

**BEFORE THE BOARD OF HEALING ARTS
OF THE STATE OF KANSAS**

F I L E D

In the Matter of)
)
SHANE ALEXANDER, D.O.)
License No. 05-25295)
_____)

DEC 10 2001

**KANSAS STATE BOARD OF
HEALING ARTS**

ORDER OF RETROACTIVE REINSTATEMENT OF LICENSE

NOW, on this 8th day of December, 2001, comes on for consideration before the Kansas State Board of Healing Arts (hereafter "Board"), sitting as a whole as presiding officer in the Conference Proceeding pursuant to the provisions of K.S.A. 77-533, the request of Shane Alexander, D.O. (hereafter "Licensee") for retroactive reinstatement of license. Licensee appeared *pro se*.

After reviewing the request and being otherwise duly advised in the premises, the Board finds as follows:

1. Licensee was issued a license to practice medicine and surgery in Kansas August 13, 1994.
2. Licensee's license number 05-25295 was canceled November 1, 2001 for failure to renew.
3. Licensee applied for reinstatement of his license, and the license was reinstated on November 20, 2001.
4. A letter requesting retroactive reinstatement was received on November 20, 2001 stating that the license was allowed to lapse due to oversight.

5. The failure of Licensee to renew his license and the cancellation of such license on November 1, 2001 was due to inadvertency and mistake.
6. Proof of insurance has been provided.
7. For good cause shown, Licensee's license should be retroactively reinstated to show continuous active status.

IT IS THEREFORE ORDERED AS FOLLOWS:

1. That the findings here and above made be and the same are made the order of the Board.
2. That the license of Shane Alexander, D.O. to practice medicine and surgery in the State of Kansas originally issued August 13, 1994, be made effective retroactively from and after November 1, 2001.

IT IS SO ORDERED.

DATED this 10th day of December, 2001.

KANSAS STATE BOARD OF HEALING ARTS


LAWRENCE T. BUENING, JR. #9125
Executive Director
Kansas State Board of Healing Arts
235 S. Topeka Blvd.
Topeka, KS 66603
(785) 296-3680

CERTIFICATE OF SERVICE

11th I hereby certify that a true and correct copy of the foregoing was served on the 11 day of December, 2001 by depositing same in the United States mail, first-class postage prepaid and addressed to:

Shane Alexander, D.O.
Kingman Health Clinic
760 Ave D West
Kingman, Kansas 67068

and a copy was hand-delivered to:

Charlene Abbott
Licensing Administrator
Kansas Board of Healing Arts
235 SW Topeka Blvd.
Topeka KS 66603

