

ILADS/TTCF Training Application

Date of application: _____ Date of approval (office use only) _____

Name and Office Address: (please print): _____

Degrees/Certifications: _____

Office Phone: _____ Cell Phone: _____

e-mail: _____ Indicate the best way to contact you: _____

Current area(s) of expertise: _____

Include a copy of your current *medical license and CV* or resume _____

I certify that I intend to integrate the diagnosis and treatment of Lyme disease in to my practice. Signature: _____

You may fax the application back to 301 263 0776, the ILADS office. Questions may be directed to lymedocs@aol.com

The applicant will hear back from the program administrator after his/her application is approved. It typically is within a week of submitting a completed application. When you are approved, you will receive a list of training physicians. We are happy to help you analyze who is the best fit for your medical practice. From time of approval you will have one month to make an appointment for training. You must book travel and hotel arrangements on your own. Training must be done in the same calendar year or within six months of approval. All reimbursement is after the fact. Summary of your training, tax ID or SS #, mailing address for reimbursement must be submitted for reimbursement within one month of training. If not submitted within three months, reimbursement is forfeited and the funding opportunity is given to someone else.

Medical professionals who have the ability to write scripts may take two weeks of consecutive training. However, the training is typically done one week at a time to allow the trainee to absorb the information. The training physician must obtain permission from the program administrator for the second week after a gap to absorb the first week's training.

Reimbursement policy: Doctors can expect to receive up to a \$1500 total reimbursement for the two weeks. Non prescribing medical professionals may receive up to \$1500 in reimbursement. Summary report should be faxed to 301 263 0776 or sent to ILADS PO Box 341461 Bethesda, MD 20827, Attn: Barbara Buchman, Executive Director. Or e-mail to lymedocs@aol.com