

Fellow Eligibility Exception

gme-adm-0040

About This Policy

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Responsible University Administrator: Senior Associate Dean for GME

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Scope

This policy applies to all Indiana University School of Medicine (IUSM) ACGME-accredited fellowship programs. **Policy Statement**

Residents requesting entry into ACGME-accredited fellowship programs must have completed an ACGMEaccredited residency program, or in an RCPSC-accredited or CFPC- accredited residency program located in Canada. Fellowship programs must receive verification of each entering fellow's level of competency in the required field using ACGME or CanMEDS Milestones assessments from the core residency program.

All ACGME-accredited fellowship programs may accept an exceptionally qualified resident as defined per ACGME criteria (Reference 1). This resident must have (1) completed a non ACGME-accredited residency program in the core specialty, and (2) demonstrated clinical excellence, in comparison to peers, throughout training. Additional evidence of exceptional qualifications is required, which may include one of the following: (a) participation in additional clinical or research training in the specialty or subspecialty; (b) demonstrated scholarship in the specialty or subspecialty; (c) demonstrated leadership during or after residency training; (d) completion of an ACGME International-accredited residency program.

Reason For Policy

The purpose of this policy is to outline the process whereby an ACGME-accredited fellowship can offer a position to resident who has not completed a residency program accredited by either the ACGME, RCPSC, or the CFPC. **Procedure**

- A. Process for Exceptions for Eligibility to ACGME Fellowships Programs wishing to recruit an exceptionally qualified applicant must verify that the resident meets the following criteria to ensure academic, clinical, and communication abilities:
 - Assessment by the program director and fellowship selection committee of the applicant's suitability to enter the program, based on prior training and review of the summative evaluations of training in the core specialty;

- b. Satisfactory completion of the United States Medical Licensing Examination (USMLE) Steps 1, 2, and, if the applicant is eligible, 3;
- c. For an international graduate, verification of Educational Commission for Foreign Medical Graduates (ECFMG) certification.
- d. For an international graduate, the applicant must be interviewed by either the program director and/or selection committee. Interview must be conducted in person, via telephone, or video conference.
- e. In order to ensure familiarity with the US healthcare system, the applicant must have some clinical experience in the US or equivalent.

Programs must provide this data to their ACGME Review Committee, and the Review Committee must grant an exception before any offer can be made to the candidate. Further, review and approval of the applicant's exceptional qualifications by the GMEC Executive Committee is necessary before making an offer to the candidate.

B. Applicants accepted by this exception must complete fellowship Milestones evaluation (for the purposes of establishment of baseline performance by the Clinical Competency Committee), conducted by the receiving fellowship program within six weeks of matriculation.

This evaluation may be waived for an applicant who has completed an ACGME International-accredited residency based on the applicant's Milestones evaluation conducted at the conclusion of the residency program.

If the trainee does not meet the expected level of Milestones competency following entry into the fellowship program, the trainee must undergo a period of remediation, overseen by the Clinical Competency Committee and monitored by the GMEC or a subcommittee of the GMEC. This period of remediation must not count toward time in fellowship training.

Definitions

ACGME is the Accreditation Council for Graduate Medical Education.

RCPSC is the Royal College of Physicians and Surgeons of Canada.

CFPC is the College of Family Physicians Canada.

Implementation

The Designated Institutional Official (DIO) for Graduate Medical Education is responsible for implementation of this policy.

Oversight

Policy authority for this document resides with the Graduate Medical Education Committee. The DIO, along with the Graduate Medical Education Committee and the Special Review Subcommittee are responsible for oversight. This policy will be reviewed every three years or more often if deemed necessary. **History**

- 1. Policy gme-adm-0040 approved by GMEC and published on 11 January 2017.
- 2. Policy reviewed, updated, and approved by GMEC on 21 Feb 2018.
- 3. Policy updated for formatting 06 March 2018.
- 4. Policy updated for formatting 27 June 2018.