Guidelines for Dentists
1. A) Registration/Evaluation Process Map for “General Dentist”

- The applicant should follow up on the request with the employer representative.
- For break from practice policy, refer to attachment "1" in the “Additional Attachments” document.
- Preliminary evaluation is only valid for 6 months.
B) Registration/Evaluation Process Map for “Dental Specialist”

Start

Dental Specialist

Apply online for evaluation, complete and submit the application with all the required documents - Refer to table no. “1 & 2” and evaluation requirements

Pay the fees (if applicable)

The application after submission/payment will go to the Employer Representative’s landing page. The Employer Representative must review the documents, ensure that they are complete, approve and submit the application (in this stage the status is “Employer Completing”)

Registration Department will check the request

Complete

Registration Department will issue:
- Preliminary Evaluation
- CID Letter

The applicant will move to the next phase - Licensing

End

Request will return to the Applicant’s landing page

Send back with comments

Incomplete

Lack of qualifications - refer to table no. “2” then refer to “General Dentist map”

Lack of experience - refer to table no. “2” then refer to “General Dentist map”

- The applicant should follow up on the request with the employer representative.
- For break from practice policy, refer to attachment "1" in the “Additional Attachments” document.
- Preliminary evaluation is only valid for 6 months.
Registration/Evaluation Requirements

Please apply through the Registration/Licensing Electronic System on the QCHP website: (www.qchp.org.qa), complete the online application and pay the required fees (if applicable).

Submit an electronic “Apply for Evaluation” request and upload the below mentioned required documents:

1. Copy of valid passport.
2. Copy of valid QID (front and back) (If applicable).
3. One recent photo (according to photo criteria stated in circular (04-2014) or in the “Additional Attachments” document).
4. An up to date Curriculum Vitae (C.V).
5. Copy of all academic certificates relevant to applicant’s scope with official transcript (refer to Table no. 1 & 2).
6. Copy of the recent work experience certificates (with an issue date) required according to applicant’s scope (refer to Table no. 1 & 2).
7. Copy of valid medical/registration licenses accompanying the required years of work experience (if applicable).
8. Copy of proof of submission to the verification company (payment receipt).
9. Copy of valid passing certificate of the qualifying exam (if applicable).

Notes

- Applications that do not meet the requirements mentioned above will be sent back to the applicant.
- The evaluation shall not obligate the Qatar Council for Healthcare Practitioners to grant the applicant any specific degree or title.
- Please note that the verification process done by the verification company replaces attestation of certificates by related competent authorities (i.e.: certificates do not have to be attested).
- The verification report and certificate of good standing shall be received in the licensing phase unless the case requires otherwise.
- It shall be the applicant’s responsibility to follow up on receiving the report regarding verification and the certificate of good standing.
- Applicants/employer representatives can follow up on the certificate of good standing with QCHPGoodSt@moph.gov.qa
- Original documents/certificates might be requested on a case by case basis.
- Any other documents required to support the application that are not mentioned above must be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated to Arabic or English and attached to a copy of the original documents.
- Please refer to the websites of the Ministry of Public Health & Qatar Council for Healthcare Practitioners frequently to check the updates of the requirements.
A case by case assessment may be implemented.

For visiting doctors’ requirements, please check [circular 14/2015](#):

You can follow-up on the request with your employer representative.

### Table No. "1"

<table>
<thead>
<tr>
<th>Scope of practice</th>
<th>Education Requirements</th>
<th>Experience Requirements</th>
<th>Qualifying Exam (Prometric)</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Dentist</td>
<td>A minimum of 5 years undergraduate dental school (DDS/BDS/ DMD or its equivalent)</td>
<td>Minimum of 3 years post graduate experience.</td>
<td>Required (Please check circulars no. (23/2015) &amp; (17/2016) on QCHP website) The below shall be exempted from the Qualifying Exam: Holders of the National Joint Commission of Examiner-II certificate Dentists with a specialty qualification that is approved by QCHP but not satisfying the minimum required work experience to be registered/licensed as a dental specialist as per circular no. 18/2015 on the QCHP website Qatari Dentists as per circular no. (7/2016) on the QCHP website</td>
</tr>
<tr>
<td>Dental Specialist</td>
<td>Please refer to Table &quot;2&quot;</td>
<td>Please refer to Table &quot;2&quot;</td>
<td>Not required</td>
</tr>
</tbody>
</table>
Table No. "2"

Approved Specialty certificates according to geographic location for the category of Dentists

- The following scopes of practice are evaluated according to the list below: Periodontics, Orthodontics, Pedodontics, Endodontics Prosthodontics, Oral Medicine and Public Health Dentistry.
- Other scopes of practice and post graduate degrees from counties that are not mentioned in the below table must be evaluated by specialized committees in the State of Qatar provided that the applicant has at least three years of experience as a specialist after the post-grad is completed.
- Regarding Restorative Dentistry and Endodontic scopes of practice (please refer to circular no.19/2016 on QCHP website) and for Oral Medicine and Public Health Dentistry scopes of practice (please refer to circular no.14/2016) on QCHP website
- Please read the notes in the below table regarding specialists.

