



International Board of Oral Implantology (IBOI)

Part II Oral Examination

Registration Form

Personal Details:

Full Name:			
Occupation:			
Gender	Male	Female	
Nationality			
Street Address:			
City:	Postal Code:	Country:	
Phone Number:		Email:	
<small>Country code</small>	<small>Phone No.</small>		
How did you hear about us?			

Requirements:

50 Documented Cases is required for the General Practitioner and 25 Documented Cases for the Specialist, each case will get 10 points if performed under supervision. The Applicant performs an implantation surgery in one of his or her patients under the supervision of an IBOI board of directors and send it back to iboil@drtamimi.com to be evaluated by IBOI Board of Directors.

It is important to fill the table before fill the Case Documentation Template

You will be required to submit only TEN (10) cases that should be Fully Documented in (IBOI Case Submission Form click here to download) in all.

The 10 Cases should cover the following:

1. Anterior Single-tooth replacementPosterior
2. Single-tooth replacement
3. Dental Implant with Bone Augmentation
4. Free-end "saddle" edentulous (Maxilla)
5. Free-end "saddle" edentulous (Mandible)
6. Bounded Mandible or Maxilla
7. Fully edentulous Maxilla
8. Fully edentulous Mandible
9. All-on-4
10. Sinus lifting

Step 1: Cases Documentation Table

Step 2: Cases Documentation Template

Notes:

- The Total Fees of Part 2 Oral Examination is US\$750.
- You need to pay US\$50 as an evaluation fee for your submitted cases..
- You will receive a confirmation letter once your cases get approved.
- The evaluation fees will be deducted from the total fees of Part 2 Oral Examination.
- In case of rejection of your application, the evaluation fees are non-refundable
- All the submitted cases and lists will be evaluated by IBOI Board of Directors.
- In case of rejection of your application, a full refund will be done to the original form of payment minus any transaction fees.

I certify that I have read and understand the above and that the information given on this form is accurate.

Full Name

Signature

Date