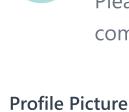


# **Complete Your Doctor Profile** Thank you for joining DocLine. Please

provide your professional details to complete your registration and start accepting appointments.



# complete your registration

**Professional** 

**Information** 

Upload a professional photo of yourself (JPG, PNG)

Please fill out all required fields to



Upload a photo

JPG or PNG up to 5MB

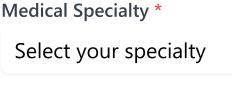
Upload a scanned copy of your medical license (PDF, JPG,

PNG)

City \*

Medical License Document \*

Upload a file PDF, JPG or PNG up to 10MB



Office Address \*

**Education & Qualifications \*** 

Select your city

(2015-2018)

Years of Experience \*

Example: MD from Harvard Medical School (2015), Residency at Johns Hopkins Hospital

List your degrees, universities, and years of graduation

Consultation Fees (\$) \* \$ **USD** 

> Provide accurate and detailed professional information

You can update your profile information

at any time from your dashboard

**Complete Registration** 

#### business days. Make sure your medical license is valid and current

**Important Information** 

Your profile will be reviewed by our team for verification before it becomes visible to

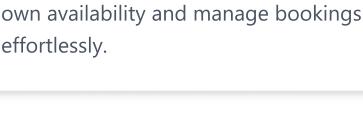
patients. This process typically takes 1-2

(i)

WHY JOIN DOCLINE

**Benefits of Being a** 

**DocLine Doctor** 



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Take control of your schedule with our

easy-to-use appointment system. Set your

## Connect with thousands of patients looking for quality healthcare services. Grow your

practice through our trusted platform.

**Expand Your Patient Base** 

Our HIPAA-compliant platform ensures that all patient data and communications are protected with the highest security standards.



**PLATFORM** 

Pricing

### Making healthcare accessible and convenient for everyone.

**DocLine** 

**Secure Platform** 

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**SUPPORT** 

Privacy

Terms of Service

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