



The American Board of Pathology

A Member Board of the American Board of Medical Specialties

WEB SITE: www.abpath.org

TELEPHONE: (813) 286-2444

Revised 5/10/11

Please *DO NOT* call the ABP with questions until you have read these instructions.

Instructions for PATHway to Online Applications

If you have questions in regard to ABP examination and certification processes, please see *Instructions and Information for Candidates for Certifying Examinations*. For prerequisites and requirements necessary to qualify for the examinations and other related policy, please see the *Booklet of Information*. Both documents are available on the ABP Web site. If you need additional information, e-mail your questions to questions@abpath.org. Please indicate the general nature of your question (i.e., primary examination, subspecialty examination, medical license question, login problems) in the subject line so that we can direct your question to the appropriate department.

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The ***My Profile*** Tab

Please check the My Profile tab to be sure your personal information is correct. Your e-mail address is required and is our primary method of correspondence. Your mailing address is required for sending your certificate. If you make any changes to any of the data, be sure to click the 'Save Individual Data' button at the bottom of the screen.

The fields above 'Remember this ID' cannot be edited by you. If any of the personal information is incorrect, please fax the corrected information to the ABP Office (we prefer NOT to receive personal information via e-mail, which is not secure). If your name has changed and you would like for your name to be changed on ABP records, you must send verification of your legal name change. Please check www.abpath.org for the name change form and instructions.

For APO or FPO addresses, fill in the City field with APO, AP or FPO, AP and leave the State field blank (or select the blank line above Alabama in the drop-down list).

You may change your username and password at any time.

When your application has been approved by the Credentials Committee, the Board Qualification table will appear on your My Profile tab.

When you are certified, the Board Certification table will appear on your My Profile tab.

The Medical Licensure table appears on your My Profile tab. You must upload your medical licenses here before you finalize an application or registration.

The Board Correspondence Tab

When you first log in, the Board Correspondence tab will be displayed. Communication regarding your application/examination will appear on this screen.

Application Tracking

Below is an example of an application in progress. The application and payment have been received, the medical license and diploma have been approved, the application was approved and the evaluation was submitted by the Program Director, and the application was approved by the Credentials Committee (information regarding your period of board qualification is on the My Profile tab). The examination date has not yet been assigned. If the Application Coordinator or Credentials Committee had comments or questions regarding your application, you would receive an e-mail indicating you should log in and the comment would appear in the Comments text box. Please respond to the comments via e-mail.

My Profile	Primary	Board Correspondence
Mailing Address: The American Board of Pathology PO Box 25915 Tampa, Florida 33622-5915		Express Mail Address: The American Board of Pathology 4830 W. Kennedy Blvd, Suite 690 Tampa, Florida 33609-2571

2010 Spring Primary Exam Application Tracking

- Application and payment have been received
- Medical license received
 - Approved
 - Expired
 - Not approved (training or restricted license)
 - Applied for
 - Step 3 score or equivalent
- Medical school diploma
 - Approved
- Application to Program Director for review
 - Completed
- Evaluation 1 received
- Application to Credentials Committee
 - Approved
 - Not Approved
- Examination date assigned

Comments:

Registration Tracking

Below is an example of a registration in progress. The registration and payment have been received and the medical license was approved. The examination date has not yet been assigned. If the Application Coordinator had comments or questions regarding your registration, you would receive an e-mail indicating you should log in and the comment would appear in the Comments text box. Please respond to the comments via e-mail.

My Profile	Primary	Board Correspondence
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Mailing Address: The American Board of Pathology PO Box 25915 Tampa, Florida 33622-5915	Express Mail Address: The American Board of Pathology 4830 W. Kennedy Blvd, Suite 690 Tampa, Florida 33609-2571
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2009 Fall Exam Results

- [Results Letter for the 2009 Primary Examination\(s\)](#)
- [Performance Report for the 2009 Fall Anatomic Pathology Examination](#)

2010 Spring Primary Exam Registration Tracking

- Registration and payment have been received
- Medical license received
 - Approved
 - Expired
 - Applied for
- Examination date assigned

Comments:

Examination Results

Also available on the Board Correspondence tab are exam results. In the example above, there is a link to the results letter and a link to the performance report for the unsuccessful candidate. Click on each of the links to view them.

