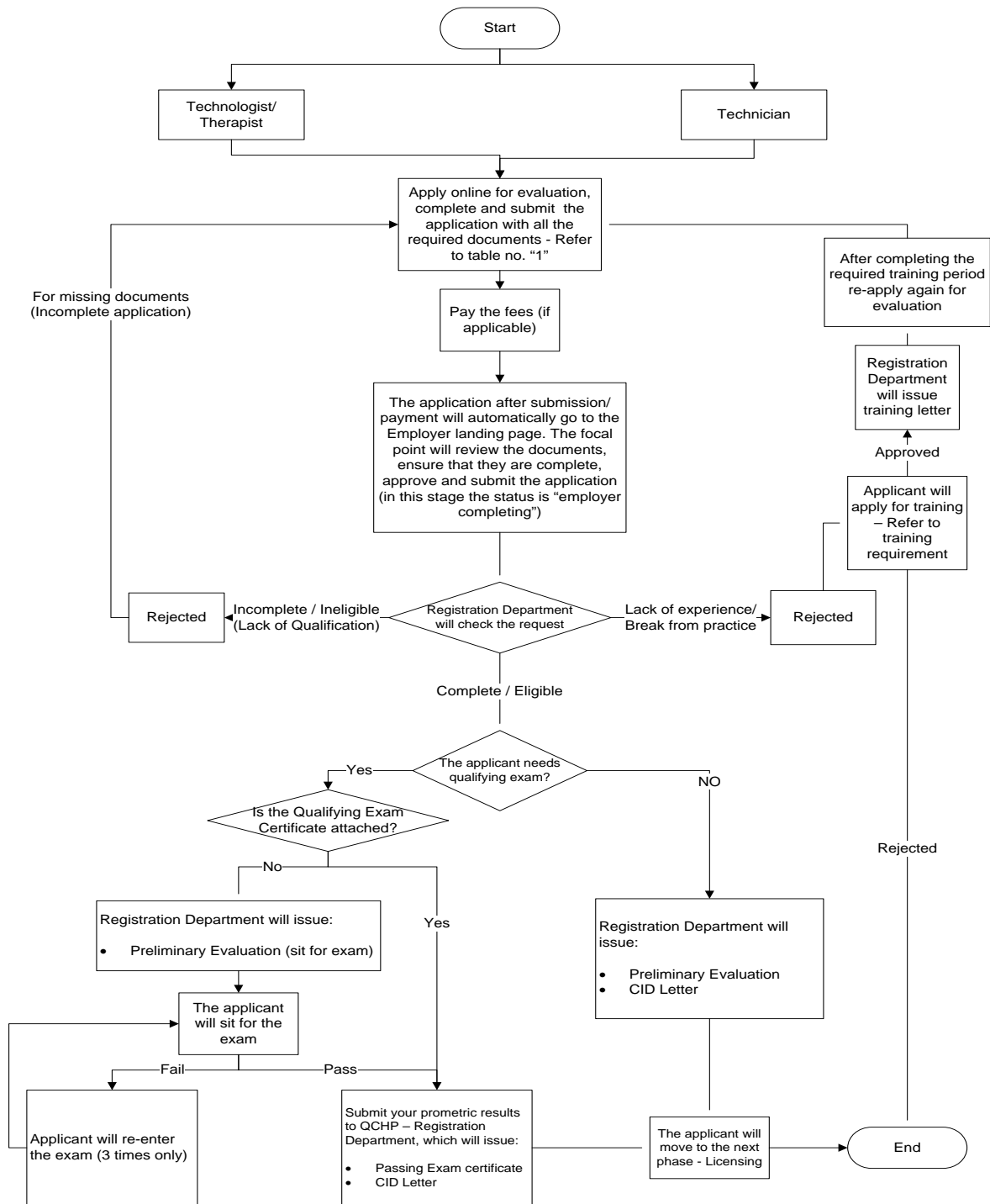


Guideline for Allied Healthcare Practitioners (AHP)

1. Registration/ Evaluation process map



- ❖ The applicant should follow up on the request with the focal point.
- ❖ For break from practice policy, refer to attachment "1".
- ❖ Preliminary evaluation is valid only for 6 months.

Registration/ Evaluation requirements

Please apply through the electronic registration and licensing system on the website of Qatar Council for Healthcare Practitioners (www.qchp.org.qa), complete the online application and pay the required fees (If applicable).

Submit an electronic Registration/ Evaluation request and upload all the below mentioned documents:

1. Copy of Valid Passport.
2. Copy of Valid QID (if applicable).
3. One recent photo (according to photo criteria stated in attachment 2).
4. Curriculum - Vitae (C. V).
5. Copy of Proof of Submission to the Verification Company.
6. Copy of all Academic Certificates (Refer to table no. 1).
7. Copy of all work Experience Certificates (Refer to table no. 1).
8. Copy of Valid Medical License or Registration from home country and Medical licenses accompanying the required years of work experience.
9. Copy of passing certificate of the qualifying exam (if available).

Notes

- Applications that do not meet the requirements mentioned will be rejected.
- The evaluation shall not obligate the Qatar Council for Healthcare Practitioners to grant the applicant any specific degree or title.
- Please note that verification process by the verification company replaces attestation of certificates by related competent authorities.
- Original documents / certificates if required shall be submitted upon request.
- Any other documents that are not mentioned above shall be submitted upon request.
- The verification report and certificate of good standing shall be received in the licensing phase unless the case requires otherwise.
- Any documents presented in languages other than Arabic or English must be translated and attached to a copy of the original documents.
- It shall be the applicant's responsibility to follow up on receiving the report regarding verification and the certificate of good standing.
- Please refer to the website of the Supreme Council of Health frequently to check the updates of the evaluation requirements.

