

The most frequently asked question of the HSF is, "Where can I find a doctor to treat this condition?" The HSF Physician Action Network is designed to meet one of the primary goals of our organization: to improve the quality of life and quality of care for those with Hidradenitis Suppurativa (HS). If you are a dermatologist, surgeon or other medical professional experienced in treating hidradenitis suppurativa, you should be listed in the HSF International Physician Action Network.

Other health and social service professionals helping patients locate appropriate care will also find this resource invaluable.

Your free online listing will provide general information for patients, and completing this form should take just a few minutes. To create your free listing, please complete the information below and return to the HSF via mail or email. If you have any questions regarding your registration, please contact info@hs-foundation.org or call 858-901-4747.

Contact Information

Note: phone/fax and email addresses will not be published in the directory unless specified under "Medical Offices."

First/Middle/Last Name

M.D./Other

Phone/Fax

Email

I am a physician, researcher, nurse or other practitioner and my listing should not appear online. I only wish to participate in the Physician Action Network.

Your Specialty (Board Certifications or Eligibility)

- Dermatologist
- General/Family Practitioner
- Surgeon
- Other (please specify) _____

Are you currently licensed to practice medicine in the state/country where your offices are located?

Yes No (please explain)

Treatment Statistics

How many years have you been treating HS? _____

How many patients do you see per year with HS? _____

Please list school/training history that you have completed, any additional certifications or professional memberships that you have, and any related CME courses.

Treatments Offered

Please tell us which treatments you offer for Hidradenitis Suppurativa in your medical practice, including research and clinical trials. Please be as specific as possible.

Medical

Surgical

Other

(continued on reverse)

HSF Physician Action Network Registration Form (page 2)

Medical Offices (or attach business card)

Office #1

Medical Facility

Department

Address1

Address2

City/State/Zip

Country

Patient Phone

Patient Email

Facility Web Site

Office #2

Medical Facility

Department

Address1

Address2

City/State/Zip

Country

Patient Phone

Patient Email

Facility Web Site

Additional Information

Speaking Support

- I would like to speak at patient education meetings.
- I would like to speak at physician education meetings.
- I will speak about the HSF and HS at state/local society meetings.

Editorial Support

- I would like to write articles about HS for publication in the HSF News Brief (online newsletter).
- I would like to offer language translation services for HSF materials. Languages:

Opinion Panel

- I would like to provide opinions to the HSF on its products and services.

Patient Support

We want to support you in your ability to provide quality care for people with HS. Do you have unmet patient education needs? If yes, please describe:

Signature

By submitting this form to the HSF, you certify that the preceding information is accurate and true.

Signature / Date

Once we receive your registration form, we will notify you when your listing is online so you may check it for accuracy and completeness. Thank you for participating in this important global initiative.

The Hidradenitis Suppurativa Foundation gratefully acknowledges the Employees Community Fund of Boeing California for their generous support of this network directory. The HSF is solely responsible for its development and production.

www.hs-foundation.org

The Hidradenitis Suppurativa Foundation, Inc. (HSF) is a 501(c)(3) nonprofit public benefit corporation dedicated to improving the quality of life and quality of care for individuals and families affected by Hidradenitis Suppurativa.

Hidradenitis Suppurativa (HS) is an inflammatory skin disease that affects an estimated 1% of the population. The main features include painful nodular and boil-like lesions, scarring, sinus tracts and recurrent discharge. HS primarily occurs in inverse areas of the skin, e.g. axillae and groin. Past medical research details a disease in which the time taken to diagnose is measured in years, or is regularly misdiagnosed. These issues compound the high morbidity and disabling nature of a disease that often goes untreated. Therefore there is an urgent need for detailed medical and scientific investigations into the nature of HS.

The HSF was founded for the sole purpose of funding efforts to discover the molecular and cellular causes of Hidradenitis Suppurativa, to aid in the development and delivery of more effective therapy to patients with this common, debilitating, and eminently chronic disease.

This will be accomplished by fostering and encouraging worldwide collaboration through the following activities:

- Support and sustain an international and interdisciplinary family of scientists and physicians devoted to HS research and to developing more effective forms of diagnosis, therapy and prevention.
- Maintain a comprehensive and educational website for researchers, doctors, patients, and the friends and families of affected patients.
- Maintain a professionally organized virtual HS library/scientific database.
- Maintain a Physician Action Network to assist doctors, patients and their families find doctors experienced in treating HS.
- Host International HSF Symposia to forge new and productive international research.
- Offer grants and fellowships to encourage “the best and the brightest” to devote their energies and creativity to HS research.
- Provide International HS Research Awards to recognize young investigators and others for their outstanding achievements in Hidradenitis Suppurativa research.
- Support the development of a global HS Patient Registry.
- Encourage and support the establishment of global Clinical Centers of Excellence for HS.
- Actively raise the profile and understanding of HS through global media, educational campaigns, governments and industry.

These goals are achieved through the dedication and commitment of the voluntary members of the HSF Board of Directors and Medical & Scientific Advisory Board, and through essential private and public support. For more information about the HSF, please visit our website at www.hs-foundation.org

DETACH HERE AND MAIL WITH YOUR DONATION TO THE ADDRESS BELOW

THANK YOU FOR YOUR SUPPORT!

Please accept my gift of: \$ _____

I have enclosed a check payable to Hidradenitis Suppurativa Foundation.

Please add my name to the database to receive news from the HSF.

Name _____

Company _____

Address _____

City/State/Zip _____

Phone (B) _____ (H) _____

Email _____

To make a gift online, please visit: www.hs-foundation.org

I would like to make a PLEDGE of \$ _____ to be paid:

Monthly Quarterly Semi-Annually Annually

with payments to begin on (mo/day/year) _____ / _____ / _____

My first check is enclosed. Please Send Me Pledge Reminders.

Please contact me regarding:

Corporate Sponsorships

Employer Matching Gift Programs

Including the HSF in my Will or Living Trust

Other _____

The Hidradenitis Suppurativa Foundation, Inc. is a 501(c)(3) nonprofit public benefit corporation, Tax ID # 20-3246772. Your donations are tax deductible as allowed by law. All donors will receive an acknowledgement letter via email and/or mail.