Some users have received a 'blank page' message when the links are clicked. If you do get a blank page message, press F5 on your keyboard to refresh the page and the contents of the document will appear.

Examination Date Assignments

Date assignments will be posted to your Board Correspondence tab in March for those registered for the Spring examinations and in September for those registered for the Fall examinations.

1. Date assignments for all examinations are made by the ABP.
2. If you are unable to accept your date assignment, you must cancel your registration for the exam session with the 'Cancel' link on your PATHway Board Correspondence page. You have two weeks from the date the examination date assignments were posted to cancel your registration. (When you are ready to take the examination, complete a registration form [not an application] and pay the \$500 fee.)
3. If you are registered for combined APCP, you do not have the option to cancel one portion of the examination.
4. Transfers cannot be made within the same examination period.
5. Special requests for date assignments cannot be accepted.

The Primary Tab – Application Form

Access to your primary application or registration is available on the Primary tab. If the 'Go To Application Form' link or the 'Go To Registration Form' link are not available, please contact restrkg@abpath.org.

All of the information on each page must be completed before it can be saved. Be sure to click the 'Save' button when you add or change data. Do not click the 'Finalize' button until the application is complete and you are ready to fill in your credit card information.

ABP applications require files to be uploaded. The files must be in PDF format. Many word processing products have the capability of saving PDF files. If your computer does not have a product that can save a document as a PDF file, there are free products available online (search for 'how to save pdf files'). You must complete the information, upload the PDF files on each page, and click "Save Form" on each page before proceeding to the next page.

Do not wait until the deadline to submit your application. If you have any problems after business hours, your application may not be finalized by the deadline. **There will be no extension of the deadline.**

Primary Application Page 1

Page 1 displays the information from the My Profile tab. The information is not editable on this page. If the information is incorrect, please refer to the instructions for the My Profile tab.

Primary Application Page 2

The options for primary certification are: anatomic pathology only (AP), clinical pathology only (CP), combined anatomic pathology and clinical pathology (APCP), or combined AP/NP. Selection of your certification determines which options are available on subsequent pages of the application. For example, the requirements for combined APCP are different from the requirements for AP, so the options on the pages for training will be different. If you change your mind about your primary certification after you begin the application, you will have to start over on Page 2.

Some candidates may have fulfilled the requirements for combined APCP but wish to take only one part of the examination (either anatomic pathology or clinical pathology) at a time. It is not required that both parts of the examination be taken at one time even though you apply for combined certification. However, The American Board of Pathology strongly recommends and urges that those candidates qualified for the combined anatomic pathology and clinical pathology examination take both parts at one sitting.

If you are qualified for the combined APCP examination, check combined anatomic pathology and clinical pathology (APCP) on Page 2. On Page 10 you can choose to take both AP and CP at one sitting, or just one portion for the upcoming examination. If taken at separate sittings, there is a separate examination fee for each sitting.

Beginning in 2012, AP/NP will be the only combined certification available. Applicants that began residency training in 2008 will be allowed to apply for combined primary/subspecialty certification described in the *Booklet of Information*. However, this request complicates the application process and, except for AP/NP, makes no difference in the length of training. The order in which examinations must be taken and the cost of the examinations are the same

as if the certifications were separate. Given this information, applicants are encouraged to apply for AP or CP only certification followed by subspecialty certification, rather than taking the combined primary/subspecialty route.

Click in the checkbox at the bottom of the page to indicate 'I agree to be legally bound by the foregoing.'

Primary Application Page 3

It is a **requirement** that you possess a currently valid, full and unrestricted license to practice medicine or osteopathy. If your license is currently valid but due to expire on or before September 1 for Spring exams or December 1 for Fall exams and you are declared qualified, you will be allowed to take the examination. However, evidence of possession of a current license will be required before results will be released. Refer to 'Uploading/Updating Your Medical License on the My Profile Tab.' The information from the Medical License table will appear on your application.