Follow-up on the request (After a minimum period of 25 working days)

Table No. "1"

Scope of practice		Education requirements	Experience requirements	Other requirements
Allied Health Practitioners(AHP)	Therapist / Technologist	bachelor's degree or diploma of not less than 3 years duration the area of specialization	In general Minimum 2 years post graduate experience in the related field (unless otherwise indicated)	
	Technician	Technical Diploma, or equivalent from a recognized institutions.	In general 12-18 month post graduate experience or on case by-case basis (unless otherwise indicated)	<ul style="list-style-type: none"> The Allied Health Practitioners counts for more than 50 scope of practice either Therapist / Technologist or Technician from different educational qualifications and expertise Categories of medical professions that require to sit for the qualified exam are: <ol style="list-style-type: none"> Physiotherapist/ technician Laboratory Medical Technician/ technologist Radiography technician exam for all the scope working in this profession Emergency Medical Technician and other related scope Dental assistant,

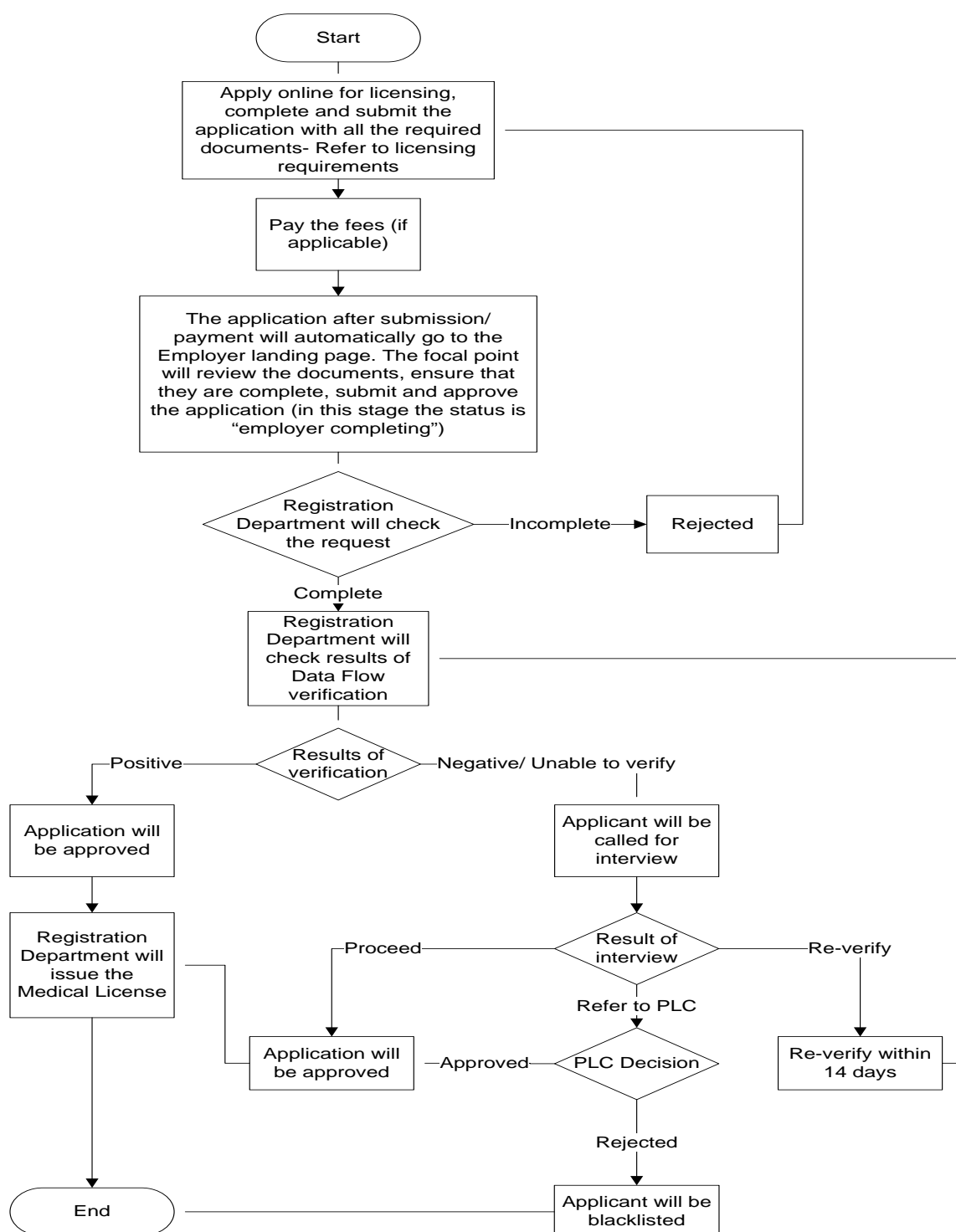
				5.Dental lab technician 6.Dental Hygienist * Some specialties are evaluated by specialized committees in HMC case by-case basis
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Training Letter requirements

Applicants with Break from Practice or lack of experience can apply for training after providing the Registration Department with the below mentioned documents:

1. No Objection Letter from the employer requesting for approval from QCHP for the applicant to work as trainee within their institution.
2. Valid copy of the Medical License of the supervisor who the applicant will be working under his / her supervision.
3. Copy of the applicant's Qatari ID, provided that he / she has a Family Residency.

2. Licensing process map



❖ The applicant should follow up on the request with the focal point.

