

Professional Profile

Profile Details

Warning! It is a federal crime to knowingly transfer or use a means of identification of another person by using the information displayed in this web page and contents in any attached link and/or documents, with the intent to commit, or to aid or abet, any unlawful activity that constitutes a violation of Federal law (Identity Theft and Assumption Deterrence Act of 1998, 18 USC 1028 (a)(7) with Maximum Penalty 25 years' imprisonment/\$250,000 fine) and any applicable state or local law, such as Minn. Stat. 609.527 Identity Theft.

	ina Marie Sandoval				₹ New
se: Physician and S	Surgeon - #65290				
icensee Public Inf	ormation				
Licensure Designat	ed Address: 3901 Rainbo	w Blvd.			
	Kansas City,	KS 66160			
Web Site:		Birth Year: 1989			
E-mail:		Gender: Female			
icense Information	1				
License Number:	65290	License T	ype: Physician	and Surgeon	
Expiration Date:	11/30/2019	Grant Dat	te: 04/04/201	9	
License Status:	Resigned Inactive				
Disciplinary Action:	No No				
Corrective Action:	No				
Disciplinary Action	s by Other States (Repor	ted to the Board since Ju	ilv 1. 2013): No		
			1, 1, 2015). 110		
Public - Other: No)				
ducation					
Medical School:		OIS, COLLEGE OF MEDI	CINE AT Degree:	M.D.	
Healcal School.	PEORIA, PEORIA USA		Sine Al Degree.	W.D.	
Location:	Peoria, IL USA		Date:	05/08/2016	
Practice Locations	(Self-Reported Informati	ion)			
	University of Kansas Medica	al Center		Secondary	Location: N/A
3901 Rainbow Blvd. Kansas City, MO 6616	50				
	Unknown			, Phone:	Unknown
ost-Graduate Traii	ning (Self-Reported Info	rmation, Not Verified by		,	
Program	Specialty	SI	tart Date	End Date	Completed
Area of Specialty (C Page)	Certified by American Bo	ard of Medical Specialti	es or American Osteo	pathic Specialty Boards; Ref	fer to the Note at the End of this
Source	Board	Certification / Sub	-Certification		
riminal Conviction	ns (Self-Reported Inform	ation)			
	escription	Conviction Date	Court of Juris	sdiction Sa	ntence/Comment
Type chilled				34	intence, comment
t	Direct qu			esota Board of Medical Practice.	
		Ielephone: (612) 617-	-2130 e-mail: medical.bc	pard@state.mn.us	

Disclaimer

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Primary Source Verification

The license information in this web page has been designed and implemented to meet primary source verification requirements of the Joint Commission accredited hospitals and the National Committee for Quality Assurance (NCQA) certified managed care organizations, and it can be used as the primary source verification.

Note on 'Area of Specialty'

Specialty board certification information was obtained directly from American Board of Medical Specialties (ABMS), www.abms.org, or American Board of Osteopathic Medical Specialties (AOA), www.aoa-net.org, as a written direct verification, quarterly update, or from the official ABMS or AOA primary source verification website. Minnesota's Physician Profile contains specialty certifications only from ABMS and AOA, because they are universally recognized and easily verifiable. Other organizations certify and endorse specialization with their own standards and procedures. You may wish to ask your physician about such certifications if he or she does not list one of the specialties from the ABMS or AOA.

Maintenance of Certification (MOC)

MOC is an ABMS program of lifelong learning and requires physicians to self-assess their competency. Further information can be found at www.abms.org. The American Osteopathic Association also has a continuous lifelong process "Osteopathic Continuous Certification" or OCC. Further information is available at www.osteopathic.org.

Criminal Conviction

Minnesota Statute 214.072 (a)(1) requires the Board to post licensee's "conviction of a felony or gross misdemeanor occurring on or after July 1, 2013, in any state or jurisdiction."

IMLC (Interstate Medical Licensure Compact)

License Types with the designation (IMLC) denote that this Minnesota Physician & Surgeon License was issued though the IMLC process. Please refer to https://imlcc.org for more information about the Interstate Medical Licensure Compact.