

**BAHAMAS MEDICAL COUNCIL  
P.O. Box N-9802  
Nassau, Bahamas**



Telephone: (242) 323-0342  
Fax: (242) 323-0344  
E-mail: [info@bahamasmedicalcouncil.org](mailto:info@bahamasmedicalcouncil.org)  
Website: [www.bahamasmedicalcouncil.org](http://www.bahamasmedicalcouncil.org)

#37 Collins Avenue  
P.O. Box N-9802  
Nassau, Bahamas

1<sup>st</sup> November, 2024

To: ALL PHYSICIANS

**Re: Annual License Renewal**

You are reminded that your license to practice medicine in the Commonwealth of The Bahamas **expires on December 31, 2024.**

Applications for renewal of licensure are to be made via The Bahamas Medical Council's Application Website. (see below)

Work Permit holders are required to complete information in the link from the Department of Immigration. <https://www.immigration.gov.bs/residence/work-permit-renewal/> Please note that this information is for the Bahamas Department of Immigration.

You are required to submit your BMC/ACCME credits into CE Broker. Licensees renewing for the first time are required to create an account of your choice: a free Basic Account, a Professional Account or a Concierge Account at [www.CEBroker.com](http://www.CEBroker.com). You must register using your Bahamas Medical Council's license number. If you have an account with CE Broker, log into your account and upload your Continuing Medical Education credits for the period January 1, 2024 through December 31, 2024.

General Practice Physicians are required to submit certified copies of **20 hours of Continuing Medical Education** accredited for **BMC/ACCME credits** and Specialists are required to complete 10 of the 20 accredited CME credits within the area of their specialty in accordance with the **Medical Regulations, 2014**. All CME credits must be entered into CE Broker **before December 31, 2024**.

**Only CME credits approved by the ACCME/BMC or equivalent will be accepted by The Bahamas Medical Council.**

The Bahamas Medical Council accepts cheques, money orders and bank transfers as forms of payment. Payments made via bank transfer by a third party or joint account holder should indicate both the account holder's name and the name of the Physician. (see below)

Please be advised that after January 31, 2025 late fees of \$200.00 will apply.

To access the online application:

1. Follow the link <https://bahamasmedicalcouncil.com/bmc/>
2. Click Login at the upper right of the page.
3. Select Login Application
4. Follow the steps.
5. Enter your email address and password.

**Payment Options:**

**Online/Mobile Bank Transfers** – Include your name and BMC Registration # in the Memo.

If you are submitting payment on behalf of a physician, indicate the name of the physician you are submitting the payment for in the memo. In addition, submit the information that you are paying on behalf of a physician to the office of the Council at [info@bahamasmedicalcouncil.org](mailto:info@bahamasmedicalcouncil.org).

**Bank Name:** Scotia Bank Checking Account

**Branch:** Main Branch 70045

**Account Holder Name:** Bahamas Medical Council

**Account Number:** 000006017

**For Wire Transfers, please see attached.**

Sincerely,



**Dr. Merceline Dahl-Regis**

**Registrar**

MDR/gk

SCOTIABANK (BAHAMAS) LTD.  
NASSAU, THE BAHAMAS

WIRING INSTRUCTIONS

• USD CURRENCY ONLY:-

SWIFT: CHASUS33  
JPMORGAN CHASE BANK  
ABA: 021000021  
F/O SCOTIABANK BAHAMAS LTD.  
NASSUA, BAHAMAS  
SWIFT: NOSCBSNS  
FOR ACCOUNT OF-  
BENEFICIARY NAME-  
BENEFICIARY ACCOUNT#

• CAD/OTHER/USD (special items)

THE BANK OF NOVA SCOTIA  
INTERNATIONAL BANKING DIVISION (IBD)  
TRANSIT #52712  
SWIFT: NOSCCATT  
F/O SCOTIABANK BAHAMAS LTD.  
NASSAU, BAHAMAS  
SWIFT: NOSCBSNS  
FOR ACCOUNT OF-  
BENEFICIARY NAME-  
BENEFICIARY ACCOUNT#

• GBP CURRENCY ONLY :-

HSBC BANK  
LONDON  
SWIFT: MIDLGB22  
F/O SCOTIABANK BAHAMAS LTD  
NASSAU, BAHAMAS  
IBAN-GB71MIDL40051537607156  
FOR ACCOUNT OF-  
BENEFICIARY NAME-  
BENEFICIARY ACCOUNT#

Euro Currency Only:-

STANDARD CHARTERED BANK  
FRANKFURT, GERMANY  
SWIFT: SCBLDEFX

FOR FURTHER CREDIT TO:  
A/C#: DE67512305000050014704  
SCOTIABANK BAHAMAS LIMITED  
NASSAU, BAHAMAS  
SWIFT: NOSCBSNS

FOR ACCOUNT OF:  
BENEFICIARY NAME:  
BENEFICIARY ACCOUNT #: