Guidelines for Nurses
1. A) Registration / Evaluation Process Map for “GSN”, “Midwife” and “Nurse Specialist”

- General Scope Nurse (GSN)
  - Apply online for evaluation, complete and submit the application with all the required documents - Refer to table (1) and the evaluation requirements

- Midwife
  - Pay the fees (if applicable)
  - The application after submission/payment will automatically go to the Employer landing page. The focal point will review the documents, ensure that they are complete, approve and submit the application (in this stage the status is “employer completing”)

- Nurse Specialist
  - After completing the required training period re-apply again for evaluation

- Missing documents (incomplete applications)
  - Rejected
  - Incomplete /Ineligible (Lack of Qualification)
  - Registration Department will check the request
  - Complete / Eligible
  - The applicant needs qualifying exam?
    - Yes
      - Applicant will apply for training – Refer to training requirements
    - No
      - Is the Qualifying Exam Certificate attached?
        - Yes
          - The applicant will sit for the exam
        - No
          - Rejected

- Registration Department will issue:
  - Preliminary Evaluation (sit for exam)
  - CID Letter

- Applicant will re-enter the exam (3 times only)

- Approved
  - The applicant will move to the next phase - Licensing
  - Submit your prometric results to QCHP – Registration Department which will issue:
    - Passing Exam Certificate
    - CID Letter

- Rejected

- Midwife Nurse Specialist

- The applicant should follow up on the request with the focal point.
- For Break from Practice policy please refer to Attachment “1”.
- Preliminary evaluation is valid only for 6 months.
B) Registration / Evaluation Process Map for “Nurse Trainee”

- Apply online for evaluation, complete and submit the application with all the required documents - Refer to table (1) and the evaluation requirements.
- Pay the fees (if applicable).
- The application after submission/payment will automatically go to the Employer landing page. The focal point will 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.
- The applicant should follow up on the request with the focal point.
- The applicant will move to the next phase - Licensing.
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 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).
5. Copy of all academic certificates with official transcript (refer to table no. 1).
6. Copy of all work experience certificates (refer to table no. 1).
7. Copy of valid medical/registration license from home country or medical/registration licenses accompanying the required years of work experience (if applicable).
8. Copy of proof of submission to the verification company (if applicable).
9. Copy of the passing certificate of the qualifying exam (if available).

Notes:

- Applications that do not meet the requirements mentioned above 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.
- 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 the verification and the certificate of good standing.
- Original document/certificates if required shall be submitted upon request.
- 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 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 evaluation requirements.
Follow-up on request (After a minimum period of 25 working days)

Table No. “1”

<table>
<thead>
<tr>
<th>Scope of practice</th>
<th>Education Requirements</th>
<th>Experience Requirements</th>
<th>Qualifying Exam</th>
</tr>
</thead>
</table>
| **General Scope Nurse** | • Bachelor Degree in nursing (4 years).  
Or
• Diploma in Nursing: 3 years after graduation from high school (12 years).  
Or
• Associate degree from united states of America (only) | • 2 years as Nurse after Bachelor or Diploma graduation.  
Or
• 3 years as Nurse after Associate degree graduation. | • Prometric* |
| **Nurse Specialist** | • Post graduate degree Minimum 1 year from recognized institutions.  
Or
• Masters degree.  
Or
• Bachelor Degree in nursing + 5 years clinical nursing experience + 2 years experience as nurse educator (For nurse educator specialty only) | • Meet eligibility requirement for general scope nurse.  
And
• 3 years experience in the same specialization with no break from practice.  
Or
• 5 years clinical nursing experience + 2 years experience as nurse educator (For nurse educator specialty only) | Not Required |
| **Midwife** | • Bachelor Degree in Midwifery or equivalent  
Or
• Bachelor Degree in Nursing AND recognized post-graduate program in Midwifery | 2 years as Midwife after Bachelor or post-graduate program of Midwifery | Prometric |
| **Nurse Trainee** | • Bachelor Degree in nursing (4 years)  
Or
• Diploma in Nursing: 3 years after graduation from high school (12 years)  
Or
• Associate degree from united states of America (only) | No experience required | Not Required |

**Notes**

- Holders of National Council Licensure Examination (NCLEX)* shall be exempted from the State of Qatar’s qualifying exam (Prometric) provided that the applicant succeeded in the exam not earlier than the last five years.
- Nursing is a clinically based field discipline -online and distance learning program will not be accepted.
Applicants with Break from Practice (Attachment no. 1: break from practice policy) or lack of experience (total clinical experience between 18 months and 2 years) can apply for training then re-apply for evaluation after successfully completing the required experience (check Training Letter requirements).