<table>
<thead>
<tr>
<th>Country</th>
<th>Category 1: Qualifications are eligible for dental specialty scope of practice which requires no experience or supervision</th>
<th>Category 2: Qualifications are eligible for dental specialty scope of practice which require years of experience or supervision on the specialty field</th>
</tr>
</thead>
</table>
| Australia | • Doctor of clinical dentistry  
• (approved specialist training program by Dental Board of Australia) | |
| Canada | • Diploma in a clinical specialty, or  
• Dental specialty program, or  
• Proof of national dental specialty Examination (NDSC), or  
• Fellowship of the Royal College of Dentists of Canada | |
| Denmark | • Specialty certificate | |
| Egypt | • Doctoral degree | • Clinical masters degree  
+  
• 3 years experience |
<p>| France | | • CES (certified d’etudes specialises) granted to individuals of the EU until 1985, then substituted by the DES |</p>
<table>
<thead>
<tr>
<th>Country</th>
<th>Certificate Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Germany</td>
<td>Facharzt (Facharztliche Anerkennung) + 2 years experience</td>
</tr>
<tr>
<td>Hong Kong</td>
<td>Master of Dental Surgery</td>
</tr>
<tr>
<td>India</td>
<td>Master of Dental Surgery (MDS) + 4 years experience</td>
</tr>
<tr>
<td>Iran</td>
<td>Iranian Board + 4 years experience + (All applicants are required to submit their transcript and program curriculum or equivalent)</td>
</tr>
<tr>
<td>Ireland</td>
<td>Before 2007 Master of Dental Surgery (M.Dent.Ch) + After 2007 D.Ch.Dent</td>
</tr>
<tr>
<td>Jordan</td>
<td>Advanced specialty certificate + 3 years experience (All applicants are required to submit their transcript and program curriculum or equivalent)</td>
</tr>
<tr>
<td>Lebanon</td>
<td>Master of Science in dentistry, or Post graduate Diploma + 3 years experience</td>
</tr>
<tr>
<td>Netherlands</td>
<td>Clinical specialty certificate</td>
</tr>
<tr>
<td>Country</td>
<td>Requirements</td>
</tr>
<tr>
<td>-------------</td>
<td>------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>New Zealand</td>
<td>- <strong>MDs or Doctor of Clinical Dentistry (DClinDent)</strong> (Approved specialist training program by the dental Council of New Zealand)</td>
</tr>
<tr>
<td>Norway</td>
<td>- Certificate of completion of specialist training</td>
</tr>
<tr>
<td>Romania</td>
<td>- Specialty certificate + 4 years experience (All applicants are required to submit their transcript and program curriculum or equivalent)</td>
</tr>
<tr>
<td>Russia</td>
<td>- Specialty certificate (clinical ordinatura) + 4 years experience (All applicants are required to submit their transcript and program curriculum or equivalent)</td>
</tr>
<tr>
<td>Singapore</td>
<td>- MDS + 4 years experience</td>
</tr>
<tr>
<td>South Africa</td>
<td>- Master in Clinical Dentistry (MClinDent) + 2 years experience</td>
</tr>
<tr>
<td>Sweden</td>
<td>- Specialty certificate</td>
</tr>
<tr>
<td>Switzerland</td>
<td>- Clinical Masters degree</td>
</tr>
<tr>
<td>Syria</td>
<td>- Specialization certificate Or Higher Postgraduate Studies + 4 years experience (All applicants are required to submit their transcript and program curriculum or equivalent)</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>- Master of Clinical Dentistry (MClinDent)</td>
</tr>
</tbody>
</table>
Notes

- A provisional license can be issued along with the evaluation application approval, please refer to circulars no. (3/2015), (10/2015) & (14/2015) for provisional license requirements and for further details.
- The tables above are not inclusive and may be frequently modified to be aligned with the registration standards of the degree of Specialist degree in dentistry in the State of Qatar.
- The table above doesn’t obligate the Qatar Council for Healthcare Practitioners to grant the applicants any specific degrees.
- Registration for specialty degree in dentistry requires completion of a comprehensive and advanced training program in the specialty.
- Holders of Master Degrees from any country must submit the transcripts that show the duration of study and program curriculum or equivalent.
- Applicants can be called for a personal interview according to the necessity of the case.
- Additional certificates and documents may be required as necessary.
- All above mentioned specialty certificates requires an approved clinical training program from the donors of the program provided that the training duration is not less than two years except:
  - Orthodontics (3 years minimum)
- When the applicant’s eligibility to be registered as Dental specialist is determined, the following requirements must also be met:
  - Academic degree in dentistry (not less than 5 years) or an equivalent degree.
  - Successful completion of the training (internship) year.

