

**INSTRUCTIONS FOR COMPLETING AN APPLICATION TO PRACTICE MEDICINE
IN VIRGINIA FOR GRADUATES OF ALLOPATHIC MEDICAL SCHOOLS AND
OSTEOPATHIC MEDICAL SCHOOLS**

APPLICATION FEES ARE NONREFUNDABLE

BEFORE YOU PROCEED, READ THE FOLLOWING POINTS CAREFULLY!

NOTE

AN APPLICATION THAT IS NOT COMPLETE EXPIRES ONE YEAR AFTER IT IS SUBMITTED TO THE BOARD. IT IS THE RESPONSIBILITY OF THE APPLICANT TO ENSURE THAT ALL NECESSARY SUPPORTING DOCUMENTS ARRIVE AT THE BOARD PRIOR TO THE EXPIRATION DATE. IF THE ORIGINAL APPLICATION EXPIRES, THE APPLICANT MUST SUBMIT ANOTHER APPLICATION, PAY THE APPLICATION FEE AGAIN AND ENSURE THAT NEW SUPPORTING DOCUMENTS ALSO GET TO THE BOARD.

This is not the application for a training license to practice as a resident or fellow. This application is for a full and unrestricted MD or DO license to practice medicine in Virginia.

This is the application for a full and unrestricted license to practice as an MD or DO in Virginia.

You should familiarize yourself with the qualifications required for a full license by reviewing the laws and regulations governing the practice of allopathic medicine and osteopathic medicine in Virginia. They can be found at: <https://www.dhp.virginia.gov/Boards/Medicine/PractitionerResources/LawsRegulations/>

The Board works as efficiently as possible to process applications. The time from filing an application with the Board until the issuance of a license is dependent upon entities over which the Board has no control. It is the applicant's responsibility to ensure that outside entities send the necessary documentation to the Board. You should not expect the process to take less than 2-3 months, so plan accordingly if you are pursuing a practice position in Virginia.

The Board provides an electronic checklist for your convenience in tracking your application. You should allow approximately 10 business days for your application checklist to be first updated on the Board's website.

Supporting documentation will be added to your checklist as it is received. Processing of documents may take up to 15 business days after they are received. If you find your checklist does not exist or does not indicate necessary documents have been received, MD applicants can e-mail the Board at med-medbd@dhp.virginia.gov, with "MD Application Question" in the subject line. DO applicants can send an email to the board at do-medbd@dhp.virginia.gov. E-mails will be answered within 2 business days.

Your application checklist may be viewed by logging into your application and clicking on the "View Checklist" link located in the Pending Licenses section. This link will not be visible for applicants who have not yet paid the application fee. If you have submitted your application and required fee online, but no longer see your checklist listed in the Pending Licensing section, your license may have been issued by the Board. Before calling the Board, please visit <https://dhp.virginiainteractive.org/Lookup/Index> to view your newly issued license. This website is primary source license verification that meets the Joint Commission's requirements for license verification. If you need technical assistance with your checklist,

contact the agency's helpdesk at 804-367-4444. The helpdesk cannot provide assistance regarding information about your documents.

Supporting documentation sent to the Board when there is no application on file will be purged after 3 months.

NB: Virginia law considers material misrepresentation of fact in an application for licensure to be a Class 1 misdemeanor. Misrepresentation may be by commission or omission. Be sure of your facts and provide full responses to the Board's questions.

Certain forms may be faxed to 804-527-4426. The phone number to the Virginia Board of Medicine is 804-367-4600.

Mailing Address

Virginia Board of Medicine
9960 Mayland Drive, Suite 300
Henrico, VA 23233-1463

PROCEEDING TO THE APPLICATION SIGNIFIES THAT YOU HAVE READ AND ACCEPT THE FOREGOING PRINCIPLES REGARDING THE BOARD'S PROCESSES.

- 1. **Complete the online application at <https://www.license.dhp.virginia.gov/apply/>**, which includes paying the nonrefundable application fee of \$302.00. Application fees may only be paid using Visa, MasterCard, Discover or American Express. Applications submitted without the application fee will not be processed.

- 2. **Examination Scores – If you took all three steps of the USMLE examination or the FLEX examination**, contact the Federation of State Medical Boards (FSMB) at (817) 868-4000 or www.fsmb.org to have your scores submitted to the Board. Scores **SHOULD NOT** be faxed and **MUST** come directly from the FSMB. **If using the FCVS credentialing service, scores will be included.**

If you took the National Board of Osteopathic Medical Examinations or the COMLEX you may request copies of your

at <http://www.nbome.org/transcript-request.asp> or by calling (866)479-6828. Scores **SHOULD NOT** be faxed and **MUST** come directly from the National Board. **If using the FCVS credentialing service, scores will be included.**

If you took the National Board of Medical Examiners or a combination of the USMLE examination, contact the National Board of Medical Examiners at (215) 590-9500 or www.nbme.org to have your scores submitted to the Board. Scores **SHOULD NOT** be faxed and **MUST** come directly from the National Board. **If using the FCVS credentialing service, scores will be included.**

