED EXPLANATION IN A NOTARIZED AFFIDAVIT ATTACHED TO THIS APPLICATION.

[Signature] 1/20/17
 Signature of Applicant Date

BEFORE ME on this 20 day of January, 2017, personally appeared the above-named applicant who, being by my duly sworn-upon oath, states that all statements and answers contained in this application are true and correct.
[Signature]
 Notary Public

My Commission Expires: 7/20/2019

SEAL



Midwestern University



Arizona College of Osteopathic Medicine

*On the recommendation of the Faculty, the Board of Trustees of
Midwestern University has conferred upon*

Regan Elizabeth Riley

the Degree of

Doctor of Osteopathic Medicine

*and has granted this Diploma as evidence that the requirements
prescribed by the College have been fulfilled for this Degree.*

Awarded in the City of Mendota in the State of Arizona on the

30th day of May, 2013.

William A. Andrews
Chairman of the Board of Trustees

[Signature]
Secretary/Treasurer of the Board of Trustees



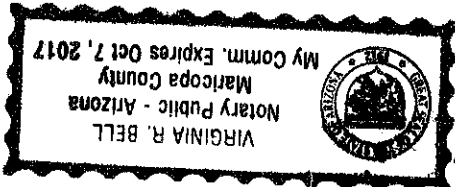
Karlton N. Beppinger Ph.D.
President and Chief Executive Officer

Jon A. Kemper, D.O.
Dean

Certified as copy of original document

Virginia R. Bell 11/17/17

Virginia R. Bell, Notary



The original was been mailed directly to you from Midwestern University.

Regan

Midwestern University



Arizona College of Osteopathic Medicine

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Doctor of Osteopathic Medicine

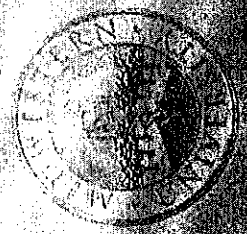
*and has granted this Diploma as evidence that the requirements
prescribed by the College have been fulfilled for this Degree.*

Awarded in the City of Glendale in the State of Arizona on the

30th day of May, 2013.

William A. Andrews
Chairman of the Board of Trustees

[Signature]
Secretary/Treasurer of the Board of Trustees



Karlton W. Boegger, PhD
President and Chief Executive Officer

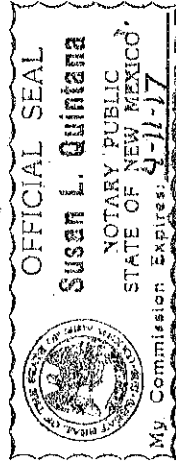
David Kamper, D.O., DAcO



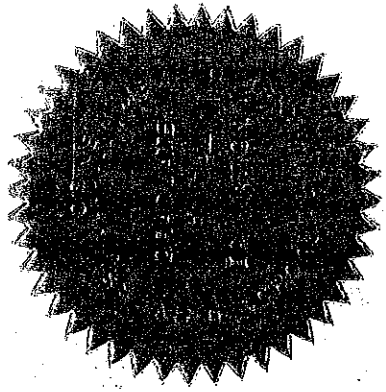
Certificate Awarded to

Regan E. Riley, D.O.

In recognition of successful completion
of the accredited program as
Intern in Obstetrics/Gynecology
June 2013 - June 2014



Susan L. Quinana



Patricia Cheng

Associate Dean for Graduate
Medical Education

[Signature]

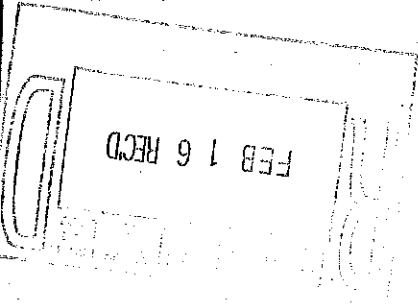
Program Director

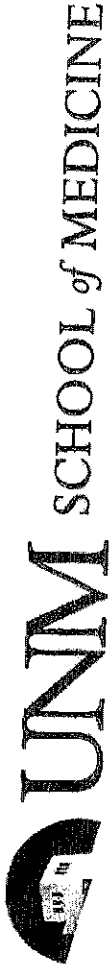
[Signature]

Dean, School of Medicine

[Signature]

Department Chair







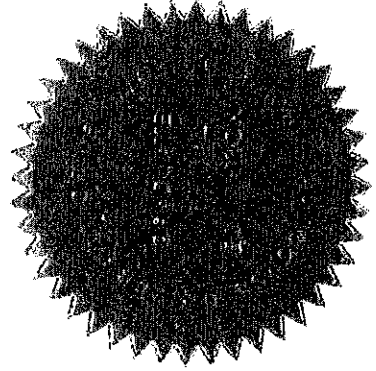
Certificate Awarded to


Regan E. Riley, D.O.