Licensing requirements

Please apply through the electronic registration and licensing system on the website of Qatar Council for Healthcare Practitioners (www.qchp.org.qa), complete the online application and pay the required fees (If applicable).

Submit an electronic Licensing request and upload all the below mentioned documents:

1. Copy of Valid passport + copy of valid QID (if applicable).
2. Blood test, which can be issued by:
 - Hamad Medical Corporation
 - Medical Commission (with CDC stamp of Vaccination)
 - Private hospitals (Al Ahli, Al Emadi & Doha Clinic)
 - Primary Healthcare Corporation (For Qataris only)
3. Blood test must include: HIV test, HCV test, HBV test, HB vaccination and chest X-Ray.
4. Copy of Police Clearance Certificate from Qatari Ministry of Interior.
5. Copy of valid Recognized CPR Course or its equivalent, (or CPR registration receipt & Undertaking letter signed and stamped by the place of work confirming that copy of the CPR Certificate will be provided once it is received.
6. Original Certificate of Good Standing ,must be sent directly from the Registration authority of the last 5 years of work experience, to:
Registration Section, Medical Licensing, Supreme Council of Health, P.O. Box: 7744
7. Copy of verification Report payment receipt.
8. One recent photo (according to photo criteria stated in attachment 2).
9. Copy of all academic qualifications (refer to table no. 1).
10. Copy of all work experience certificates (refer to table no. 1).
11. Copy of Valid Medical license or Registration from home country or Medical licenses accompanying the required years of work experience.

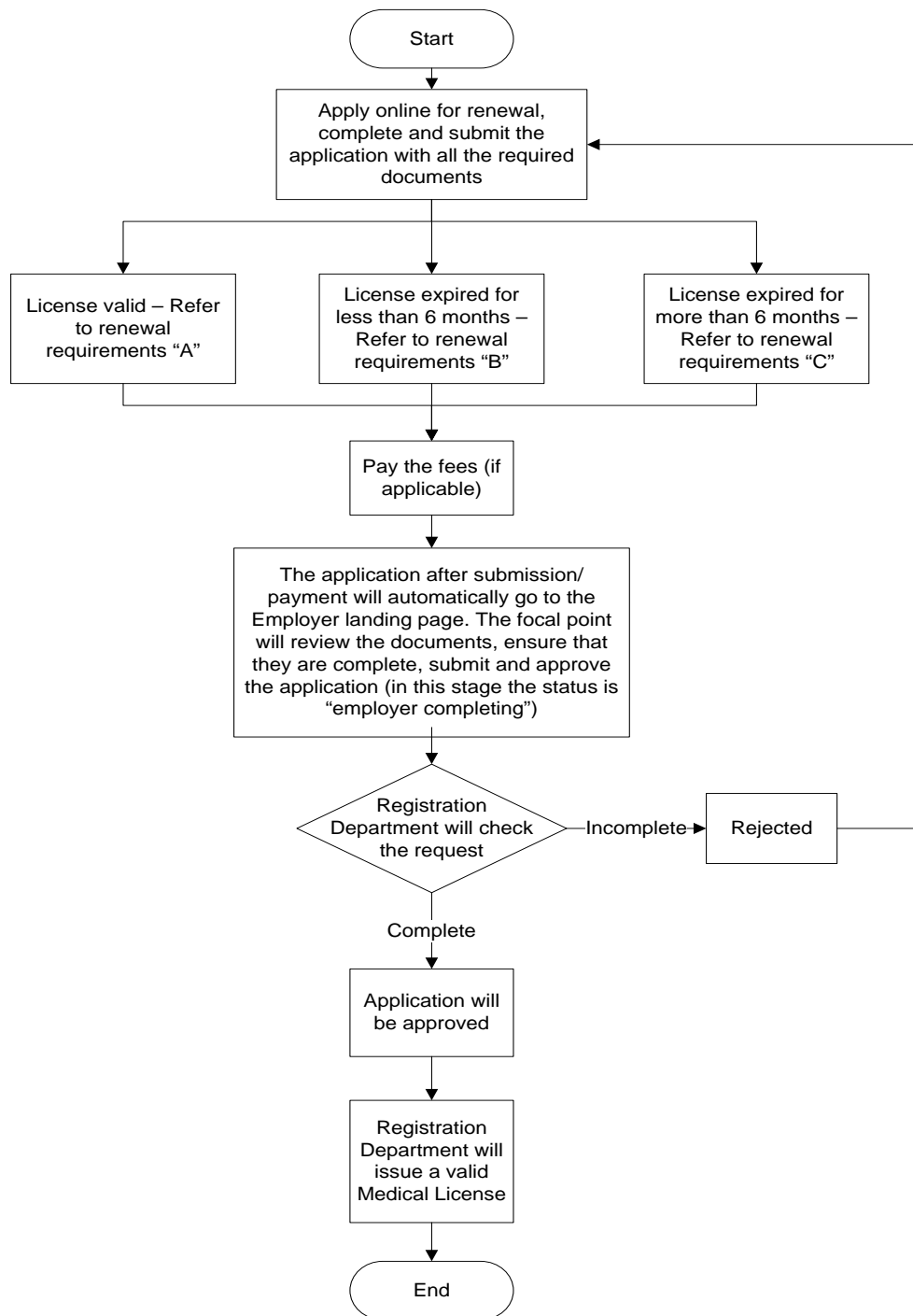
Notes

- Applications that do not meet the requirements mentioned will be rejected.
- Original documents / certificates if required shall be submitted upon request.
- Any other required documents that are not mentioned above shall be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated and attached to a copy of the original documents.
- The verification report and certificate of good standing shall be reviewed during this phase; any misleading information provided will result in the application being rejected.

