



# GEORGIA COMPOSITE MEDICAL BOARD

LICENSE | REGULATE | EDUCATE

## Orthotics & Prosthetics Application Checklist

### Eligibility Requirements

\_\_\_ **Education Requirement** – Must have completed an accredited Orthotics & Prosthetics program that meets or exceeds the CAAHEP expectations.

\_\_\_ **Residency/Experience** –

- Bachelor's Degree Holders: Must complete an NCOPE-accredited clinical residency.
- Associate Degree Holders: Must have five years of supervised work experience.

\_\_\_ **National Certification** – Must pass the ABC Certification Exam (American Board for Certification in Orthotics, Prosthetics & Pedorthics).

\_\_\_ **Good Moral Character** – No disciplinary actions or malpractice history.

### Application Forms & Fees

\_\_\_ **Complete Application Form** – Available at <https://medicalboard.georgia.gov/professionals/applications-center/orthotist-and-prosthetist>

\_\_\_ **Application Fee** – \$400 for dual certification (Orthotist and Prosthetist), \$300 for permanent license, Non-refundable, payable via the online portal.

\_\_\_ **Notarized Affidavit of Applicant (FORM A)** – Must include a passport-sized photo.

\_\_\_ **References (FORM B)** – 4 references:

- 2 current or former patients from each discipline
- 2 from referral sources (i.e. physicians, physical therapists, case managers, etc.)

\_\_\_ **State License Verification (FORM C)** – If licensed in another state, submit official verification from each licensing authority.

\_\_\_ **National Certification (FORM D)** – Proof of passing the ABC certification exam (must contain original seals).

\_\_\_ **Citizenship Affidavit** – Must be notarized and include proof of citizenship/legal status.

\_\_\_ **Criminal Background Check & Fingerprinting** – Required for all applicants.

\_\_\_ **CV/Resume** – Please provide justification for any date gaps.

\_\_\_ **Verifiable Document** – Valid Driver's License, Passport, State-Issued Identification Card.

\_\_\_ **Official Transcripts** – Sent directly from the accredited institution.

\_\_\_ **Clinical Residency Verification** – For bachelor's degree holders, proof of NCOPE-accredited residency.

\_\_\_ **Work Experience Verification** – For associate degree holders, proof of five years under a certified professional.

\_\_\_ **Employment Verification** – If currently employed, submit verification of job duties.

\_\_\_ **Malpractice History (if applicable)** – Must disclose and submit relevant documentation.

### Renewals, Continuing Education, Rules & Laws

\_\_\_ **Renewal Cycle** – Licenses must be renewed biennially (every two years).

\_\_\_ **Continuing Education (CE) Requirements** – Must meet CE requirements as set by the Board.

\_\_\_ **Renewal Fee** – Dual: \$230 (\$455 if late), \$400 for lapsed/revoked licenses, \$355 for inactive licenses.  
**Orthotist** – \$105 (\$205 if late), \$300 for lapsed/revoked licenses, \$105 for inactive licenses.

\_\_\_ **Continuing Education** – Thirty (30) hours during the two years preceding the license renewal.

\_\_\_ **Board Rules** – <https://rules.sos.ga.gov/gac/360-31>

\_\_\_ **Georgia Code** – <https://law.justia.com/codes/georgia/title-43/chapter-34/article-8/>