- Applicants with total clinical experience less than 18 months can apply for Evaluation as “Nurse Trainee” provided that he/she has a Family Residency (table no. 1).
- If a nurse is a graduate of nursing school or any program which is less than 3 years, she can apply for nurse technician (Sub-section “4”: Allied Healthcare Practitioners).
- Evaluation Requests with total clinical experience less than 18 months will be assessed case by case.
- Evaluation Requests with Lack of experience will be evaluated case by case.

**Training Letter Requirements**

Applicants with Break from Practice or lack of experience (check the above mentioned notes for each scope of practice) 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.
2. Licensing Process Map for “GSN”, “Midwife”, “Nurse Specialist” and “Nurse Trainee”

- The applicant should follow up on the request with the focal point.
QATAR COUNCIL FOR HEALTHCARE PRACTITIONERS (QCHP)

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 Verification Report payment receipt.
2. Copy of Valid passport + Copy of Valid QID (if applicable).
3. One recent photo (according to photo criteria stated in attachment 2).
5. 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)
6. Blood test must include: HIV test, HCV test, HBV test, HB vaccination and chest X-Ray.
7. 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.)
8. Copy of all academic certificates (refer to table no. 1).
9. Copy of all work experience certificates (refer to table no. 1).
10. Copy of valid medical/registration license from home country and medical/registration licenses accompanying the required years of work experience.
11. 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, Doha, Qatar.

Notes

- Applications that do not meet the requirements mentioned above will be rejected.
- 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 in accordance with those 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.
QATAR COUNCIL FOR HEALTHCARE PRACTITIONERS (QCHP)

- Original documents /certificates if required shall be submitted upon request.
- Any other 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 20 working days)
3. License Renewal Process Map

Start

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

License valid – Refer to renewal requirements “A”

License expired for less than 6 months – Refer to renewal requirements “B”

License expired for more than 6 months – Refer to renewal requirements “C”

Pay the fees (if applicable)

The application after submission/payment will automatically go to the Employer landing page. The focal point will review the documents, ensure that they are complete, submit and approve the application (in this stage the status is “employer completing”)

Registration Department will check the request

Incomplete → Rejected

Complete

Application will be approved

Registration Department will issue a valid Medical License

End

❖ 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.
QATAR COUNCIL FOR HEALTHCARE PRACTITIONERS (QCHP)

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 Qatars 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)
QATAR COUNCIL FOR HEALTHCARE PRACTITIONERS (QCHP)

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

- **Start**
  - Apply online for change scope of practice, complete and submit the application with all the required documents - Refer to the requirements
  - The application after submission will automatically go to the Employer landing page. The focal point will 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
    - Application will be approved
      - Registration Department will issue a new Medical License with the new scope of practice

- **Rejected**
- **Incomplete**

- 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)
Requirements:
- Valid QID copy
- Valid passport copy
- Personal Declaration
- Experience Certificate and Certificate of good standing from the Human Resource Dept. of your employer (in Qatar)
- Copy of all academic certificates
- Clear address for the authority

Start

Expired License

Valid License

Apply online/ manual for certificate of good standing and complete the application with all the required documents- Refer to the requirements

Non Licensed

Apply Manually for “To whom it may concern Letter”

The registration department will check the request

Fitness to Practice issue

Rejected

Incomplete

Complete

Registration department will issue “To whom it may concern letter” for the applicant

Registeration department will issue “Letter of Standing (LoS)” for the applicant

Registration Department will send the original good standing certificate directly to the registration authority by mail

End
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.
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)