-OR-

If you are in the process of applying for a license to practice medicine or osteopathy, click the 'Medical License Applied For' box in the section below the Medical Licensure table. Please upload a copy of evidence of successful completion of USMLE Step 3 or other examination required by the licensing authority in the 'upload your USMLE Step 3' field. In addition, please upload a copy of the letter or email received from the medical licensing board stating they are in receipt of your application for licensure in the 'upload your medical licensing board letter or email' field. The files must be in PDF format.

Please do **NOT** attach your license or limited license.

To summarize:

If you have a currently valid, full, and unrestricted license to practice medicine or osteopathy, please indicate the information in the Medical Licensure table and upload a copy of your medical license

-OR-

If you have applied for a license to practice medicine or osteopathy, please click the 'Medical License Applied For' box and upload evidence of successful completion of USMLE Step 3 AND a copy of the medical licensing board letter or email.

Primary Application Page 4

Indicate your premedical education (up to two schools) in the Premedical School/University Education table(s). If you did not attend, click the 'None' checkbox above the table.

Indicate your medical education in the Medical School/University Education table.

An applicant must have graduated from a medical school in the United States or Canada accredited by the Liaison Committee on Medical Education, graduated from an osteopathic college of medicine accredited by the Bureau of Professional Education of the American Osteopathic Association, or graduated from a medical school outside the United States or Canada acceptable to the ABP. For graduates of United States or Canadian medical schools, this requirement may be met by a letter from the Dean's

Office of your medical school certifying that you graduated from medical school and the degree awarded.

All applicants must upload a copy of the medical school diploma (along with an English translation if issued outside the United States in a language other than English), showing the medical degree and the date that it was awarded. **A certificate showing that the applicant has passed a final examination is not acceptable.**

If you have an advanced degree, complete the Advanced Degree table.

Primary Application Page 5

Indicate each year of training in an ACGME or RCPSC program. **Do not list more than the 48 months** required pathology training for certification in APCP or **more than the 36 months** for single certification in AP or in CP.

If you trained in multiple programs in any given year, please list the partial program years separately. If you cannot fit your training in the 5 years available, please complete the tables with the **final** program for each **year**. Explain the discrepancies in the text box below the training table.

If you took more than 4 weeks' vacation/leave in any one academic year, click 'Yes' in the box. If you chose 'Yes,' explain how the time was made up in the text box.

When your Program Director reviews your application, approval is indicated with a check for 'As the applicant's program director, I certify that the above statement is correct.'

Primary Application Page 6

List the number of full-time months spent in the various categories of pathology rotations. **Do not list more than the 48 months** required pathology training for certification in APCP or **more than the 36 months** for single certification in AP or in CP. For application purposes, the ABP considers that 1 month = 4 weeks. One full year of training would be 12 4-week rotations **plus** four weeks of vacation. Do **NOT** include vacation in the reported information.

If you list months in 'Other,' they must be specified in the text box below the months box.

If your rotations were integrated, click the 'Integrated Rotations' check box and explain in the comments text box. (An example of integrated rotation: autopsy and surgical pathology were done at the same time.)

Primary Application Page 7

If this page number is grey and not available, you are not required to complete it.

The credentialing year information is only required if your training began prior to 2002. Detail the training you are using to meet the credentialing year requirement. Use the appropriate section to document your pathology training used to satisfy the credentialing year requirement and submit the required documentation as stated on the application.

Primary Application Page 8

Please report the autopsies in which you had an active role in each of the seven components as listed on the application. The minimum number of autopsies expected is 50. If you have not performed 50 autopsies by the application deadline, you are not qualified.

Upload your autopsy list in PDF format. The list must include all of the necropsies that you have performed, giving only age, sex, primary diagnosis, and date performed. Do not send complete autopsy reports. Please number each item in the list, the minimum number of autopsies expected is 50. You cannot complete the application without the autopsy file being attached.

Please indicate how many of the autopsies were Shared, Limited, Forensic, and Fetal. This data is informational. There are no specific requirements.

In the '4 Year Total' table, please indicate the information requested. There are no specific numerical requirements for surgical pathology, cytopathology specimens, bone marrows, FNAs, or clinical pathology consultations. This data is informational. There are no specific requirements.

