

ABHRS APPLICATION CHECKLIST

Experience Route

Applicant Name: _____

E-mail: _____

- Signed Application
- Passport Type Photograph
- Copy of M.D. or D.O. License
- Affidavit of clear and unrestricted license(s) <https://abhirs.org/wp-content/uploads/2016Affidavit-Regarding-Clear-and-Unrestricted-Licensure-Form.pdf>
- Current and valid Life Support with External Defibrillator (“BLS/ED”) certification <https://www.onlineaha.org/>
- Two Reference Letters from physicians who belong to ISHRS and/or ABHRS
- Copy of Curriculum Vitae
- Affidavit of role of hair restoration surgeon <https://abhirs.org/wp-content/uploads/2016Affidavit-RegardingRole-of-Hair-Surgeon.pdf>
- AMA, AOA or FCVS Physician Profile Ordered by applicant from the AMA, AOA or FCVS (waived for physicians outside of US)
- Application Fee payable upon submission of application
Note: Examination fees are payable upon approval of application
- Affidavit of three years private practice experience <https://abhirs.org/wp-content/uploads/2016Affidavit-Regarding-Number-of-Years-in-Practice-Form.pdf>
- Case Log listing 150 cases for most recent three years from the date of your application and should include approximately 4-5 cases per month over the 36 months.
For example; If application is dated October 5, 2017 then case log will include cases from
October 2013-September 2014 listing 50 cases (4-5 per month)
October 2014-September 2015 listing 50 cases (4-5 per month)
October 2015-September 2016 listing 50 cases (4-5 per month)
- Operative Reports (50) <https://abhirs.org/wp-content/uploads/Sample-Operative-Report.pdf>
- Of the 50 Operative Reports, 5 must include 10 before and after photos each, photos must be labelled as seen in the examples shown in the link below.
<https://abhirs.org/wp-content/uploads/AllPhotoViews.pdf>
- 60 CME Credit Hours for preceding three years (waived for physicians outside of US)