Certificates that will not be professional classified:

- Certificates of mostly academic nature and character, the curricula of which don’t include patient care, clinical practice and practical training in the field of specialization.
- Health certificates acquired through honorary training programs or as a visiting dentist or a non-practicing associate or those which are obtained through correspondence and the like.
- Certificate issued from health unrelated colleges and institutes certificate that are not subject to a training program or that are acquired during work in recognized training centers.
- Registration certificate for obtaining work permits or affiliation (membership) of certain associations that are granted after passing the licensing examination in specific countries such as United States of America.
- Certificates obtained or granted through affiliation or distance learning and contradict the laws of higher education.
- Bridge programs with specific universities made outside the university campus.
- Certificates from Royal College of Physicians and Surgeons in the United States of America.
2. Licensing Process Map

Start

Apply online for licensing, complete and submit the application with all the required documents - refer to licensing requirements

Pay the fees (if applicable)

The application after submission/payment will go to the Registration's Department landing page. (in this stage the status is “Under process with QCHP”)

Registration Department will check the request

Complete

Sent back with comments

Incomplete

Registration Department will check results of primary source verification

Results of verification

Positive

Application will be approved

Registration Department will issue the Medical License

End

Negative/Unable to verify

Applicant will be called for interview

Refer to PLC

Application will be approved

PLC Decision

Approved

Rejected

Re-verify within 14 days

Re-verify

Return to the Applicant’s landing page

Rejected

Applicant will be blacklisted

Pay the fees (if applicable)

Sent back with comments

Refer to PLC

Application will be approved

Proceed

Request will return to the Applicant’s landing page

PLC Decision

Rejected

Approved
Licensing Requirements

Please apply through the Registration/Licensing Electronic System on the QCHP website: [www.qchp.org.qa](http://www.qchp.org.qa), complete the online application and pay the required fees (if applicable).

Submit an electronic “Apply for Licensing” request and upload the below mentioned required documents (some documents will already be available in the online application from the evaluation):

1. Copy of valid passport.
2. Copy of valid QID (front and back) (If applicable).
   a. For male practitioners (and female practitioners on their employer’s sponsorship), the sponsor should be the potential employer.
   b. For female practitioners on a family sponsorship, please attach the QID in addition to a letter of intent from your potential employer.
3. One recent photo (according to photo criteria stated in [circular (04-2014)](http://www.qchp.org.qa) or in the “Additional Attachments” document).
4. An up to Date Curriculum Vitae (C.V).
5. Copy of all academic certificates relevant to applicant’s scope with official transcript (refer to Table no. 1 & 2).
6. Copy of the recent work experience certificates (with an issue date) required according to applicant’s scope (refer to Table no. 1 & 2).
7. Copy of valid medical/registration licenses accompanying the required years of work experience (if applicable).
8. Copy of the verification report.
9. Copy of the passing certificate of the qualifying exam (if applicable).
11. Medical report (valid for 6 months), which can be issued by:
   - HMC
   - Medical Commission (with CDC stamp of Vaccination)
   - Private hospitals (Al Ahli, Al Emadi & Doha Clinic)
   - Primary Health Care Corporation (For Qataris only)
12. Medical report must include: HIV test, HCV test, HBV test, HB vaccination and Chest X-Ray.
13. Copy of Valid Recognized CPR (cardio-pulmonary resuscitation) course or its equivalent (or CPR registration receipt + undertaking letter that CPR certificate will be submitted upon completion).
14. Original Certificate of Good Standing must be sent directly from the Registration authority (or authorities) of the most recent required years of work experience, to the: Registration Department, Qatar Council for Healthcare Practitioners, P.O. Box: 7744, Doha, Qatar or QCHPGoodSt@moph.gov.qa.
Notes

- Applications that do not meet the requirements mentioned above will be sent back to the applicant.
- The verification report and certificate of good standing will be reviewed during this phase; any misleading information provided will result in further investigations and could result in disciplinary action.
- It is the applicant’s responsibility to follow up on receiving the report regarding verification and the certificate of good standing.
- Applicants/employer representatives can follow up on the certificate of good standing with QCHPGoodSt@moph.gov.qa
- Original documents/certificates might be requested on a case by case basis.
- Any other documents required to support the application that are not mentioned above must be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated to Arabic or English and attached to a copy of the original documents.
- Please refer to the websites of the Ministry of Public Health & Qatar Council for Healthcare Practitioners frequently to check the updates of the requirements.
- A case by case assessment may be implemented.

You can follow-up on the request with your employer representative.

For visiting dentists

The following items are required in addition to the previous requirements noted above:

1. Copy of recent blood test and chest x-ray (valid for 6 months after the test date) from Medical Commission Dept. & CDC stamp of Vaccination from Department of Public Health (or an attested valid blood test & chest x-ray from home country and an undertaking letter signed and stamped from the place of work stating that the blood test & chest x-ray will be taken in the State of Qatar before commencing work).
2. The healthcare institution shall submit an application along with specific dates for the visiting doctors (for e.g. From: DD/MM/YR To: DD/MM/YR) without contradicting with the recruitment system in the Ministry of Interior with regards to the period of the visit.
3. There shall be a licensed specialist on a permanent basis with the same specialty for following up the cases that the visiting doctor deals with.
4. No QID is required for visiting Doctors; please check circular 14/2015
5. A letter of intent should be attached from the potential employer.
2. Dental privileges Process Map

Start

Apply manually for dental privilege and complete the application with all the required documents - Refer to dental privilege requirements & Circular (39-2012)

Core privileges

Implant privileges
Laser
Under G.A

Non-core privileges

General Dentist

Dental Specialist

Dental Specialist can apply for non-core privileges outside their specialty

Dental Specialist are eligible for non-core privileges in their specialty

Not eligible

Rejected

Evaluated by specialized committees in the State of Qatar.*

If eligible

QCHP will issue:
- An official letter with the approved privileges

End

- The applicant should follow up on the request with the employer representative.
- For any other privileges, refer to circular “39-2012” – Guidelines for Dentists.
- Please check circular no. (8/2015) - Mandatory instructions for all physicians and dentists.