Primary Application Page 9

Please explain any gaps in time between graduation from medical or osteopathic school and the beginning of pathology training or gaps in pathology training. If there were no gaps, click the 'None' check box.

Please indicate whether or not you have had any adverse actions.

Director's Comments will be completed when your Program Director reviews your application, and approval is indicated with a check beside the Program Director's name.

Primary Application Page 10

Select the examination you wish to take. See the information under Primary Application Page 2 for a detailed explanation.

Primary Application Page 11

Fill in how you would like to have your name inscribed on your certificate.

A candidate who is declared qualified for the combined examination in anatomic pathology and clinical pathology will receive a certificate only after both parts (anatomic pathology and clinical pathology) of the examination have been passed.

A candidate who is declared qualified for the combined examination in anatomic pathology or clinical pathology and a subspecialty area of pathology will receive a certificate only after both parts (anatomic pathology or clinical pathology and the subspecialty area of pathology) of the examination have been passed.

A candidate who is declared qualified for the examination in anatomic pathology only or clinical pathology only will receive a certificate after passing the examination in anatomic pathology or in clinical pathology.

Select your title. Your choices are: MD, DO, or none.

If name listed above is different from the name on your application, you must send verification of legal name change and click the check box.

Primary Application Page 12

Indicate your preference regarding the ABMS listing.

Finalize Your Application

All applications must be 'finalized' by midnight on the deadline date.

Click the 'Finalize' button if the application is complete and you are ready to fill in your credit card information. The ABP accepts VISA, Mastercard, and American Express. Checks and money orders are NOT accepted. When the credit card information has been submitted, you will receive an e-mail receipt. Please print the receipt for your records. The e-mail receipt is automatic and the ABP does not have access to it. The e-mail receipt will come from emailreceipts@authorize.net. If you do not receive the e-mail receipt, please check your junk mail and spam folders.

After Your Application has been Finalized

Print the application for your records. Do NOT send a paper copy to the ABP office.

Please check your e-mail and log in to PATHway frequently.

Please include your full name and ABP ID in all correspondence.

Photo IDs are NOT required.

The automated process sends an e-mail to your Program Director that your application and evaluation form are available. When a resident lists more than one program, the final Program Director completes the primary evaluation and approves the application. Any other Program Directors listed will complete the secondary evaluation. Program Directors will have one week after the application deadline to complete their reviews and evaluations. Your application is not considered complete and will not be reviewed until the required documentation by the Program Director is completed. If your Program Director needs to be reminded, please do so.

Your medical license, medical school diploma, and Step 3 score will be acknowledged during application review. When your application is processed, the boxes will be checked. If your application requires additional information, your Board Correspondence page will be updated and you will receive an e-mail. At that time you will be given a deadline to submit the required additional information to the Board office. ***Please do not call or e-mail the Board office regarding the status of your application.***

Applications are processed in order by date 'finalized.'

The Primary Tab – Registration Form

Access to your primary application or registration is available on the Primary tab. If the 'Go To Application Form' link or the 'Go To Registration Form' link are not available, please contact restrkg@abpath.org.

All of the information on each page must be completed before it can be saved. Be sure to click the 'Save' button when you add or change data. Do not click the 'Finalize' button until the registration is complete and you are ready to fill in your credit card information.

ABP registrations require files to be uploaded. The files must be in PDF format. Many word processing products have the capability of saving PDF files. If your computer does not have a product that can save a document as a PDF file, there are free products available online (search for 'how to save pdf files'). You must complete the information, upload the PDF files on each page, and click "Save Form" on each page before proceeding to the next page.

Do not wait until the deadline to submit your registration. If you have any problems after business hours, your registration may not be finalized by the deadline. There will be no extension of the deadline.

Primary Registration Page 1

Page 1 displays the information from the My Profile tab. The information is not editable on this page. If the information is incorrect, please refer to the instructions for the My Profile tab.

Primary Registration Page 2

Select the examination you wish to take. The examination registration options for primary registration are determined by your board qualification. If you are qualified for the combined APCP examination, you may choose to take both anatomic pathology and clinical pathology, or choose the anatomic pathology portion or the clinical pathology portion. If taken at separate sittings, there is a separate examination registration fee for each sitting.

