#### **Board of Medicine**

# **Guidance on Completing Form B Employment Verifications**

A completed Form B Activity Questionnaire or a letter of recommendation must be received from all locations of service, places of practice or professional employment, observerships, professional research positions or professional volunteer service listed for the 2 years immediately preceding application.

## **Directions.**

Complete the "Employment Activity" section of the application beginning with your professional school graduation. Leave no date gaps in the chronology. You should list all employers and locations of service. For example, if you work for a locums tenens agency or you are a traveler, name the employer and list all of the locations and dates where you provided service. It is helpful to request your placement company to send a list of all locations of service to the Board of Medicine for a minimum of the 2 years previous to the date of application.

A Form B Employment verification <u>MUST</u> be received for each location where professional services were provided for the 2 years previous to the date of the application. Form B's should be completed by a supervisor or colleague who is a medical professional. Form B's not completed by a medical professional may not be accepted. If the location where you provided service is closed or no longer in business, a Form B is still required. Applicants may need to make use of social media to contact former supervisors or colleagues. Applicants who allow their applications to stagnate may be required to provide Form B's for dates subsequent to the original date of application.

If you are engaged in private practice, without hospital affiliation, have another physician who is not related submit a Form B or letter of recommendation attesting to your practice.

## Special Circumstances.

In lieu of Form B's the Board <u>may</u> accept a letter from the hospital credentials office that includes the dates privileges were active, their standing and whether there has been any disciplinary action. For travelers, the Board may accept evaluations completed by the location of service and provided to the placement company. These evaluations must be provided to the Board by the placement company.

Internships, residencies and fellowships must have a Form B if the training occurred within the last 2 years. If the training occurred more than 2 years prior to the date the application is submitted, you may provide a copy of the certificate of completion in lieu of a Form B. All post-graduate training received in the United States or Canada must be accounted for regardless of when it occurred.

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For applicants practicing telemedicine, a Form B is only required from the chief medical officer of the company to which you are employed. To be accepted, the Form B must be signed by the CMO or medical director with a complete professional evaluation along with all locations of service.

#### Post-graduate Training Verification.

For Medicine and Surgery and Osteopathy and Surgery applicants, verification of all post-graduate training is required regardless of when it was completed. If your post-graduate training was completed more than 2 years ago, the Board will accept a copy of the certificate of completion you were provided at the conclusion of the internship, residency or fellowship. If the post-graduate training was completed less than 2 years ago or you are still in a residency or fellowship program, a Form B must be received and it must be signed by the program director.

Completed Form B's may be attached as a PDF and sent to medbd@dhp.virginia.gov, faxed to (804) 527-4426, or mailed by the person completing the document.