

## INFORMATION FOR CERTIFICATIONS OF THE AMERICAN FEDERATION FOR MEDICAL ACCREDITATION

Dear Applicant,

The American Federation for Medical Accreditation (AFMA) offers certifications in Clinical Neurosurgery, Clinical Orthopaedic Surgery, Clinical Spinal Surgery, Clinical Neurology and, Clinical Neurological and Neurosurgical Critical Care. There is a written exam for each certification, which is taken online. The written portion of the certification examinations can be taken in the convenience of your own home, office or wherever Internet access is available. The exams can also be scheduled to fit your busy practice, even on weekends or holidays.

To be eligible, you must have successfully completed the following education and training or its equivalent and supply supporting documentation:

- 1) Medical School
- 2) Internship
- 3) 1 yr. General Surgery residency
- 4) Residency program in specialty of the certification for which you are applying
  - i. For Neurosurgery, Orthopaedic Surgery and Spinal Surgery four years of residency is required. Spinal Surgery also requires certification in either Neurosurgery or Orthopaedic Surgery.
  - ii. For Neurology, a 3-yr. residency is required.
  - iii. For Critical Care, prior certification in Neurosurgery, Neurology or Internal Medicine is required. In addition, an essay (cover letter) delineating interest/experience in neuro critical care must be provided.
- 5) A minimum of 25 case reports must be submitted where applicant is primary provider. 25 additional case reports (50 total) will be required if residency training is not in the USA. Case reports may be used for oral exam.

To take an examination online, the following system specifications are recommended:

- 1) High speed Internet connection
- 2) Windows or Mac Operating System
- 3) Internet browser that can access our testing system website  
(test link will be provided once exam is scheduled)

To find out more, call us at (312) 787-1608.

Sincerely,

Sudhir Rao, MD

Chair of the Board, American Academy of Neurological & Orthopaedic Surgeons

You may apply to take any of the board examinations offered. If, however, we find your qualifications to be deficient and/or you do not send us the appropriate training certificates and CV, you will not be allowed to take the exam. Please verify that you are qualified before submitting this application and the required fees. Your payment may be forfeited if we determine that your qualifications are not adequate or cannot be verified.

Certification exams of the AFMA are administered by the American Academy of Neurological and Orthopaedic Surgeons (AANOS). AFMA and AANOS are separate entities both Incorporated in Nevada. No guarantees or warranties are made or implied by either organization pertaining to a physician's actual abilities in certain situations. Your certificate will be issued for your practice in the country from which you are applying. Only applicants licensed in the United States will receive an unrestricted certification. Note that certifications are not a license to practice medicine or surgery.

AFMA certifications are widely accepted by many hospitals in the United States. AFMA does not guarantee that its certifications will be accepted by any particular hospital for privileges. Visit [www.afmaboard.org](http://www.afmaboard.org) to learn more about certification and the exam process, as well as policies regarding passing scores.

# American Federation for Medical Accreditation

## Application for Certification

Please fill out this form completely and return with all requested documents to:

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AFMA c/o Nick Rebel  
1524 North Lake Shore Drive Chicago,  
IL 60610  
Email: aanos1977@gmail.com

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### Application for (check one):

- Clinical Neurological Surgery  
 Clinical Orthopaedic Surgery  
 Clinical Neurological and Neurosurgical Critical Care
- Clinical Spinal Surgery  
 Clinical Neurology
- 

### Fees:

All fees must be included with the application before processing can begin. Only members of The American Academy of Neurological and Orthopaedic Surgeons qualify for AFMA board certifications. Your AANOS application can be submitted at the same time as the AFMA application if you are not already a member of the AANOS.

**Application and Exam Fees \$ 1,850.00**

Include check payable to AANOS and send to the address above or to pay by Visa/Mastercard/AMEX see next page.

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### Applicant Contact Information:

Name \_\_\_\_\_ Degree \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_  Office  Cell Email \_\_\_\_\_

Date of Birth \_\_\_\_\_ Primary Specialty \_\_\_\_\_

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### Please Answer the following questions (circle)

If the answer to any question below is yes, please explain on your business letterhead and attach it to this application.

1. Have you ever had your medical license, pharmacy or DEA license reclassified, suspended, restricted or revoked?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you had a physical, emotional, alcohol / substance abuse problem that may impair your judgement or performance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been subject to a disciplinary action by a medical society, hospital, or board?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Have your privileges, medical or surgical, been revoked or curtailed by any hospital?	<input type="checkbox"/> Yes <input type="checkbox"/> No

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# American Federation for Medical Accreditation

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Name \_\_\_\_\_

### Peer Recommendations

To complete this application, please have two letters of recommendation from colleagues in your specialty sent directly to the address (mail or email) listed on the previous page. The letters must be on their letterhead with verifiable contact information. The letters also must include dates of practice observation and signature.

### Required Enclosures and Attachments Checklist

Please be sure all items are included in your application packet. Failure to include will delay processing.

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Fees \$1,850.00                 | <input type="checkbox"/> Medical School Certificate        | <input type="checkbox"/> CV or Resume                |
| <input type="checkbox"/> Signed Application              | <input type="checkbox"/> Training & Residency Certificates | <input type="checkbox"/> *150 hrs. CME (last 3 yrs.) |
| <input type="checkbox"/> Peer Recommendation Letters (2) |  | <input type="checkbox"/> Case Reports (25)           |

\*(CME only required for United States applicants.)

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I hereby certify that under the penalty of perjury, the aforementioned information is all true and there is no ill intent or bad faith involved in my application for certification. I also understand that any falsifications of reports, misrepresentations of material, significant omissions, dishonesty, forgery, and unethical practices will automatically render my application null and void. I agree to indemnify, release and hold harmless the American Federation of Medical Accreditation (AFMA) and its agents of any torts by reason of their acts or omissions regarding my application. I authorize full investigation of my application. My signature below is an authorization to anyone to release information you may request on me to help the AFMA make an accurate assessment and/or evaluation of me.

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Signature

Date

To pay by credit card, please provide information below (Visa, MasterCard or AMEX only)...

Name on card \_\_\_\_\_

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_

Credit card payments are processed by the International College of Surgeons US Section (ICSUS). Your statement will show a charge from this entity. ICSUS provides certain administrative services for the AFMA and the AANOS based on a shared services agreement with the AANOS. Funds are transferred from ICSUS on a regular basis. You may also go to [www.ficsonline.org/aanos](http://www.ficsonline.org/aanos) to pay directly.

The American Federation for Medical Accreditation accepts physicians of any race, color, national origin, sex, age, handicap or religious preference in its programs, activities, and employment as required by the Civil Rights Act of 1964 and the Amendments including Title IX of the Educational Amendments of 1972.