It is a **requirement** that you possess a currently valid, full and unrestricted license to practice medicine or osteopathy. If your license is currently valid but due to expire on or before September 1 for Spring exams or December 1 for Fall exams and you are declared qualified, you will be allowed to take the examination. However, evidence of possession of a current license will be required before results will be released.

Refer to 'Uploading/Updating Your Medical License on the My Profile Tab.' The information from the Medical License table will appear on your registration.

Primary Registration Page 3

Fill in how you would like to have your name inscribed on your certificate.

A candidate who is declared qualified for the combined examination in anatomic pathology and clinical pathology will receive a certificate only after both parts (anatomic pathology and clinical pathology) of the examination have been passed.

A candidate who is declared qualified for the combined examination in anatomic pathology or clinical pathology and a subspecialty area of pathology will receive a

certificate only after both parts (anatomic pathology or clinical pathology and the subspecialty area of pathology) of the examination have been passed.

A candidate who is declared qualified for the examination in anatomic pathology only or clinical pathology only will receive a certificate after passing the examination in anatomic pathology or in clinical pathology.

Select your title. Your choices are: MD, DO, or none.

If name listed above is different from the name on your application, you must send verification of legal name change and click the check box.

Primary Registration Page 4

Indicate your preference regarding the ABMS listing.

Finalize Your Registration

All registrations must be 'finalized' by midnight on the deadline date.

Click the 'Finalize' button if the registration is complete and you are ready to fill in your credit card information. The ABP accepts VISA, Mastercard, and American Express. Checks and money orders are NOT accepted. When the credit card information has been submitted, you will receive an e-mail receipt. Please print the receipt for your records. The e-mail receipt is automatic and the ABP does not have access to it. The e-mail receipt will come from emailreceipts@authorize.net. If you do not receive the e-mail receipt, please check your junk mail and spam folders.

After Your Registration has been Finalized

Print the registration for your records. Do NOT send a paper copy to the ABP office.

Please check your e-mail and log in to PATHway frequently.

Please include your full name and ABP ID in all correspondence.

Photo IDs are NOT required.

Your medical license will be acknowledged when your registration is reviewed. If your registration requires additional information, your Board Correspondence page will be updated and you will receive an e-mail. At that time you will be given a deadline to submit the required additional information to the Board office. ***Please do not call or e-mail the Board office regarding the status of your application.***

Registrations are processed in order by date 'finalized.'

The Subspecialty Tab – Application Form

Access to your subspecialty application or registration is available on the Subspecialty tab. If the 'Go To Application Form' link or the 'Go To Registration Form' link are not available, please contact restrkg@abpath.org.

All of the information on each page must be completed before it can be saved. Be sure to click the 'Save' button when you add or change data. Do not click the 'Finalize' button until the application is complete and you are ready to fill in your credit card information.

ABP applications require files to be uploaded. The files must be in PDF format. Many word processing products have the capability of saving PDF files. If your computer does not have a product that can save a document as a PDF file, there are free products available online (search for 'how to save pdf files'). You must complete the information, upload the PDF files on each page, and click "Save Form" on each page before proceeding to the next page.

Do not wait until the deadline to submit your application. If you have any problems after business hours, your application may not be finalized by the deadline. There will be no extension of the deadline.

Subspecialty Application Page 1

Page 1 displays the information from the My Profile tab. The information is not editable on this page. If the information is incorrect, please refer to the instructions for the My Profile tab.

Subspecialty Application Page 2

The options for certification are any of the subspecialty examinations offered this year. Selection of your certification determines which options are available on subsequent pages of the application. For example, the requirements for combined Neuropathology are different from the requirements for Hematology, so some of the options will be different. If you change your mind about your certification after you begin the application, you will have to start over on Page 2.

Click in the checkbox at the bottom of the page to indicate 'I agree to be legally bound by the foregoing.'

Subspecialty Application Page 3

Indicate the date of your ABP certification. If you are not yet certified, click the checkbox for 'ABP Certification Pending' at the bottom of the table.

If you are not certified by the ABP, please complete the 'Other Primary American Medical Specialty Board' table, including the name of the specialty board, the type of certification, and the date.