If you took the LMCC examination, contact the Medical Council of Canada (MCC) at (613) 521-6012. Scores **SHOULD NOT** be faxed and **MUST** come directly from the LMCC. **If using the FCVS credentialing service, scores will be included.**

If you took a state examination, contact the state agency or licensure board to have your scores submitted to the Board. Scores **SHOULD NOT** be faxed and **MUST** come directly from the agency maintaining your score. **If using the FCVS credentialing service, scores will be included.**

3. **Transcripts – Official medical school transcripts must be received by the Virginia Board of Medicine.** Medical school transcripts must be official and bear the school seal. Transcripts will only be accepted if they come directly from the medical school to the Board. If using the FCVS credentialing service, transcripts will be included. **If using the FCVS credentialing service, transcripts will be included. MD official school transcript can be emailed directly by the school to med-medbd@dhp.virginia.gov . DO official school transcript can be emailed directly by the school to do-medbd@dhp.virginia.gov .**

4. **Postgraduate Training -** A completion certificate or program director’s letter of completion must be received directly from the postgraduate training institution for the internships, residencies, and fellowships completed within the past 5 years. If your postgraduate training occurred more than 5 years ago, you may fulfill this requirement by sending a copy of your letter or certificate of completion. A PDF attachment of the letter of completion or copy of certificate may be emailed to med-medbd@dhp.virginia.gov , faxed to (804) 527-4426, or mailed to the Board. DO postgraduate training verification can be emailed to do-medbd@dhp.virginia.gov

5. **Employment Activity** – List all activities from the date of graduation from your professional school including but not limited to internships, employment, affiliations, periods of non-activity or unemployment, observerships, and volunteer service in the “Employment Activity” section of the application beginning with your first activity following professional school graduation. If you are employed by a group practice or locum tenens/traveler company, please list all locations where you have provided service or held privileges. If more space is needed to record your activities, follow this link to obtain and submit a supplemental form with your application:

Supplemental Form: <https://www.dhp.virginia.gov/media/dhpweb/docs/med/forms/SupplementalForm.pdf>

6. **Verification of professional licenses** from a jurisdiction within the United States, its territories and possessions or Canada in which you have been issued a full license must be received by the Board. **Please contact the jurisdiction where you have been issued a license to practice medicine to inquire about having official license verification forwarded to the Virginia Board of Medicine.** Verification must come from the jurisdiction and may be sent by email to med-medbd@dhp.virginia.gov, faxed to (804) 527-4426, or mailed. DO license verification can be emailed to do-medbd@dhp.virginia.gov

7. **NPDB Self Query - Complete the online [Place a Self-Query Order](https://www.npdb.hrsa.gov/) form at <https://www.npdb.hrsa.gov/>. Be ready to provide:**

- o Identifying information such as name, date of birth, Social Security number
- o State health care license information (if you are licensed)
- o Credit or debit card information for the \$4.00 fee (charged for each copy you request)

Verify your identity. This can be done electronically as part of your order or by completing a paper form and having it notarized. You will receive full instructions as you complete your order.

Wait for your response. Once your identity is verified, the NPDB will process your order. A paper copy of your response will be sent the next business day by regular U.S. mail.

Please note that the Board will accept a digitally-certified electronic copy of the NPDB report that is emailed to the Board, in lieu of a mailed report.

Should you choose to mail your report, when you receive your report in the mail from NPDB, **DO NOT OPEN IT.** Place your unopened NPDB report in an oversized envelope and forward it to the Virginia Board of Medicine. The Board recommends using Fed EX or UPS for tracking purposes.

The Board of Medicine is unable to track any mail or other package that is sent via the United States Postal Service. Any NPDB report received for an application not completed within 6 months of receipt of the NPDB report will have to be resubmitted.

- 8. For graduates of medical schools outside of the U.S. and Canada. – ECFMG, a member of Intealth, Certification:** To request a verification of your ECFMG Certification Status Report follow this link <https://cvsonline2.ecfm.org/>. The ECFMG will send your certification report to the Board.
- 9.** Provide a copy of documentation supporting any name change.
- 10.** If you answer “yes” to any question in #6-18, provide supporting documentation to the Board in addition to providing a narrative to explain your answer. Please provide court documentation and final disposition for any lawsuits or convictions.

PLEASE NOTE:

*Please be aware that consistent with Virginia law and the mission of the Department of Health Professions, public addresses on file with the Board of Medicine are made available to the public. The Board address noted on your application may be different from the public address and is not released to the public. This notice is to reiterate that the Board of Medicine will allow the Board address of record to be a Post Office Box or practice location.

*Applications will be acknowledged after receipt if items are missing.

*Applications not completed within 12 months will expire and may be purged without notice from the board.

*Additional information may be requested after review by Board representatives.

***Application fees are non-refundable.**

* Do not begin practice until you have been notified of approval. Submission of an application does not guarantee a license. A review of your application could result in the finding that you may not be eligible pursuant to Virginia laws and regulations.