* An interview with the specialized committee may be required.
Dental Privileges Requirements

Submit a manual Dental Privileges request attached with all the below mentioned documents
(Two copies to be submitted):

1. Request letter (cover letter) from the place of work mentioned in it the requested privilege signed & stamped by the medical director of the place of work.
2. Copy of work experience in the requested privilege.
3. Copy of training certificate/courses attended in the requested privilege.
4. An up to date Curriculum - Vitae (C.V).
5. Copy of valid Medical License.
6. Personal declaration and Personal Declaration for Dental Privileges (available on the QCHP website in the dental privilege section).
7. Copy of Bachelor’s Degree or its equivalent.
8. Copy of the specialization certificate or its equivalent.
9. Any other additional requirements requested.
10. Treated Cases on an CD or USB

Notes

- Applications that do not meet the requirements mentioned above will be sent back to counter 12 in the Ministry of Public Health’s premises.
- Original documents/certificates might be requested on a case by case basis.
- Any other documents required to support the application that are not mentioned above must be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated to Arabic or English and attached to a copy of the original documents.
- Please refer to the websites of the Ministry of Public Health & Qatar Council for Healthcare Practitioners frequently to check the updates of the requirements.
- A case by case assessment may be implemented.

You can follow-up on the request with your employer representative.
Circular “39-2012” – Guidelines for Dentists

<table>
<thead>
<tr>
<th>From</th>
<th>Dr. Jamal Rashid Al- Khanji</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Director, Healthcare Quality Management /SCH</td>
</tr>
<tr>
<td>To</td>
<td>All Dentists in the State of Qatar</td>
</tr>
<tr>
<td>Subject</td>
<td>Guidelines for Dentists</td>
</tr>
<tr>
<td></td>
<td>General &amp; specialist Scope of practice</td>
</tr>
<tr>
<td>Date</td>
<td>14 March 2012</td>
</tr>
</tbody>
</table>

At its meeting No.4 held on 28/2/2012, the Permanent Licensing Committee (PLC) approved the following Guidelines for Dentists, General & specialist Scope of practice

**General Remarks**

1) The Proposed guidelines are divided into two parts:
   a. Core privileges (for General Scope Dentist).
   b. Non-core privileges (for certified specialists).
2) Certified Specialists are automatically entitled to all core privileges.
3) Certified Specialists can only apply for non-core privileges outside of their specialty if they provide evidence of advanced training and/or experience in the individual procedure (an interview may be required).
4) General dentists can only apply for non-core privileges if they provide evidence of advanced training and/or experience in the requested procedure (an interview may be required).

**Core privileges (for General Scope Dentist)**

**Diagnostic Procedures**

1- Oral examination
2- Dental radiograph fabrication/diagnostic image interpretation
3- Pulp vitality testing
4- Plaster cast fabrication for diagnosis
5- Adjunctive medical laboratory evaluation
**Preventive Procedures**
1. Oral hygiene instruction procurement
2. General dental prophylaxis administration
3. Topical fluoride treatment
4. Fissure sealant application
5. Custom (fluoride) tray/mouth guard fabrication/insertion

**Restorative Procedures**
1. Direct restoration (amalgam/composite/glass ionomer) fabrication
2. Post and core fabrication
3. Vital bleaching

**Endodontic Procedures (permanent teeth)**
1. Pulpotomy
2. Pulp extirpation
3. Direct and indirect pulp capping
4. Conventional root canal therapy (single rooted teeth)
5. Non-Surgical retreatment (single rooted teeth)
6. Non-vital bleaching

**Periodontal Procedures**
1. Scaling and root planning
2. Gingivoplasty/gingivectomy localized single tooth only
3. Application of local medication delivery system
4. Maintenance recalls
5. Single crown lengthening (not involving bone removal)
6. Incision and drainage of periodontal abscesses
7. Provisional splinting of teeth

**Prosthodontics Procedures**
1. Inlay and onlay preparation/fabrication
2. Ceramic veneer preparation/fabrication
3. Partial coverage crown preparation/fabrication
4. Full crown preparation/fabrication (maximum one Quadrant at a time)
5. Bridge preparation/fabrication (maximum one quadrant at a time)
6. Maryland bridge preparation/fabrication
7. Partial Denture fabrication
8. Complete Denture fabrication
9. Denture relining
10. Repair of removable prosthodontic restorations
11. Repair of fixed prosthodontic restorations