If you are certified by The Royal College of Physicians and Surgeons of Canada, please indicate the date of your certification.

If you are not a diplomate of The American Board of Pathology, attach a copy of other Medical Specialty Board certificate(s) that you hold in PDF format.

Subspecialty Application Page 4

Medical Education. If a copy of your diploma indicating graduation from medical school is on file in the ABP office, another copy should not be attached. If not, attach a copy of your diploma indicating graduation from medical school in PDF format. If in a foreign language and from a country other than the United States or Canada, the diploma must be translated into English and a translation also enclosed. For graduates of United States or Canadian medical schools, this requirement may be met by a letter from the Dean's Office of your medical school certifying that you graduated from medical school.

Subspecialty (Sub) Training. List the full-time training as a registered trainee in a training program accredited by the ACGME that pertains to sub area for which you are seeking certification.

Medical Licensure. It is a **requirement** that you possess a currently valid, full and unrestricted license to practice medicine or osteopathy. If your license is currently valid but due to expire on or before December 1 and you are declared qualified, you will be allowed to take the examination. However, evidence of possession of a current license will be required before results will be released.

Refer to 'Uploading/Updating Your Medical License on the My Profile Tab.' The information from the Medical License table will appear on your application.

Subspecialty Application Page 5

Please indicate whether or not you have had any adverse actions.

Subspecialty Application Page 6

Select the examination you wish to take.

Subspecialty Application Page 7

Fill in how you would like to have your name inscribed on your certificate.

A candidate who is declared qualified for the combined examination in anatomic pathology and clinical pathology will receive a certificate only after both parts (anatomic pathology and clinical pathology) of the examination have been passed.

A candidate who is declared qualified for the combined examination in anatomic pathology or clinical pathology and a subspecialty area of pathology will receive a certificate only after both parts (anatomic pathology or clinical pathology and the subspecialty area of pathology) of the examination have been passed.

A candidate who is declared qualified for the examination in anatomic pathology only or clinical pathology only will receive a certificate after passing the examination in anatomic pathology or in clinical pathology.

Select your title. Your choices are: MD, DO, or none.

If name listed above is different from the name on your application, you must send verification of legal name change and click the check box.

Indicate your preference regarding the ABMS listing.

Finalize Your Application

All applications must be 'finalized' by midnight on the deadline date.

Click the 'Finalize' button if the application is complete and you are ready to fill in your credit card information. The ABP accepts VISA, Mastercard, and American Express. Checks and money orders are NOT accepted. When the credit card information has been submitted, you will receive an e-mail receipt. Please print the receipt for your records. The e-mail receipt is automatic and the ABP does not have access to it. The e-mail receipt will come from emailreceipts@authorize.net. If you do not receive the e-mail receipt, please check your junk mail and spam folders.

After Your Application has been Finalized

Print the application for your records. Do NOT send a paper copy to the ABP office. Please check your e-mail and log in to PATHway frequently.

Please include your full name and ABP ID in all correspondence.

Photo IDs are NOT required.

The automated process sends an e-mail to your Fellowship Program Director that your evaluation form is available. When a resident lists more than one program, any other Fellowship Program Directors listed will complete the secondary evaluation. Program Directors will have one week after the application deadline to complete their reviews and evaluations. Your application is not considered complete and will not be reviewed until the required documentation by the Program Director is completed. If your Program Director needs to be reminded, please do so.

Your medical license and other documentation will be acknowledged during application review. When your application is processed, the boxes will be checked. If your application requires additional information, your Board Correspondence page will be updated and you will receive an e-mail. At that time you will be given a deadline to submit the required additional information to the Board office. ***Please do not call or e-mail the Board office regarding the status of your application.***

Applications are processed in order by date 'finalized.'

Date assignments will be posted to your Board Correspondence tab around July 15.

Molecular Genetic Pathology Logbook

We must receive a copy of your logbook before your application for Molecular Genetic Pathology is reviewed. Please do not fax or e-mail the logbook, you must print the logbook and mail it to the Board office.

