

99018008005001

Heruntergeladen am 18.06.2025

<https://fimportal.de/xzufi-services/S1000020010000012653/S100002>

Modul	Sachverhalt
Leistungsschlüssel	99018008005001
Leistungsbezeichnung I	
Leistungsbezeichnung II	Apply for permission to practice medicine in the field of psychotherapy
Typisierung	2/3 - Bund: Regelung (2 oder 3), Land/Kommune: Vollzug
Quellredaktion	Hamburg
Freigabestatus Katalog	unbestimmter Freigabestatus
Freigabestatus Bibliothek	unbestimmter Freigabestatus
Begriffe im Kontext	<div lang="en-x-mtfrom-de">State examination office for health professions, alternative practitioner psychotherapy</div> , <div lang="en-x-mtfrom-de">State examination office, alternative practitioner psychotherapy</div> , <div lang="en-x-mtfrom-de">License to practice psychotherapy</div> , <div lang="en-x-mtfrom-de">Psychotherapy professional permits</div> , <div lang="en-x-mtfrom-de">Psychological psychotherapists, exams</div> , <div lang="en-x-mtfrom-de">Child and adolescent psychotherapists, granting license to practice medicine</div>

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	and professional qualifications</div>, <div lang="en-x-mtfrom-de">Psychological psychotherapists, issuing approvals and professional permits</div>, <div lang="en-x-mtfrom-de">Small alternative practitioner license</div>, <div lang="en-x-mtfrom-de">Alternative practitioner, psychotherapy</div>
Leistungstyp	
Leistungsgruppierung	
Verrichtungskennung	
SDG-Informationsbereich	
Lagen Portalverbund	
Einheitlicher Ansprechpartner	Nein
Fachlich freigegeben am	21.08.2024
Fachlich freigegeben durch	
Handlungsgrundlage	
Teaser	
Volltext	
Erforderliche Unterlagen	• online application, • medical certificate, • ID card or passport, • a CV in tabular form, • if applicable, a registration certificate (if the identification document is not an identity card), • a statement from the Federal Central Register (document type 0), • proof of successful school completion
Voraussetzungen	You need to • be at least 25 years old, • have at least a secondary school certificate or another equivalent school qualification, • physical and mental suitability to practice medicine and the

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	• be able to prove the required reliability by means of an official certificate of good conduct.
Kosten	
Verfahrensablauf	• You submit the application to practice medicine, including all necessary documents, to the responsible authority. • Written and oral examination participation • The competent authority checks whether all requirements are met • If the verification is successful, you will be granted permission.
Bearbeitungsdauer	
Frist	
weiterführende Informationen	https://www.hamburg.de/politik-und-verwaltung/behoerden/sozialbehoerde/einrichtungen/lpa/heilpraktiker-31358 https://www.hamburg.de/bgv/startseite-heilpraktikerngelegenheiten/
Hinweise	• Applications can only be submitted online • In Hamburg, no allocation based on the file is possible • Medical certificate and certificate of good conduct must only be applied for when we request it • Fees are always charged for any adjustment.
Rechtsbehelf	
Kurztext	
Ansprechpunkt	
Zuständige Stelle	Authority for Labor, Health, Social Affairs, Family and Integration
Formulare	
Ursprungsportal	Hamburg Service, Hamburg Service (Currently this link is only available in german)