- All documents submitted during the licensing phase shall be equivalent with the documents previously submitted in the evaluation phase.
- It shall be the applicant's responsibility to follow up on receiving the report regarding verification and the certificate of good standing.
- Please refer to the website of the supreme Council of Health frequently to check the updates of the licensing requirements.

Follow-up on request (After a minimum period of 20 working days)

3. License Renewal Process Map



❖ The applicant should follow up on the request with the focal point.

License Renewal Requirements

Please apply through the electronic registration and licensing system on the website of Qatar Council for Healthcare Practitioners (www.qchp.org.qa), complete the online application and pay the required fees (if applicable).

Submit an electronic renewal request and upload all the below mentioned documents:

A. If License is valid

1. Copy of valid QID (if applicable).
2. Copy of valid passport.
3. One recent photo (according to photo criteria stated in attachment 2).
4. Blood test, which can be issued by:
 - Hamad Medical Corporation.
 - Medical Commission (with CDC stamp of Vaccination)
 - Private hospitals (Al Ahli, Al Emadi & Doha Clinic)
 - Primary Healthcare Corporation (For Qataris only)
5. Blood test must include: HIV test, HCV test, HBV test and HB vaccination.
6. Copy of valid Recognized CPR Course or its equivalent, (or CPR registration receipt & Undertaking letter).
7. Any other additional requirements.

B. If License expired for less than 6 months

1. Copy of valid QID (if applicable).
2. Copy of valid passport.
3. One recent photo (according to photo criteria stated in attachment 2).
4. Blood test, which can be issued by:
 - Hamad Medical Corporation
 - Medical Commission (with CDC stamp of Vaccination)
 - Private hospitals (Al Ahli, Al Emadi & Doha Clinic)
 - Primary Healthcare Corporation (For Qataris only)
5. Blood test must include: HIV test, HCV test, HBV test and HB vaccination.
6. Copy of valid Recognized CPR Course or its equivalent, (or CPR registration receipt & Undertaking letter).
7. Declaration letter signed and attached to the comments page of the Registration/Licensing electronic system (Refer to Declaration letter attachment).
8. Verification (Retrospective): Verify academic qualifications through verification company & attach a copy of the receipt in the comments page of the Registration/Licensing electronic system.

C. If License expired for more than 6 months

1. Copy of valid QID (if applicable).

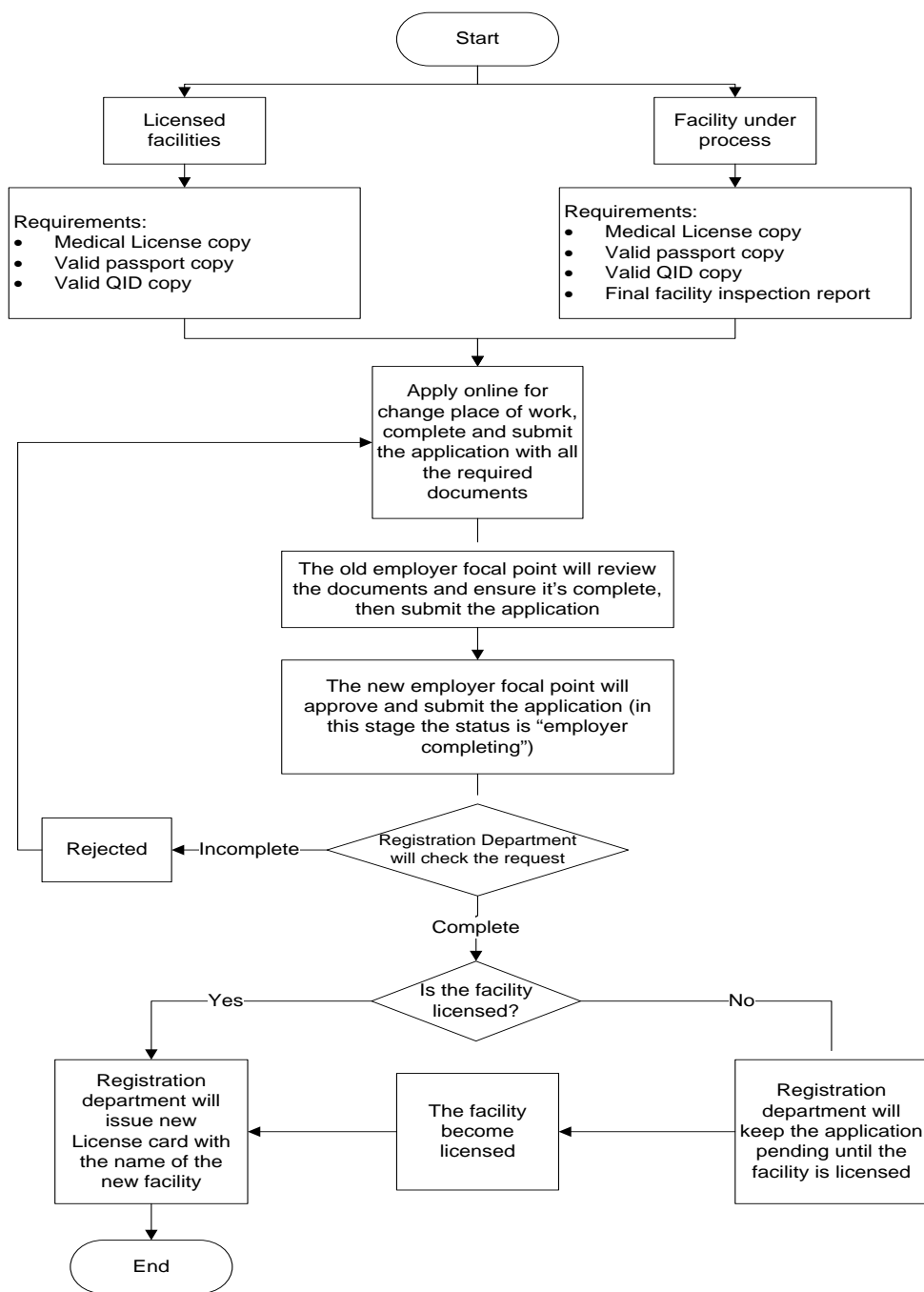
2. Copy of valid passport.
3. One recent photo (according to photo criteria stated in attachment 2).
4. Blood test, which can be issued by:
 - Hamad Medical Corporation
 - Medical Commission (with CDC stamp of Vaccination)
 - Private hospitals (Al Ahli, Al Emadi & Doha Clinic)
 - Primary Healthcare Corporation (For Qataris only)
5. Blood test must include: HIV test, HCV test, HBV test and HB vaccination.
6. Copy of valid Recognized CPR Course or its equivalent, (or CPR registration receipt & Undertaking letter).
7. Declaration letter signed and attached to the comments page of the Registration/Licensing Electronic System (Refer to Declaration letter attachment).
8. Verification (Retrospective): Verify academic qualifications through verification company & attach a copy of the receipt in the comments page of the Registration/Licensing electronic system.
9. Justification Letter signed by the practitioner/ employer explaining the reason behind the late renewal (except PHCC & HMC).
10. **Only for HMC & PHCC** Qualifying Exam (if applicable).