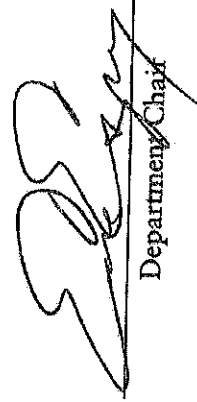
In recognition of successful completion
of the accredited program as
Intern in Obstetrics/Gynecology
June 2013 - June 2014


Associate Dean for Graduate
Medical Education


Dean, School of Medicine




Program Director


Department Chair



BOARD OF OSTEOPATHIC MEDICAL EXAMINERS

New Mexico Regulation and Licensing Department
BOARDS AND COMMISSIONS DIVISION
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CERTIFICATION OF MEDICAL EDUCATION

This is my authorization to release all information in your files, favorable or otherwise, to the New Mexico Board of Osteopathic Medical Examiners.

Regan E. Riley
PRINT FULL NAME

[REDACTED]
ADDRESS

[REDACTED] 1980
DATE OF BIRTH

[REDACTED]
CITY, STATE, ZIP

[Signature]
SIGNATURE

02.10.2017
DATE

This certifies that Regan E. Riley D.O., entered the program on
08/10/2009 at the Midwestern University located in
Glendale, AZ
(DATE MATRICULATED) (PHYSICIAN'S NAME) (NAME OF UNIVERSITY) (CITY AND STATE)

The person named attended the required courses and received a diploma conferring the degree of Doctor of Osteopathy on 05/30/2013.
(DATE GRADUATED)

[Signature]
(SIGNATURE OF PRESIDENT, DEAN, REGISTRAR)

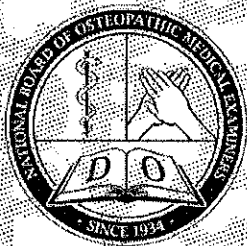
University Seal

Registrar
(TITLE) (DATE)

02/10/2017

THIS FORM WILL NOT BE ACCEPTED IF RETURNED BY THE APPLICANT RETURN DIRECTLY TO THE ABOVE ADDRESS

New Mexico Regulation and Licensing Department
BOARDS AND COMMISSION DIVISION



COMPREHENSIVE OSTEOPATHIC MEDICAL LICENSING EXAMINATION - USA

Official Transcript

JHM2317 LB(001)

New Mexico Board of Osteopathic
P.O. Box 25101
Santa Fe, NM 87504

Examinee: Riley, Regan Elizabeth
NBOME ID: [REDACTED]

Date of Birth: [REDACTED] 1980

EXAMINATION	DATE COMPLETED	PASS / FAIL	3 - DIGIT STANDARD MINIMUM		2 - DIGIT STANDARD MINIMUM		NOTE
			SCORE	PASSING	SCORE	PASSING	
<i>Level 1</i>							
	24-Jun-2011	Pass	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	
<i>Level 2 Cognitive Evaluation (CE)</i>							
	27-Jun-2012	Pass	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	
<i>Level 2 Performance Evaluation (PE)</i>							
	10-Sep-2012	Pass	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	
<i>Level 3</i>							
	15-Apr-2015	Pass	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	

The National Board of Osteopathic Medical Examiners, Inc. does hereby certify the above to be a true report of the examinee.

Date Prepared: January 18, 2017

1122791210929096

-- please see reverse for information and description of notes -- v3.0

National Board of Osteopathic Medical Examiners, Inc.
8765 West Higgins Road Suite 200 Chicago, IL 60631-4174
Phone: 773/714-0622 Fax: 773/714-0631



BOARD OF OSTEOPATHIC MEDICAL EXAMINERS

New Mexico Regulation and Licensing Department

BOARDS AND COMMISSIONS DIVISION

Toney Anaya Building ▪ P.O. Box 25101 ▪ Santa Fe, New Mexico 87504
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January 26, 2017

Regan Elizabeth Riley

Dear Dr Regan Elizabeth Riley,

Thank you for your application for licensure with the New Mexico Board of Osteopathic Medical Examiners. The Board office has reviewed your submittal and determined the following documentation is still outstanding:

- ~~Notarized Copy of Residency/Internship Certificate~~
- ~~Certified Medical Education Form~~
- ~~AOA Report~~
- ~~Two Letters of Recommendation~~
- ~~Verification of Licensure from~~
- ~~FSMB Report~~

Please note, at the time the application was received the listed items were outstanding. Additional documentation may be received in the office by the time you receive this status letter. Once we receive all the required documentation your application will be given final review.

To obtain forms, please log onto www.rld.state.nm.us/boards. If you have any questions or require further information, please contact the Board Office at (505) 476-4622.

Sincerely,

Pamela Tivis

Pamela Tivis
Licensing Specialist

CC COPY