

Stephanie BALL

License Number:	6164
License Type:	Medical Doctor
License Status:	Active
Initial License Date:	Dec-01-1990
Expiration Date:	Jun-30-2021
Public Address:	PO Box 9869
Public City:	Reno
Public State:	Nevada
Public ZIP Code:	89507
Public Country:	United States
Public Phone Number:	9253371076

Specialties

Specialty
Occupational Medicine

Education History

Institution	Degree/Certificate	Date Enrolled	Date To
University of Nevada SOM / Reno, NV	Medical Doctor Degree	N/A	May-18-1985

Postgraduate Training

Institution	Program Type	Specialty Type	Start Date	End Date
University of New Mexico Hospital / Albuquerque, NM	Internship	Internal Medicine	Jun-24-1985	Jun-24-1986
University of New Mexico Hospital / Albuquerque, NM	Residency	Internal Medicine	Jul-01-1986	Aug-31-1988

Board Actions

Summary	Attachments
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Summary	Attachments
None.	

Current Employment Status / Conditions / Restrictions on License / Prior Malpractice Claims

Summary	Attachments
None.	

Supervisor To

Licensee	Relationship	Date of Association
Salmonsens, Bryanne Irene	Additional Supervisor	Feb-04-2021