**Oral Surgery Procedures**
1. Extraction of Erupted teeth
2. Incision and drainage of intraoral abscesses
3. Suturing of Intraoral wounds
4. Closed reduction of TMJ dislocation
5- Excision of hyperplastic tissues

**Orthodontic Procedures**
1- Emergency treatment of fixed appliances
2- Repair or replacement of removable appliances

**Pediatrics Procedures**
1- Pulpotomy (primary teeth)
2- Passive space maintainer fabrication/insertion
3- Stainless Steel crown fabrication/insertion

**Other Procedures**
1- Prescription of medication
2- Administration of Local anesthesia
3- Desensitization procedure administration

**Non-core privileges (for certified specialists) only.**

**Endodontic Procedures (permanent teeth)**
- a. Apexification /apexogenisis
- b. Conventional root canal therapy (multi rooted teeth)
- c. Non-surgical retreatment (multi rooted teeth)
- d. Root amputation/hemisection
- e. Periradicular Surgery
- f. Intentional reimplantation
- g. Treatment of obstructed canals
- h. Removal of broken instruments
- i. Repair of internal perforations

**Periodontics Procedures**
- a. Periodontal flap surgery
- b. Mucogingival Surgery (gingivoplasty, gingivectomy, frenectomy, free gingival/mucosal grafting, root coverage)
- c. Osseous surgery/crown lengthening
- d. Guided tissue regeneration
- e. Guided bone augmentation

**Prosthodontic Procedures**
- a. Denture rebasing
- b. Immediate denture fabrication/insertion
- c. Over denture fabrication/insertion
- d. Multiple unit fixed prosthesis construction (more than one quadrant at a time)
- e. Implant supported restoration (single)
f. Implant supported restoration (multiple)
g. Precision Attachment denture fabrication/insertion
h. Full-mouth reconstruction with alteration of vertical dimension
i. Complete occlusal adjustment

Oral Surgery Procedures
a. Surgical exposure of un-erupted teeth
b. Removal of impacted teeth
c. Removal of remaining roots
d. Removal of oral cavity cysts
e. Transplantations of teeth
f. Removal of palatal/alveolar exostoses
g. Removal of foreign bodies in soft tissue and hard tissue
h. Vestibuloplasty prosthetic surgery (e.g. alveoplasty, alveolar bone augmentation, sinus lifting etc.
i. Closure of oroantral fistulas
j. Intraoral hard tissue biopsy sampling
k. Frenectomy
l. Palatal tissue hyperplasia reduction

Orthodontic Procedures
a. Interceptive orthodontic treatment
b. Orthodontic treatment (including bonding bracket on surgically exposed teeth and applying traction on impacted teeth)
c. Insertion of removable and fixed functional appliances.
d. Orthodontics treatment in orthognathic surgery patients
e. Orthodontic treatment for cleft and syndrome patients.
f. Insertion of orthodontics mini screws.

Pedodontics Procedures
a. Preventive dental care (including oral hygiene, injury prevention, dietary, and habit counseling)
b. Behavior management techniques for apprehensive children (including voice control, non-verbal communication, tell-show-do, positive reinforcement, distraction, parental presence/absence, hand over mouth and Physical restraint)
c. Aversive behavioral management (including digital and non-nutritive sucking behavior, tongue and swallowing habits)
d. Management of bruxism
e. Interceptive orthodontic treatment (correction of anterior and posterior cross bite, space regainers, maxillary expansion with removable appliances)
f. Serial extraction.
g. Prosthodontic procedures (including fabrication / insertion of stainless steel crowns)
h. Uncomplicated extraction of primary and permanent teeth, full management of all types of tooth injuries (traumas)
i. Treatment of medically compromised physically and mentally disables children under local or general anesthesia in operating room
j. Full mouth rehabilitation for healthy apprehensive children under general anesthesia in operating room
k. Management and treatment of children receiving chemotherapy and/or radiation
Implant Procedures
a. Surgical placement of endosseous implants

Other Procedures (Procedures that need Special approvals)
a. Treatment under general anesthesia
b. Construction / insertion of obstructive sleep apnea appliances
c. Intraoral use of lasers.

Notes and definitions
1) All dentists must follow standard recognized procedures in all the fields of dentistry for diagnosis, treatment and follow-up of their patients.

2) All dentists must take necessary impressions and radiographic images whenever required for treatment or documentation. For example: Orthodontist should take initial impressions of both arches, a panoramic radiograph, and a lateral cephalogram.

3) Any other procedure that is not listed in this guideline can be request by the practitioner and evaluated by the registration department.

4) Please kindly refer to the Website for updates on a regular basis.

5) DENTAL SCOPES OF PRACTICE:

A) Orthodontics:
Is the diagnosis, prevention and treatment of all forms of malocclusion of the teeth (improper bite).

B) Oral & Maxillofacial Surgery:
Is the diagnosis, surgical, and nonsurgical treatment of diseases, injuries and defects of the mouth, face, skull, jaw, and associated structures.

C) Periodontics:
Is the prevention, diagnosis, and treatment of diseases or abnormalities of the periodontium, or supporting tissues of the teeth, including the gums, cementum and periodontal ligament.