Notes

- Applications that do not meet the requirements mentioned above will be rejected.
- Original document/ certificates if required shall be submitted upon request.
- Any other required documents required to support the application that are not mentioned above shall be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated and attached to a copy of the original documents.
- Please refer to the Supreme Council of Health website frequently to check the updates of the licensing requirements.

Follow-up on request (After a minimum period of 15 working days)

4. Change Place of Work Process Map



❖ The applicant should follow up on the request with the focal point.

Change Place of Work Requirements

Please apply through the electronic registration and licensing system on the website of Qatar Council for Healthcare Practitioners (www.qchp.org.qa) and complete the online application.

Submit an electronic change place of work request and upload all the below mentioned documents:

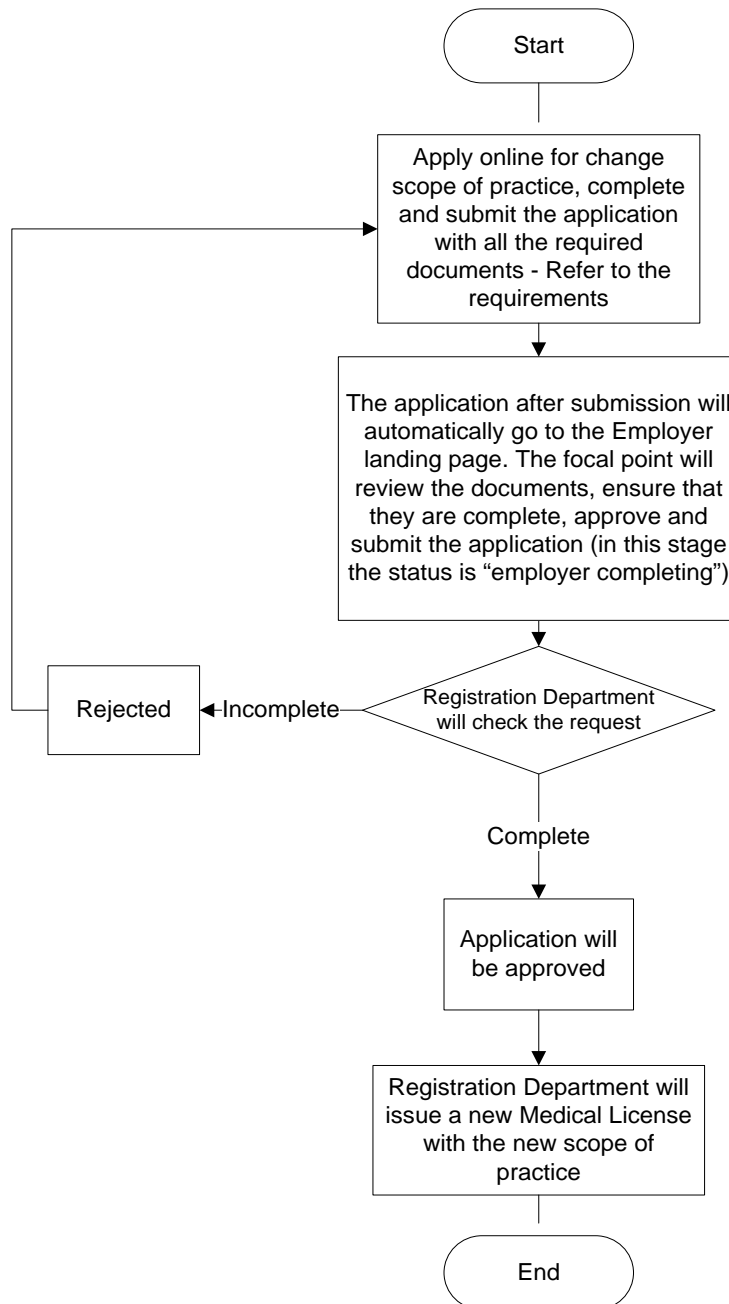
1. Copy of valid passport + copy of valid QID (should be changed to the new employer or secondment from the Ministry of Interior or any other adjustment according to the current laws and regulations in the State of Qatar).
2. Copy of valid medical license.
3. Copy of Final Facility Inspection Report (only for facilities under licensing process).

