SAMPLE PRESS RELEASE

**FOR IMMEDIATE RELEASE**

**Contact:** Your Name
Your Title
Your Phone Number
Your Email Address

**XX Granted the Hospice Medical Director Certified® (HMDC®) Credential**

*City, State* - *Month Year* – YOUR NAME, HMDC, TITLE at the ORGANIZATION NAME, was recently granted the Hospice Medical Director Certified credential by the Hospice Medical Director Certification Board. Dr. LAST NAME was recognized for their commitment to improving the quality of life by displaying professional competency in the hospice industry.

Hospice practice includes patient care, medication management, performance improvement, engagement in interdisciplinary group (IDG) activities, and much more. Professional certification affirms a knowledge and experience base for hospice physicians to display commitment to their career, dedication to patient and family care, and the sustainability of the hospice organization and industry. HMDC designation is granted for six years and is renewed through continued validation of knowledge and re-assessment.

Dr. YOUR NAME is [add information about training, past experience, affiliations, and interests here].

The Hospice Medical Director Certification Board (HMDCB) serves as an independent, not-for-profit certifying body to administer a certification program for hospice medical directors and other physicians who provide hospice care for patients. The mission of HMDCB is to relieve suffering and improve quality of life by promoting the excellence and professional competency of hospice medical directors. For more information, visit [www.hmdcb.org](http://www.hmdcb.org).

Information about the Hospice Medical Director Certification Board including a directory of certified hospice physicians is available at www.HMDCB.org.

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