D) Pediatric Dentistry:
Is the branch of dentistry that is concerned with oral healthcare for children and adolescents.

E) Endodontics:
Is the diagnosis, prevention, and treatment of diseases and injuries to the dental pulp (the soft tissues inside the tooth) and the tissues surrounding the root of the tooth.

F) Restorative Dentistry:
Is the treatment of patients with the partial or complete loss of teeth, including surgical, endodontic, periodontic, orthodontic and prosthodontics procedures.
G) **Prosthodontics:**
Is the restoration of oral function by creating prostheses and restorations (i.e. complete dentures, crowns, implant retained/supported restorations) for patients with a range of clinical conditions involving missing or deficient teeth and/or craniofacial tissues.

H) **Oral Surgery:**
Is the diagnosis, surgical treatment and ongoing management of conditions affecting the teeth and the bone immediately surrounding teeth.

I) **Public Health Dentistry:**
It is the science and art of diagnosing, preventing and controlling dental diseases and promoting dental health through organized community efforts.

J) **Oral Medicine:**
It is concerned with the oral health care of patients with chronic and medically related disorders of the oral and maxillofacial region, and with their diagnosis with non surgical management.

For further clarification please contact “Dentist Registration & Licensing Team”:

- Dr. Souma El-Torky, Registration Supervisor/ email: seltorky@moph.gov.qa
- Dr. Rima Hekmat Haddad, Registration Coordinator/ email: rhaddad@moph.gov.qa
- Dr. Omar Mohamad Nigm, Registration Coordinator/ email: onigm@moph.gov.qa

Thank you for your kind cooperation
4. License Renewal Process Map

Start

Apply online for renewal, complete and submit the application with all the required documents

Refer to renewal requirements

Pay the fees (if applicable)

The application after submission/payment will go to the Registration’s Department landing page. (in this stage the status is “Under process with QCHP”)

Registration Department will check the request

Incomplete

Request will return to the Applicant’s landing page

Complete

Application will be approved

Registration Department will renew the Medical License

End
License Renewal Requirements

Step 1: Fulfilling CPD Requirements

- All licensed healthcare practitioners are mandated to participate in CPD activities according to the policies and regulations of the Accreditation Department of the QCHP in order to renew their licenses. All licensed healthcare practitioners are responsible to fulfill annual, category-specific, and CPD cycle requirements and maintain records of CPD activities in the CPD ePortfolio prior to submission of their renewal applications.
- Please refer to QCHP-AD standards and guiding documents for more details about CPD Requirements.

Note: Healthcare Practitioners cannot submit renewal applications unless they are fully compliant to the CPD Requirements. System will not allow practitioners to apply for renewal of their licenses and an automated message will be generated informing practitioners that they don’t meet the CPD requirements.

Step 2: Fulfilling Renewal Application Requirements

Please apply through the Registration/Licensing Electronic System on the QCHP website: (www.qchp.org.qa), complete the online application and pay the required fees (if applicable).

Submit an electronic “Apply for Renewal” request and upload the below mentioned required documents:

1. Copy of valid passport.
2. Copy of valid QID (front and back).
   a) For male practitioners (and female practitioners on their employer’s sponsorship), the sponsor should be the employer.
   b) For female practitioners on a family sponsorship, please attach the QID in addition to a letter of intent from your employer.
3. One recent photo (according to photo criteria stated in circular (04-2014) or in the “Additional Attachments” document).
4. Medical Fitness Declaration Form for Healthcare Facility. (correct template is in the “Additional Attachments” document)
5. Medical Fitness Declaration Form for Healthcare Practitioners. (correct template is in the “Additional Attachments” document)
6. Copy of Valid Recognized CPR (cardio-pulmonary resuscitation) course or its equivalent (or CPR registration receipt + undertaking letter that CPR certificate will be submitted upon completion).
7. An employment letter (correct template is in the “Additional Attachments” document)
8. Any other additional requirements might be requested.
Notes

- Applications that do not meet the requirements mentioned above will be sent back to the applicant.
- Original documents/certificates might be requested on a case by case basis.
- Any other documents required to support the application that are not mentioned above must be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated to Arabic or English and attached to a copy of the original documents.
- Please refer to the websites of the Ministry of Public Health & Qatar Council for Healthcare Practitioners frequently to check the updates of the requirements.
- A case by case assessment may be implemented.

You can follow-up on the request with your employer representative.

For visiting dentists

The following items are required in addition to the previous requirements noted above:

1. The healthcare institution shall submit an application along with specific dates for the visiting doctors (for e.g. From: DD/MM/YR To: DD/MM/YR) without contradicting with the recruitment system in the Ministry of Interior with regards to the period of the visit.
2. There shall be a licensed specialist on a permanent basis with the same specialty for following up the cases that the visiting doctor deals with.
3. No QID is required for visiting Doctors; please check circular 14/2015
4. A letter of intent should be attached from the potential employer.
5. Work experience certificate for the last two years of experience attested from the Qatari Ministry of Foreign Affairs (or copy of proof of submission to the verification company for the work experience certificate and a work experience certificate from the last year).
5. Change Place of Work Process Map

Start

Apply online for change place of work, complete and submit the application with all the required documents

The application after submission/payment will go to the Registration’s Department landing page. (in this stage the status is “Under process with QCQP”)

Registration Department will check the request

Sent back with comments

Complete

Is the facility licensed?