Notes

- Applications that do not meet the requirements mentioned above will be rejected.
- Original document/ certificates if required shall be submitted upon request.
- Any other required documents required to support the application that are not mentioned above shall be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated and attached to a copy of the original documents.
- Please refer to the Supreme Council of Health website frequently to check the updates of the change place of work requirements.

Follow-up on request (After a minimum period of 15 working days)

5. Change Scope of Practice Process Map



❖ The applicant should follow up on the request with the focal point.

Change Scope of Practice Requirements

Please apply through the electronic registration and licensing system on the website of Qatar Council for Healthcare Practitioners (www.qchp.org.qa) and complete the online application.

Submit an electronic Change Scope of Practice request and upload all the below mentioned documents:

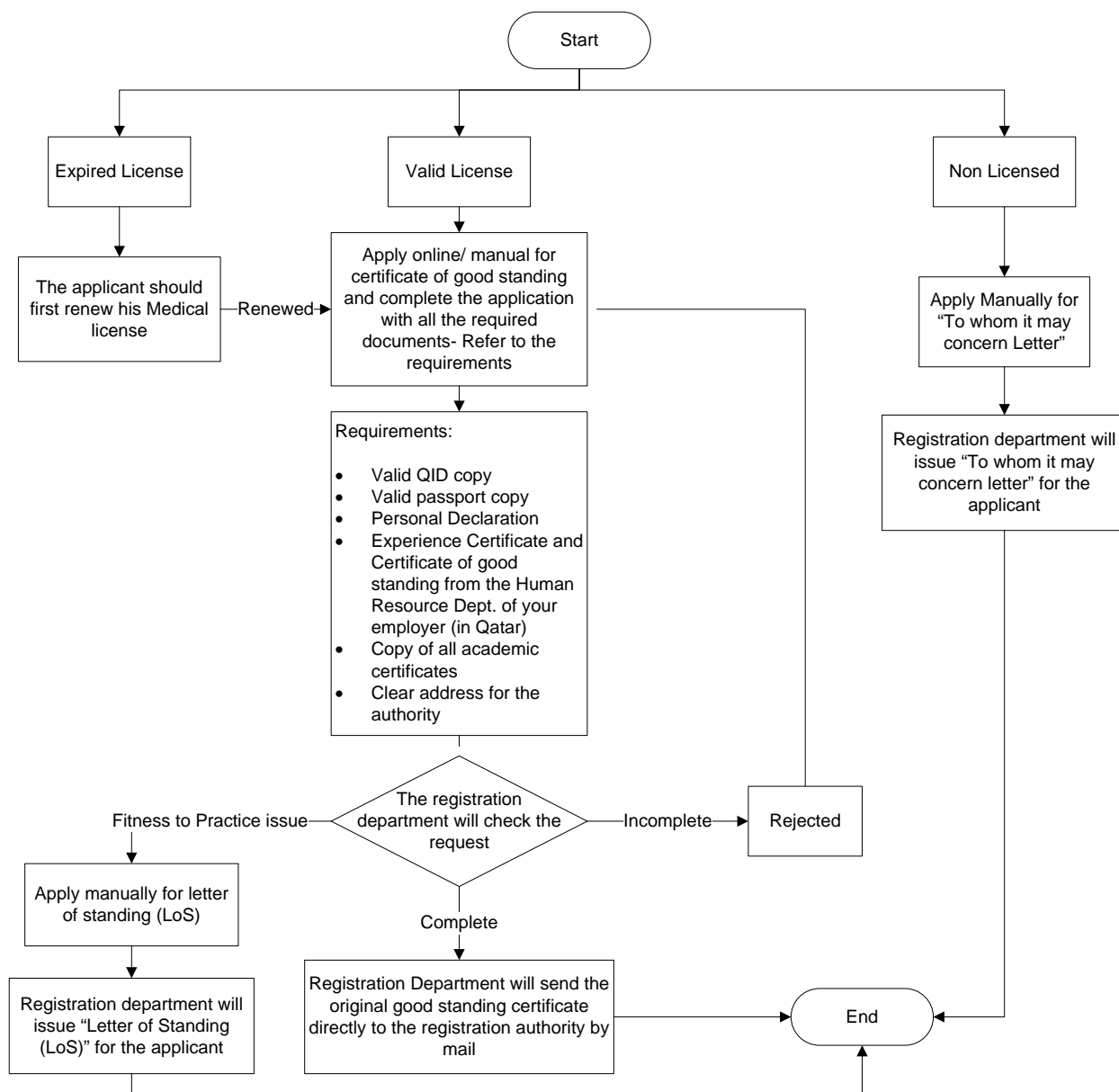
1. Copy of valid passport + copy of valid QID (If applicable).
2. Copy of current or last Medical license in the State of Qatar.
3. Copy of additional academic certificates.
4. Copy of additional experience.

Notes

- Applications that do not meet the requirements mentioned above will be rejected.
- Original document/ certificates if required shall be submitted upon request.
- Any other required documents required to support the application that are not mentioned above shall be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated and attached to a copy of the original documents.
- Please refer to the Supreme Council of Health website frequently to check the updates of the change scope of practice requirements.

Follow-up on request (After a minimum period of 15 working days)

6. Certificate of Good Standing Process Map



Certificate of Good Standing (COGS) Requirements

Please apply through the electronic registration and licensing system on the website of Qatar Council for Healthcare Practitioners (www.qchp.org.qa) and complete the online application.

