



ARDMS®
The globally-recognized
standard of excellence
in sonography

ARDMS APPLICATION SUBMISSION CHECKLIST

This document is for first-time applicants only. Please make sure each document under the prerequisite or requirement selected is included with your application. Incomplete applications will be returned less the processing fee per examination.

SPI EXAMINATION REQUIREMENT:

- A transcript (see transcript requirements below) reflecting successful completion of a graded general, medical or sonographic college, post-secondary or higher education physics class (with a grade of C or above);
OR
- A CME certificate denoting successful completion of a general, medical or sonographic physics seminar, physics review course, or physics correspondence course, denoting a minimum award of 12 ARDMS-accepted CME credits. The certificate must meet ARDMS CME documentation requirements (visit ARDMS.org/CME to view ARDMS-accepted CMEs). The CME credits must be earned within two (2) years prior to application submission. AND
- Photocopy of a non-expired government issued photo identification with signature; the name on the identification must exactly match the name under which you are applying for ARDMS examination.

PREREQUISITE 1:

- Official transcript from two-year allied health education program as noted in the "Education" requirement of this prerequisite. Must state specific number of credits and indicate quarter or semester based system. AND
- Copy of education program certificate, credential or license. AND
- Original letter from supervising physician, sonographer/technologist or educational program director indicating a minimum of 12 months of full-time clinical/vascular experience including exact dates of ultrasound experience/ successful completion of sonography program. For sample letters, visit ARDMS.org/sampleletters. AND
- Original signed and completed clinical verification (CV) form for each appropriate specialty area(s). CV forms are available at ARDMS.org/cv. AND
- Photocopy of a non-expired government issued photo identification with signature; the name on the identification must exactly match the name under which you are applying for ARDMS examination.

PREREQUISITE 2:

- Copy of diploma from ultrasound/vascular program or an official transcript indicating the date the degree was conferred. AND
- Original letter signed by program director and/or medical director indicating date of graduation or successful completion of the program. Program directors must use the mandatory formatted sample letter, available on ARDMS.org/sampleletters. AND
- The CV form is not required if the application is submitted and received in the ARDMS office within one year after successful completion of the program. Otherwise an original signed and completed CV form for each appropriate specialty area(s) must be submitted. CV forms are available at ARDMS.org/cv. AND
- Photocopy of a non-expired government issued photo identification with signature; the name on the identification must exactly match the name under which you are applying for ARDMS examination.

PREREQUISITE 3A:

- Copy of Bachelor's degree or an official transcript earned in the U.S. or Canada or an original foreign transcript evaluation indicating that the degree is equivalent to a Bachelor's degree in the U.S. or Canada. AND
- Original letter from supervising physician, sonographer/technologist or educational program director indicating a minimum of 12 months of full-time clinical/vascular experience including exact dates of ultrasound experience/ successful completion of sonography program. For sample letters, visit ARDMS.org/sampleletters. AND
- Original signed and completed clinical verification (CV) form for each appropriate specialty area(s). CV forms are available at ARDMS.org/cv. AND
- Photocopy of a non-expired government issued photo identification with signature; the name on the identification must exactly match the name under which you are applying for ARDMS examination.

PREREQUISITE 3B:

- Copy of Bachelor's degree or an official transcript earned in the U.S. or Canada or an original foreign transcript evaluation indicating that the degree is equivalent to a Bachelor's degree in the U.S. or Canada. AND
- Original letter signed by education program director verifying length of ultrasound or vascular experience. If program is not completed at the time of application, a letter signed by the program director stating graduation date and completion of appropriate clinical ultrasound experience is needed. Program directors must use the mandatory formatted sample letters, available on ARDMS.org/sampleletters. AND
- The clinical verification (CV) form is not required if the application is submitted and received in the ARDMS office within one year prior to successful completion of the program, provided that the applicant has completed 12 months of full-time clinical experience within the program at the time that the application is submitted. Otherwise, an original signed and completed CV form for each appropriate specialty area(s) must be submitted. CV forms are available at ARDMS.org/cv. AND
- Photocopy of a non-expired government issued photo identification with signature; the name on the identification must exactly match the name under which you are applying for ARDMS examination.

PREREQUISITE 4A1:

- Copy of medical school diploma. AND
- Original letter from residency/fellowship program director verifying dates of attendance and completion of a minimum of 800 studies in the area in which you are applying. AND
- Original signed and completed clinical verification (CV) form for each appropriate specialty area(s). CV forms may be found at: ARDMS.org/cv. AND
- Applicants should maintain a patient log or other record of the 800 studies. This log does not need to be submitted with the application but may be requested as part of a random audit. This documentation should be maintained by the application for at least three (3) years following the date of application for examination. AND
- Photocopy of a non-expired government issued photo identification with signature; the name on the identification must exactly match the name under which you are applying for ARDMS examination.