Yes

Registration department will issue a new Medical License with the new facility’s name

No

Registration Department will send back the request with a comment that the requirements are complete pending the facility license

Request will return to the Applicant’s landing page

Request will return to the Applicant’s landing page

End
Change Place of Work Requirements

Please apply through the Registration/Licensing Electronic System on the QCHP website: (www.qchp.org.qa), complete the online application and pay the required fees (if applicable).

Submit an electronic “Apply to Change Place of Work” request and upload the below mentioned required documents:

1. Copy of valid passport
2. Copy of valid QID (front and back)
   a) For male practitioners (and female practitioners on their employer’s sponsorship), the sponsor should be the new employer or a secondment from the Ministry of Interior along with an undertaking letter that a renewed secondment or QID will be submitted upon expiry of the attached one.
   b) For female practitioners on a family sponsorship, please attach the QID in addition to a letter of intent from your new employer.
3. A letter of no objection from the old employer.
4. Any other adjustment according to the current laws and regulations in the State of Qatar

Notes

- In case the “Apply to Change Place of Work” request was submitted after evaluation (before licensing), then the QID will not be required.
- Applications that do not meet the requirements mentioned above will be sent back to the applicant.
- Original documents/certificates might be requested on a case by case basis.
- Any other documents required to support the application that are not mentioned above must be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated to Arabic or English and attached to a copy of the original documents.
- Please refer to the websites of the Ministry of Public Health & Qatar Council for Healthcare Practitioners frequently to check the updates of the requirements.
- A case by case assessment may be implemented.

You can follow-up on the request with your employer representative.
6. Add/Change Scope of Practice Process Map

- General Dentist to Specialist
- Additional Scope
  (The application might be referred to the specialized committee and an interview might be required)

Apply online for add/change scope of practice, complete and submit the application with all the required documents - refer to the requirements

The application after submission/payment will go to the Registration's Department landing page. (in this stage the status is “Under process with QCHP”)

- Incomplete
  - Sent back with comments
  - Registration Department will check the request

- Complete/eligible
  - Application will be approved
    - Registration Department will issue a new Medical License with the additional/new scope of practice

- Not eligible
  - Application will be rejected

Request will return to the Applicant’s landing page
Add/Change Scope of Practice Requirements

Please apply through the Registration/Licensing Electronic System on the QCHP website: (www.qchp.org.qa), complete the online application and pay the required fees (if applicable).

A) For Dental Trainee to General Dentist:

Submit an electronic “Apply to Add/Change Scope of Practice” request and upload the below mentioned required documents:

1. Copy of valid passport
2. Copy of valid QID (front and back).
3. A no objection letter from the employer for the addition/change of scope.
4. Copy of Valid Recognized CPR (cardio-pulmonary resuscitation) course or its equivalent (or CPR registration receipt + undertaking letter that CPR certificate will be submitted upon completion).
5. Copy of valid passing certificate of the qualifying exam.
6. Certificate of good standing from the place of work mentioned in it the start and end date of training.
7. Recommendation letter from the supervisor.
8. Copy of the verification report for any additional documents.
9. Log book showing patients name and treatment done to be signed/stamped by the dentist and the supervisor along with facility stamp

B) General Dentist to Specialist/Adding a Scope:

Submit an electronic “Apply to Add/Change Scope of Practice” request and upload the below mentioned required documents:

1. Copy of valid passport
2. Copy of valid QID (front and back).
3. A no objection letter from the employer for the addition/change of scope.
4. Copy of additional academic certificates relevant to the new scope (if applicable).
5. Copy of additional experience certificates (with an issue date) relevant to the new scope (if applicable).
6. Copy of the verification report for any additional documents.

Notes

- Applications that do not meet the requirements mentioned above will be sent back to the applicant.
- If the application is for an additional scope then this must be mentioned in the “Additional Information Section.
- Original documents/certificates might be requested on a case by case basis.
- Any other documents required to support the application that are not mentioned above
must be submitted upon request.

- Any documents presented in languages other than Arabic or English must be translated to Arabic or English and attached to a copy of the original documents.
- Please refer to the websites of the Ministry of Public Health & Qatar Council for Healthcare Practitioners frequently to check the updates of the requirements.
- A case by case assessment may be implemented.

You can follow-up on the request with your employer representative.
7. Certificate of Good Standing Process Map

- Apply online/ manual for certificate of good standing and complete the application with all the required documents - Refer to the requirements.
- The registration department will check the request.
- If the request is incomplete, it will be sent back with comments.
- If the registration department finds a Fitness to Practice issue, the request will return to the Applicant’s landing page.
- The registration department will issue a “Letter of Standing (LoS)” for the applicant.
- The Registration Department will send the original certificate of good standing directly to the requested registration authority by mail/email.
- A black and white copy of the certificate of good standing can be issued to the applicant upon their request.
- The Registration certificate can be issued and collected by the applicant only in a sealed envelope.
Certificate of Good Standing (COGS) Requirements

Please apply through the Registration/Licensing Electronic System on the QCHP website: (www.qchp.org.qa), complete the online application and pay the required fees (if applicable).

