

The University of Texas Medical School at Houston

GME POLICY STATEMENT – Document Review for International Medical Graduates

Effective: September 1, 2014

Background and Purpose: The Centers for Medicare and Medicaid Services requires certain documents reside in a resident/fellow file. Further, the Texas Medical Board expects institutions to properly vet all incoming candidates for residency/fellowship positions. Accordingly, the following policy and process is set forth to ensure that all required documentation for International Medical Graduates (IMG's) is properly reviewed and provided to the Office of Graduate Medical Education (GME Office).

Policy: As part of the onboarding process for IMG's, each residency/fellowship program that accepts IMG's will ensure that the required paperwork and documentation has been reviewed and forwarded to the GME Office. A listing of required documents is attached to this policy.

1. Program Coordinators will be responsible for reviewing and accepting all certified/notarized GME-required documents from any prospective IMG candidate that is invited to an interview.
2. The Program Coordinators will provide each IMG that is invited for an interview with a copy of the IMG Resident/Fellow Checklist.
3. The Program Coordinator will review each document and indicate by placing a check mark on the IMG Document Check List that they have received a certified/notarized copy of each document. Program Coordinators will sign the Coordinator IMG Checklist page assuring that they have reviewed the certified/notarized copies that are being forwarded to the GME Office. **The GME Office will not accept documents that are mailed directly from the IMG to the GME Office.**
4. After the Match the Program Coordinator will submit all notarized and certified copies to the GME Office. A copy of these documents should also be retained in the resident file maintained by the Program.
5. Upon receipt of the certified/notarized copies, the GME Office will review the documents and certify to the Texas Medical Board that all documents have been inspected and meet the requirements set forth by the Board.
6. Without receipt of these documents the GME Office **will not** mail out a contract packet.
7. It is recommended that Programs retain documents on un-Matched candidates for three (3) years.

Document Requirements for International Medical School Graduates

The Texas Medical Board and the Centers for Medicare & Medicaid Services require that certain documents be reviewed and be present in your file should you be accepted into a residency/fellowship position. International Medical School Graduates (IMG's) who are candidates for UTMSH residency and fellowship positions must present **certified and notarized 8-1/2 inch by 11 inch photocopies**. In order to be processed for a residency or clinical fellowship position, these requirements must be met **BEFORE** a program can release an appointment agreement to you. Failure to provide these documents may cause a delay in your residency/fellowship start date. **The GME Office will not accept documents that are mailed directly from the IMG to the GME Office.**

Definitions

A **translation** is defined as one that a government official, official translation agency, or college or university official provides which is on the official letterhead of that official agency. The translator must certify that it is a true word-for-word translation into English to the best of his/her KNOWLEDGE that he/she is fluent in the language, and that he/she is qualified to translate original documents. The translator must sign his/her name and place their title under the signature. Translations by friends or family members are not acceptable.

A **certified photocopy** is a photocopy that has been compared to the original by a Notary who then notarizes it as a "True and Exact Copy of the Original Document." The notary must sign each page of the document.

Requirements

1. Medical School Diploma - Original language and translation
2. Medical School Transcripts and Mark Sheets for EACH medical school attended - Original language and translation - Must show courses and grades.
3. Medical School Dean's Letter - Original language and translation
4. ECFMG Certificate - Must be valid indefinitely
5. Name Change Documentation - If there is a change of name from that which is listed on the candidate's documents, a marriage certificate or other documentation of legal name change must be provided. Remember to supply a translation if the document is not in English.
6. Present photo identification and supply a photocopy. Acceptable forms of identification include a passport, resident alien card, or US Driver's License
7. German graduates will need to provide their four exam results with translations: Arztliche Vorprufung, Ersten Abschnitt Prufung, Zweiten Abschnitt Prufung & Arztliche Prufung.

Fifth Pathway Students

1. Fifth Pathway Certificate - Fifth Pathway applicants must submit a copy of his/her Fifth Pathway certificate showing the completion of the supervised clinical year.
2. Fifth Pathway Letter - Fifth Pathway applicants must have the director of his/her Fifth Pathway program submit a letter outlining the methods used to evaluate and admit the applicant to the program.

IMG RESIDENT AND FELLOW DOCUMENT REVIEW CHECKLIST
 (TO BE COMPLETED AND SUBMITTED BY PROGRAM COORDINATOR)

Candidate Name: _____

Proposed Specialty: _____ Start Date: ____/____/____

THESE DOCUMENTS MUST BE NOTARIZED AS CERTIFIED AND TRUE COPIES OF THE ORIGINAL DOCUMENTS. THE NOTARIZED COPIES MUST BE MAILED TO THE PROGRAM. THE GME OFFICE WILL NOT ACCEPT DOCUMENTS THAT ARE MAILED DIRECTLY FROM THE IMG TO THE GME OFFICE. A COPY IS TO BE KEPT IN THE PROGRAM FILE AND THE CERTIFIED TRUE ORIGINAL NOTARIZED COPIES ARE TO BE DELIVERED TO THE GME OFFICE. WITHOUT THESE DOCUMENTS YOUR APPLICANT WILL NOT RECEIVE A CONTRACT PACKET OR AN INVITATION TO APPLY FOR A PERMIT WITH THE TEXAS MEDICAL BOARD, AND, THEREFORE **WILL NOT START THE PROGRAM ON TIME.**

| | Documents | Notarized Copy of Original Submitted TO GME |
|-----|--|---|
| 1. | Medical School Diploma | |
| 2. | Diploma Translation (if in a foreign language) | |
| 3. | Medical School Transcript with grades | |
| 4. | Transcript Translation (if in a foreign language) | |
| 5. | Dean's Letter | |
| 6. | Dean's Letter Translation (if in a foreign language) | |
| 7. | Valid ECFMG Certificate | |
| 8. | Proof of Legal Name Change i.e. Marriage Certificate, Court Document | |
| 9. | Name Change Translation (if in a foreign language) | |
| 10. | Notarized Copy of Identification (Driver's License or Passport) | |

FIFTH PATHWAY HOLDERS ONLY

| | Fifth Pathway Additional Documents | Notarized Copy of Original Submitted TO GME |
|-----------|---|--|
| 1. | Fifth Pathway Certificate Applicants must submit a copy of his/her Fifth Pathway certificate. | |
| 2. | Fifth Pathway Letter Applicants must have the director of his/her Fifth Pathway program submit a letter outlining the methods used to evaluate and admit the applicant to the program. | |

GERMAN GRADUATES ONLY

| | German Graduate Additional Documents | Notarized Copy of Original Submitted TO GME |
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| 1. | Arztliche Vorprüfung – Preliminary Physician’s Exam | |
| | Translation – Preliminary Physician’s Exam | |
| 2. | Ersten Abschnitt Prüfung – First Physician’s Exam | |
| | Translation – First Physician’s Exam | |
| 3. | Zweiten Abschnitt Prüfung – Second Physician’s Exam | |
| | Translation – Second Physician’s Exam | |
| 4. | Arztliche Prüfung – Third Physician’s Exam | |
| | Translation – Third Physician’s Exam | |

Documents received and reviewed by: Name: _____

Title: _____

Date received and reviewed: ____ / ____ / ____