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PREREQUISITE 4A2:

- Copy of medical school diploma. AND
- Original letter from supervising physician, sonographer/technologist or educational program director indicating a minimum of 12 months of full-time clinical/vascular experience including exact dates of ultrasound experience/successful completion of sonography program (visit ARDMS.org/sampleletters for examples). If you are the supervising physician, you may write your own letter. AND
- Original signed and completed clinical verification (CV) form for each appropriate specialty area(s). CV forms may be found at: ARDMS.org/cv. AND
- Photocopy of a non-expired government issued photo identification with signature; the name on the identification must exactly match the name under which you are applying for ARDMS examination.

PREREQUISITE 4B1:

- Original credential report or official notarized copy of the evaluation converting the foreign medical degree must indicate that this medical degree is equivalent to a doctor of medicine degree in the U.S. or Canada. A listing of organizations that produce individualized, written reports describing each certificate, diploma or degree earned, and specifying its U.S. or Canadian equivalent can be found at ARDMS.org/ForeignTranscripts. If the applicant has taken and passed all three parts of and earned the Educational Commission for Foreign Medical Graduates (ECFMG®) certification, a copy of the ECFMG® certificate may be submitted with a copy of a current, valid MD or DO license from the U.S. or Canada in lieu of the evaluation. AND
- Original letter from residency/fellowship program director verifying dates of attendance and completion of a minimum of 800 studies in the area in which you are applying. AND
- Original signed and completed clinical verification (CV) form for each appropriate specialty area(s). CV forms may be found at: ARDMS.org/cv. AND
- Applicants should maintain a patient log or other record of the 800 studies. This log does not need to be submitted with the application but may be requested as part of a random audit. This documentation should be maintained by the application for at least three (3) years following the date of application for examination. AND
- Photocopy of a non-expired government issued photo identification with signature; the name on the identification must exactly match the name under which you are applying for ARDMS examination.

PREREQUISITE 4B2:

- Original credential report or official notarized copy of the evaluation converting the foreign medical degree must indicate that this medical degree is equivalent to a doctor of medicine degree in the U.S. or Canada. A listing of organizations that produce individualized, written reports describing each certificate, diploma or degree earned, and specifying its U.S. or Canadian equivalent can be found at ARDMS.org/ForeignTranscripts. If the applicant has taken and passed all three parts of and earned the Educational Commission for Foreign Medical Graduates (ECFMG®) certification, a copy of the ECFMG® certificate may be submitted with a copy of a current, valid MD or DO license from the U.S. or Canada in lieu of the evaluation. AND
- Original letter from supervising physician, sonographer/technologist or educational program director indicating a minimum of 12 months of full-time clinical/vascular experience including exact dates of ultrasound experience/successful completion of sonography program (visit ARDMS.org/sampleletters for examples). If you are the supervising physician, you may write your own letter. AND
- Original signed and completed clinical verification (CV) form for each appropriate specialty area(s). AND
- Photocopy of a non-expired government issued photo identification with signature; the name on the identification must exactly match the name under which you are applying for ARDMS examination.

PREREQUISITE 5:

- Copy of Active certification identification card or copy of license. AND
- Original signed and completed CV form for each appropriate specialty area(s). CV forms are available at ARDMS.org/cv. AND
- Photocopy of a non-expired government issued photo identification with signature; the name on the identification must exactly match the name under which you are applying for ARDMS examination.

PREREQUISITE 6:

- Copy of current, valid medical license. AND
- Original signed and completed Clinical Verification (CV) form for each appropriate specialty area(s). CV forms are available at ARDMS.org/cv. AND
- Photocopy of a non-expired government issued photo identification with signature; the name on the identification must exactly match the name under which you are applying for ARDMS examination.

PREREQUISITE 7:

- Copy of high school diploma or U.S. or Canadian equivalent of foreign high school graduate. (For individuals whose high school diploma/equivalent was earned outside of the U.S. or Canada, an original credential report or official notarized copy of the evaluation is required. A listing of organizations that produce individualized, written reports describing each certificate, diploma or degree earned, and specifying its U.S. or Canadian equivalent, can be found at ARDMS.org/ForeignTranscripts.) AND
- Original Physician's Statement Experience letter(s) from reporting physician(s) indicating a minimum of 48 months of full-time clinical/vascular experience and including exact dates of ultrasound experience in each applied for specialty area. The Physician's Statement Experience letter(s) may be found on ARDMS.org/sampleletters. AND
- Original Sonographer's Statement letter from an ARDMS Registered Sonographer verifying the applicant has performed independently and effectively under their supervision a minimum of 3,200 cases in each applied for specialty area. The Sonographer's Statement letter may be found on ARDMS.org/sampleletters.
- Original signed and completed Clinical Verification (CV) form for each appropriate specialty area(s). CV forms may be found at ARDMS.org/cv. AND
- Thirty ARDMS accepted CMEs that are ultrasound related in the specific applied for specialty area earned within three years prior to the date of application for examination. AND
- Applicants should maintain a patient log or other record of the 3,200 cases for each applied for specialty area. This log does not need to be submitted with the application but may be requested as part of a random audit. This documentation should be maintained by the applicant for at least three (3) years following the date of examination. AND
- Photocopy of a non-expired government issued photo identification with signature; the name on the identification must exactly match the name under which you are applying for ARDMS examination.