Submit an electronic Certificate of Good Standing request and upload all the below mentioned documents:

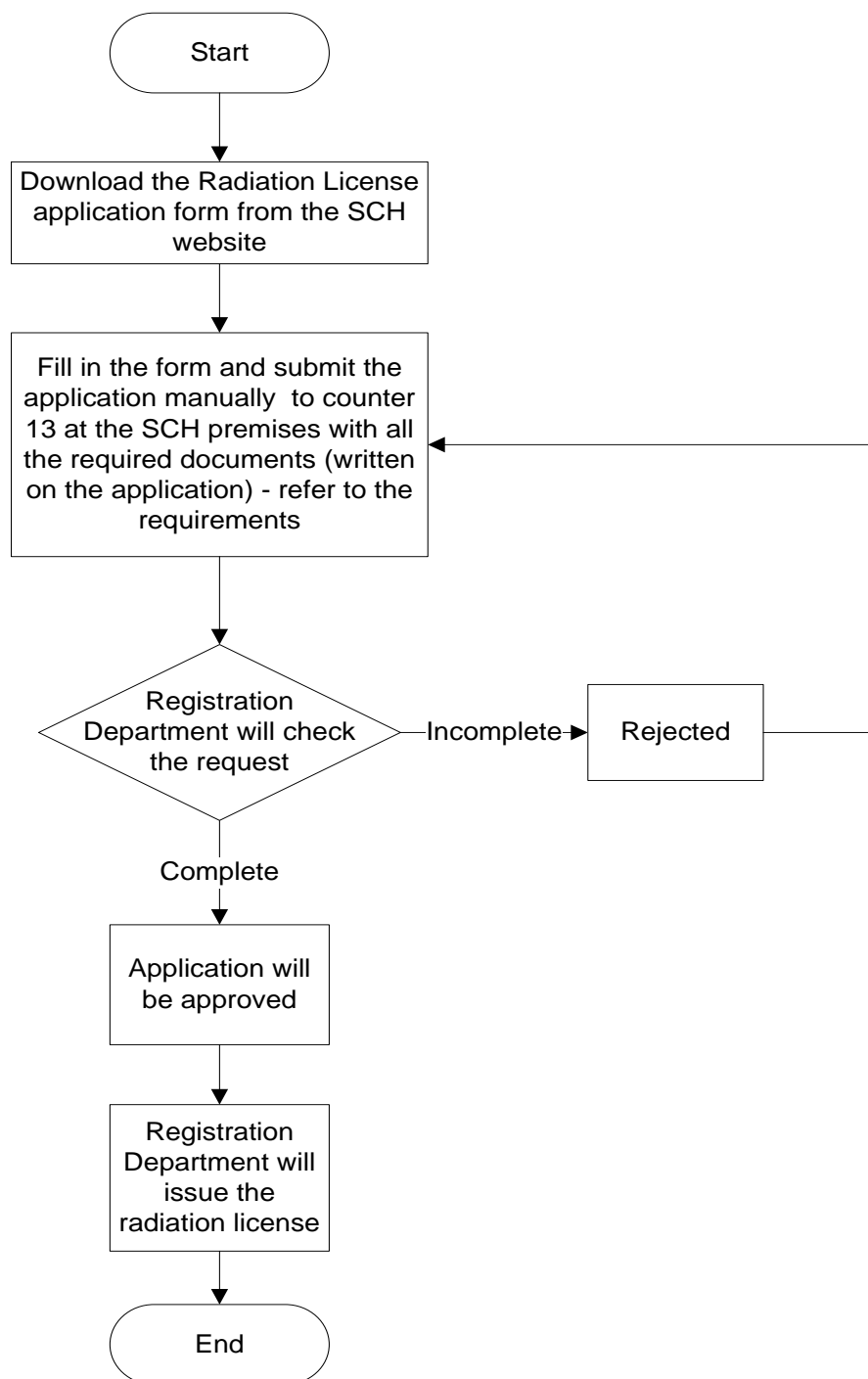
1. Copy of valid passport + copy of valid QID (If applicable).
2. Copy of current or last Medical license in the State of Qatar.
3. Experience Certificate from Human Resource Dept. of your employer in State of Qatar.
4. Copy of all academic certificates.
5. Certificate of good standing from place of work (in Qatar).
6. Clear address for the Registration Authority.

Notes

- Applications that do not meet the requirements mentioned above will be rejected.
- Original document/ certificates if required shall be submitted upon request.
- Any other required documents required to support the application that are not mentioned above shall be submitted upon request.
- Please be informed that the original certificate of good standing will be sent directly to the department of request.
- Any documents presented in languages other than Arabic or English must be translated and attached to a copy of the original documents.
- Please refer to the Supreme Council of Health website frequently to check the updates of the certificate of good standing requirements.
- If the license is expired and the practitioners left the country or out of practice , Manual application can be accepted with the expired license

Follow-up on request (After a minimum period of 25 working days)

7. Personal Medical Radiation License process map



❖ The applicant should follow up on the request with the focal point.

Personal Medical Radiation License Requirements

Please apply manually at the SCH premises and complete the Personal Medical Radiation application and pay the required fees (If applicable).