The Molecular Genetic Pathology Logbook is available on the ABP Web site: www.abpath.org. Click 'Examination Announcements and Information Links,' then click 'Applications and Forms,'

then click 'Molecular Genetic Pathology Logbook.' Please do not mail your completed logbook to the ABP until you have finalized your online application.

The Subspecialty Tab – Registration Form

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ABP registrations require files to be uploaded. The files must be in PDF format. Many word processing products have the capability of saving PDF files. If your computer does not have a product that can save a document as a PDF file, there are free products available online (search for 'how to save pdf files'). You must complete the information, upload the PDF files on each page, and click "Save Form" on each page before proceeding to the next page.

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Subspecialty Registration Page 1

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Subspecialty Registration Page 2

Select the examination you wish to take.

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Subspecialty Registration Page 3

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A candidate who is declared qualified for the examination in anatomic pathology only or clinical pathology only will receive a certificate after passing the examination in anatomic pathology or in clinical pathology.

Select your title. Your choices are: MD, DO, or none.

If name listed above is different from the name on your application, you must send verification of legal name change and click the check box.

Subspecialty Registration Page 4

Indicate your preference regarding the ABMS listing.

Finalize Your Registration

All registrations must be 'finalized' by midnight on the deadline date.

Click the 'Finalize' button if the registration is complete and you are ready to fill in your credit card information. The ABP accepts VISA, Mastercard, and American Express. Checks and money orders are NOT accepted. When the credit card information has been submitted, you will receive an e-mail receipt. Please print the receipt for your records. The e-mail receipt is automatic and the ABP does not have access to it. The e-mail receipt will come from emailreceipts@authorize.net. If you do not receive the e-mail receipt, please check your junk mail and spam folders.

After Your Registration has been Finalized

Print the registration for your records. Do NOT send a paper copy to the ABP office.

Please check your e-mail and log in to PATHway frequently.

Please include your full name and ABP ID in all correspondence.

Photo IDs are NOT required.

Your medical license will be acknowledged when your registration is reviewed. If your registration requires additional information, your Board Correspondence page will be updated and you will receive an e-mail. At that time you will be given a deadline to submit the required additional information to the Board office. ***Please do not call or e-mail the Board office regarding the status of your application.***

Date assignments will be posted to your Board Correspondence tab around July 15.

The MOC Tab

Please refer to 'Instructions for PATHway to Maintenance of Certification (MOC),' available on the ABP Web site.



Uploading Your Medical License on the My Profile Tab

It is a **requirement** that you possess a currently valid, full and unrestricted license to practice medicine or osteopathy. All valid medical licenses uploaded in the Medical Licensure table on the My Profile tab will automatically appear on a primary or subspecialty application/registration.

The system will notify the ABP staff that you have updated your medical license if you have a current examination application or registration pending. When the ABP staff has reviewed the medical license added to the Medical Licensure table, the Medical License approved box will be checked on the Board Correspondence tab.

Indicate the State/Province, License Number, Expiration Date, and Restricted status of your medical license in the Medical Licensure table. Please attach a copy of your medical license in PDF format. The copy must include the expiration date. If your wallet medical license does not include the expiration date, you may attach the information from the state's web site. To attach the PDF file, click 'Browse' in the Upload medical license field, select your file, then click 'Upload.' The file will appear as the 'Medical license document on File.' Click 'Save Record' to finish. The Medical License record will not be saved until the PDF is attached.


Medical Licensure:

State	Number	Expiration	Restricted	Action
AK	12345	12/31/2011	No	 

For existing records click the pencil icon to edit, and the trash can icon to delete.

The applicant must hold a currently valid, full, and unrestricted license to practice medicine or osteopathy. Please upload a copy of your medical license.

State/Province License Number



Expiration Date (mm/dd/yyyy) Restricted

Clicking the calendar icon allows you to select a date. You can click the "Today" link to pick the current date, or click on any other day of the month. Use the arrow to the left and right of the month/year displayed to scroll through previous and future months. When the month/year link is clicked, use the left and right arrows to scroll through previous and future years.

Upload medical license:
You must click [Upload] to save!
Document must be PDF format and less than 4MB in size.

To delete a record, click the 'Delete' icon (Trash Can) beside the record you wish to delete.