Submit an electronic “Apply for a Certificate of Good Standing” request and upload the below mentioned required documents:

1. Copy of valid passport
2. Copy of valid QID (front and back).
3. Copy of all academic certificates relevant to applicant’s scope.
4. Certificate of good standing from previous places of work (in Qatar).
5. Clear address for the Registration Authority and e-mail address that QCHP will submit the certificate to.

Notes

- Applications that do not meet the requirements mentioned above will be sent back to the applicant.
- Original documents/certificates might be requested on a case by case basis.
- Any other documents required to support the application that are not mentioned above must be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated to Arabic or English and attached to a copy of the original documents.
- Please refer to the websites of the Ministry of Public Health & Qatar Council for Healthcare Practitioners frequently to check the updates of the requirements.
- A case by case assessment may be implemented.

You can follow-up on the request with QCHPGoodSt@moph.gov.qa
8. Personal Medical Radiation License Process Map

Start

Apply online for radiation license, complete and submit the application with all the required documents - refer to radiation license requirements

Pay the fees (if applicable)

The application after submission/payment will go to the Registration’s Department landing page. (in this stage the status is “Under process with QCHP”)

Registration Department will check the request

Incomplete

Sent back with comments

Complete

Application will be approved

Registration Department will issue the radiation license

End
Personal Medical Radiation License Requirements

Please apply through the Registration/Licensing Electronic System on the QCHP website: (www.qchp.org.qa), complete the online application and pay the required fees (if applicable).

Submit an electronic “Apply for a Radiation License” request and upload the below mentioned required documents:

1. Copy of valid passport
2. Copy of valid QID (front and back).
   a. For male practitioners (and female practitioners on their employer’s sponsorship), the sponsor should be the employer.
   b. For female practitioners on a family sponsorship, please attach the QID in addition to a letter of intent from your employer.
3. One recent photo (according to photo criteria stated in circular (04-2014) or in the “Additional Attachments” document).
4. Copy of all academic certificates relevant to applicant’s scope.
5. An up to date Curriculum Vitae (C.V).
6. Original Certificate of physical Fitness to work in the Radiation field (From Occupational Health Section - Preventive Health Department – Ministry of Public Health), the certificate is valid for one year.
7. Copy of training course certificate in the radiation protection field.
8. Copy of the previous personal dose records (if any).
9. Copy of Radiation License (if any).

Notes

- Applications that do not meet the requirements mentioned above will be sent back to the applicant.
- Original documents/certificates might be requested on a case by case basis.
- Any other documents required to support the application that are not mentioned above must be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated to Arabic or English and attached to a copy of the original documents.
- Please refer to the websites of the Ministry of Public Health & Qatar Council for Healthcare Practitioners frequently to check the updates of the requirements.
- A case by case assessment may be implemented.

You can follow-up on the request with your employer representative.
9. Personal Medical Radiation License Renewal Requirements

Start

Apply online for radiation license, complete and submit the application with all the required documents - refer to radiation license requirements

Pay the fees (if applicable)

The application after submission/payment will go to the Registration’s Department landing page. (in this stage the status is “Under process with QCHP”)

Registration Department will check the request

Complete

Application will be approved

Registration Department will renew the radiation license

End

Request will return to the Applicant’s landing page

Sent back with comments

Incomplete
Personal Medical Radiation License Renewal Requirements

Please apply through the Registration/Licensing Electronic System on the QCHP website: (www.qchp.org.qa), complete the online application and pay the required fees (if applicable).

Submit an electronic “Apply for Renewal of Radiation License” request and upload the below mentioned required documents:

1. Copy of valid passport
2. Copy of valid QID (front and back).
   a. For male practitioners (and female practitioners on their employer’s sponsorship), the sponsor should be the employer.
   b. For female practitioners on a family sponsorship, please attach the QID in addition to a letter of intent from your employer.
3. One recent photo (according to photo criteria stated in circular (04-2014) or in the “Additional Attachments” document).
4. Copy of all academic certificates relevant to applicant’s scope.
5. An up to date Curriculum Vitae (C.V).
6. Original Certificate of physical Fitness to work in the Radiation field (From Occupational Health Section - Preventive Health Department – Ministry of Public Health), the certificate is valid for one year.
7. Copy of training course certificate in the radiation protection field.
8. Copy of the previous personal dose records (if any).
9. Copy of Radiation License (if any).

Notes

- Applications that do not meet the requirements mentioned above will be sent back to the applicant.
- Original documents/certificates might be requested on a case by case basis.
- Any other documents required to support the application that are not mentioned above must be submitted upon request.
- Any documents presented in languages other than Arabic or English must be translated to Arabic or English and attached to a copy of the original documents.
- Please refer to the websites of the Ministry of Public Health & Qatar Council for Healthcare Practitioners frequently to check the updates of the requirements.
- A case by case assessment may be implemented.

You can follow-up on the request with your employer representative.