Complete the Personal Medical Radiation License request attached with all the below mentioned documents:

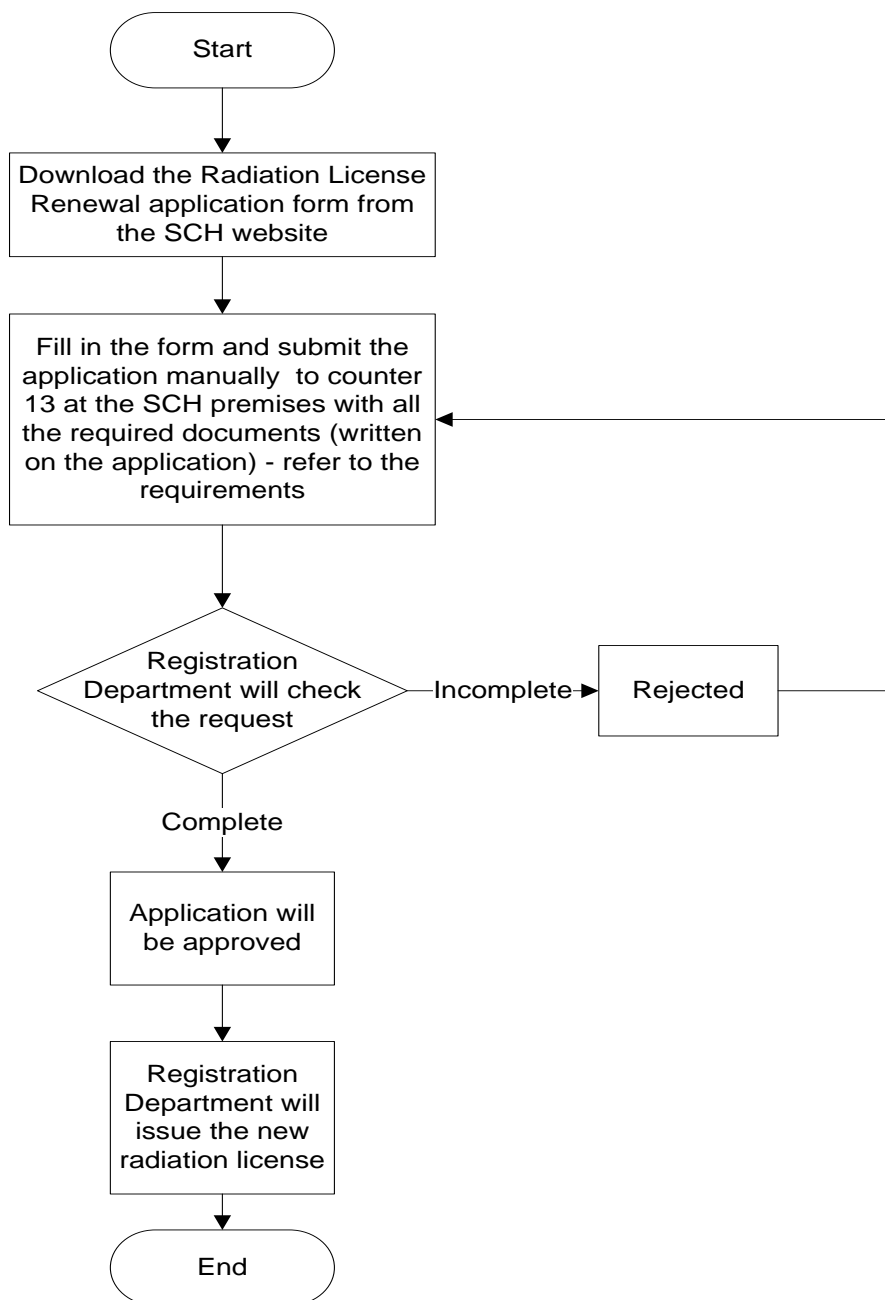
1. Personal Medical Radiation License application form.
2. Original Certificate of physical Fitness to work in the Radiation field (From Occupational Health Section - Preventive Health Department - Supreme Council of Health), the certificate validity is 1 year.
3. Copy of Training Course Certificate in Radiation Protection field.
4. Copy of the previous Personal Dose Records (if any).
5. Copy of Radiation License (if any).
6. Copy of valid passport + copy of valid QID (if applicable).
7. Curriculum Vitae (C. V).
8. One recent photo (according to photo criteria stated in attachment 2).
9. Copy of all Academic Certificates.
10. Personal Declaration (available on the website).

Notes

- Applications that do not meet the requirements mentioned will be rejected.
- Original documents / certificates if required shall be submitted upon request.
- Any other required documents that are not mentioned above shall be submitted upon request
- Any documents presented in languages other than Arabic or English must be translated and attached to a copy of the original documents.
- Please refer to the website of the Supreme Council of Health frequently to check the updates of the Personal Medical Radiation requirements.

Follow-up on request (After a minimum period of 25 working days)

8. Personal Medical Radiation License Renewal Requirements



❖ The applicant should follow up on the request with the focal point.

Personal Medical Radiation License Renewal Requirements

Please apply manually at the SCH premises and complete the Personal Medical Radiation renewal application and pay the required fees (If applicable).

Complete the Personal Medical Radiation License renewal request attached with all the below mentioned documents:

1. Medical Radiation License Renewal Application Form.
2. Original Certificate of Physical Fitness to work in the Radiation field (From Occupational Health Section - Preventive Health Department- Supreme Council of Health), the certificate validity is 1 year.
3. Copy of Previous Personal Medical Radiation License.
4. One recent photo (according to photo criteria stated in attachment 2).
5. Copy of Valid Passport + copy of valid QID (if applicable).
6. Copy of recognized Radiation Safety course (valid for 3 years).
7. Personal Declaration (available on the website).

Notes

- Applications that do not meet the requirements mentioned will be rejected.
- Original documents / certificates if required shall be submitted upon request.
- Any other required documents that are not mentioned above shall be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated and attached to a copy of the original documents.
- Please refer to the website of the Supreme Council of Health frequently to check the updates of the Personal Medical Radiation renewal requirements.

Follow-up on request (After a minimum period of 15 working days)