

**MEDICAL EXAMINER OFFICE
GALVESTON COUNTY**

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Erin Barnhart, M.D.
Chief Medical Examiner



Monica Patel, D.O.
Deputy Medical Examiner

June 23, 2025

Galveston County Commissioners Court
722 Moody
Galveston, Texas 77550

Re: Requesting appointment of Dr. Billie Shine as Deputy Medical Examiner

Dear Members of the Court,

I am requesting that the Commissioners' Court approve the appointment of Billie Shine, D.O. as a Deputy Medical Examiner at the University of Texas Medical Branch/Galveston County Medical Examiner's Office. This appointment is requested to assist Autopsy Services at the University of Texas Medical Branch when a death occurs that meets the criteria set forth in the Texas Criminal Code 49.25.

Dr. Shine is a well-trained pathologist, board-certified in Anatomic Pathology, Clinical Pathology and Surgical Pathology by the American Board of Pathology. She has an active Texas Medical License. A copy of Dr. Shine's Curriculum Vitae and proof of Medical Licensure by the Texas Medical Board have been provided.

Sincerely,

A handwritten signature in black ink, appearing to read "Erin A. Barnhart". The signature is stylized with a large, sweeping "E" and a distinct "A".

Erin A. Barnhart, M.D.,
Chief Medical Examiner
Galveston County

Enclosures

CURRICULUM VITAE

NAME: Billie Shine, D.O.

PRESENT POSITION AND ADDRESS:

July 1, 2025 –	Assistant Professor, Dept. of Pathology University of Texas Medical Branch (UTMB), Galveston, TX
July 1, 2024 – June 30, 2025	Fellow, Surgical Pathology, Dept. of Pathology University of Texas Medical Branch (UTMB), Galveston, TX
June 16, 2020 – June 30, 2024	Resident, Anatomic and Clinical Pathology, Dept. of Pathology University of Texas Medical Branch (UTMB), Galveston, TX

BIOGRAPHICAL:

DOB: 01/21/1992
Place of Birth: Houston, TX
Citizenship: US
Cell: 713-302-1317
Email: bishine@utmb.edu

EDUCATION:

May 2016-2020	Doctor of Osteopathic Medicine Lake Erie College of Osteopathic Medicine at Seton Hill, Greensburg, PA
May 2015-2016	Master of Science, Biomedical Science University of Texas Health Science Center, Fort Worth, TX
May 2010-2014	Bachelor of Science, Biomedical Science Tarleton State University, Stephenville, TX

BOARD CERTIFICATION:

COMLEX Level 1, May 2018
COMLEX Level 2 PE, May 2019
COMLEX Level 2 CE, June 2019
COMLEX Level 3, August 2020
Texas Medical Board, Licensed Physician (since 2024)

MEMBERSHIP IN SCIENTIFIC SOCIETIES/PROFESSIONAL ORGANIZATIONS:

2021 – Present	College of American Pathologists
2021 – Present	Texas Society of Pathology
2020 – Present	American Society of Clinical Pathology
2017 – Present	American Osteopathic College of Pathologists

PUBLICATIONS/PROJECTS:

Nielsen MC, Peterson JM, Shine B, Hornak JP, Esechie A, Bhatt S, Desai K, Dabi A, Felicella MM, Ren P. A Fatal Fungal Infection: *Cryptococcus gattii* (VGI) Meningitis in Texas. *Open Forum Infect Dis*. 2022 May 9;9(7):ofac236. doi: 10.1093/ofid/ofac236. PMID: 35854998; PMCID: PMC9277648.

Fernandez VJ, Peterson JM, Shine B, Young P, Al-Saadi Y, et al. A rare case of heterotopic gastric mucosa of the rectum with complete intestinal metaplasia highlighting the utility of molecular microsatellite testing in diagnostic corroboration. *Open J Clin Med Images*. 2022; 2(2): 1071.

Shine B, Alvarez Moreno JC, Coblens O, Qiu S, Clement CG. Laryngeal Sarcomatoid Carcinoma With Rhabdomyoblastic Differentiation: A Potential Pitfall for Misdiagnosis As Rhabdomyosarcoma. *Cureus*. 2023 Jun 26; 15(6):e40990. doi: 10.7759/cureus.40990. PMID: 37503471; PMCID: PMC10371033.

Dossani H A, Irshad O M, Ibrahim B, Shine B, Mallick J, Saleem A. A Rare Case of Eccrine Carcinoma Demonstrating Intracranial Invasion in a Patient With Advanced Hepatocellular Carcinoma. *Cureus* 2024 July 3; 16(7): e63760. doi:10.7759/cureus.63760. PMID: 39100054 PMCID: PMC11296561

TEXAS MEDICAL BOARD

BILLIE MICHELE SHINE, DO

LICENSE NUMBER
V3962

EXPIRATION DATE
11/30/2026

AUTHORIZED FOR
OFFICE BASED ANESTHESIA
No



PHYSICIAN LICENSE

PLEASE VISIT WWW.TMB.STATE.TX.US TO VIEW THE CURRENT STATUS OF THIS LICENSEE

This certifies that the licensee/permit holder named and numbered hereon has provided this board the information required and has paid the fee for registration for the period indicated above. Please keep this board notified of change of address.