

ECFMG & FAIMER

**James A. Hallock, M.D.
ECFMG President and CEO and
Chair, FAIMER Board of Directors**

**AMA IMG Congress
Chicago, IL
June 12, 2009**

ECFMG Vision Statement

The values of ECFMG are expressed in its vision statement:

“Improving world health through excellence in medical education in the context of ECFMG’s core values of collaboration, professionalism, and accountability.”

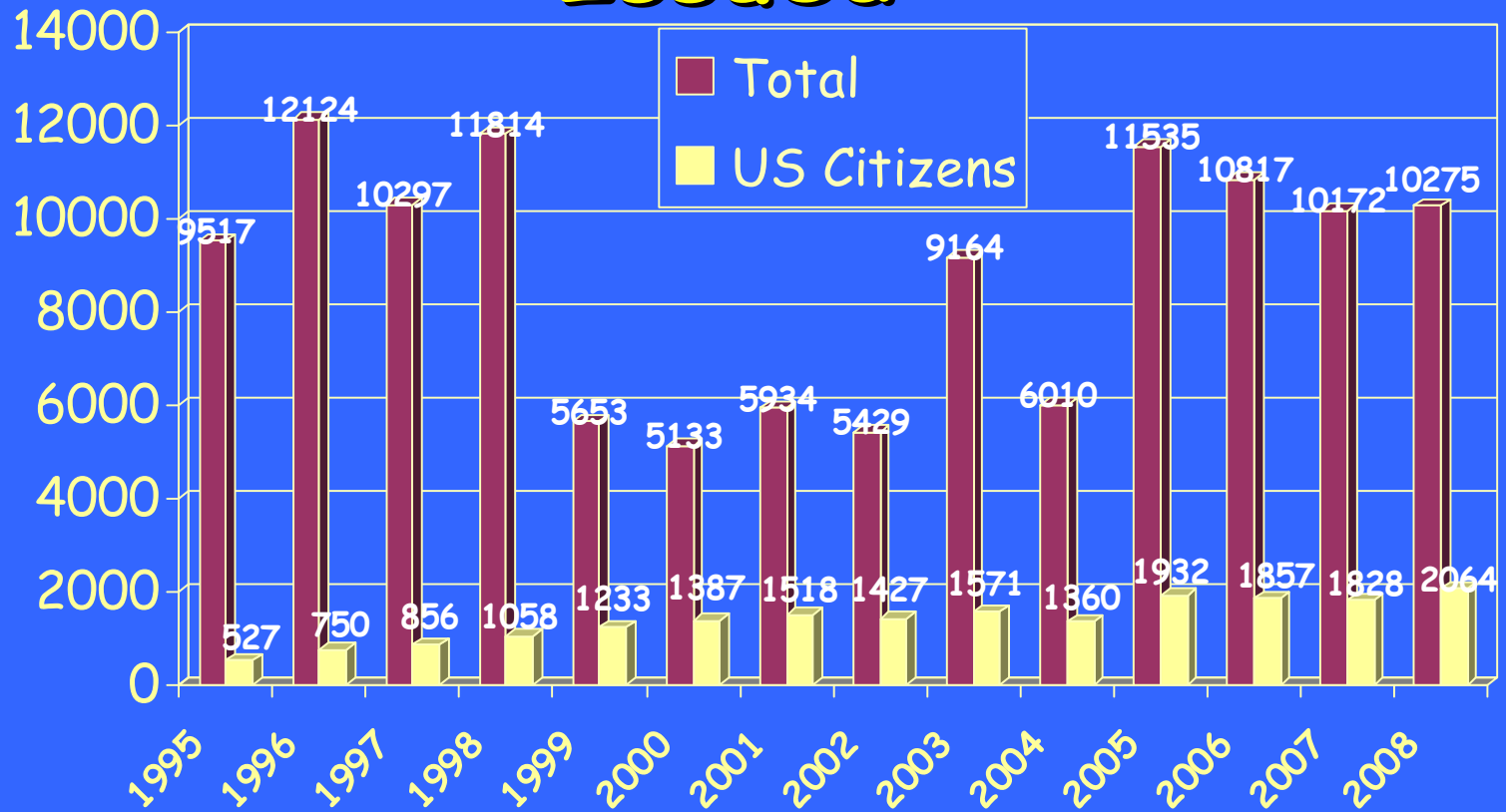
Purpose of ECFMG Certification

ECFMG certification assures residency program directors and the U.S. public that international medical graduates have met the minimum standards to enter residency programs in the United States.

Standard ECFMG Certificate

- Issued to applicant once he/she has passed USMLE Step 1, Step 2 CK, Step 2 CS (or CSA), and after receipt of final medical diploma and final medical school transcript and primary source verification of diploma and transcript.
- Required to enter ACGME-accredited residency programs in the United States.
- Required to take USMLE Step 3.
- Prerequisite for unrestricted licensure in all states.

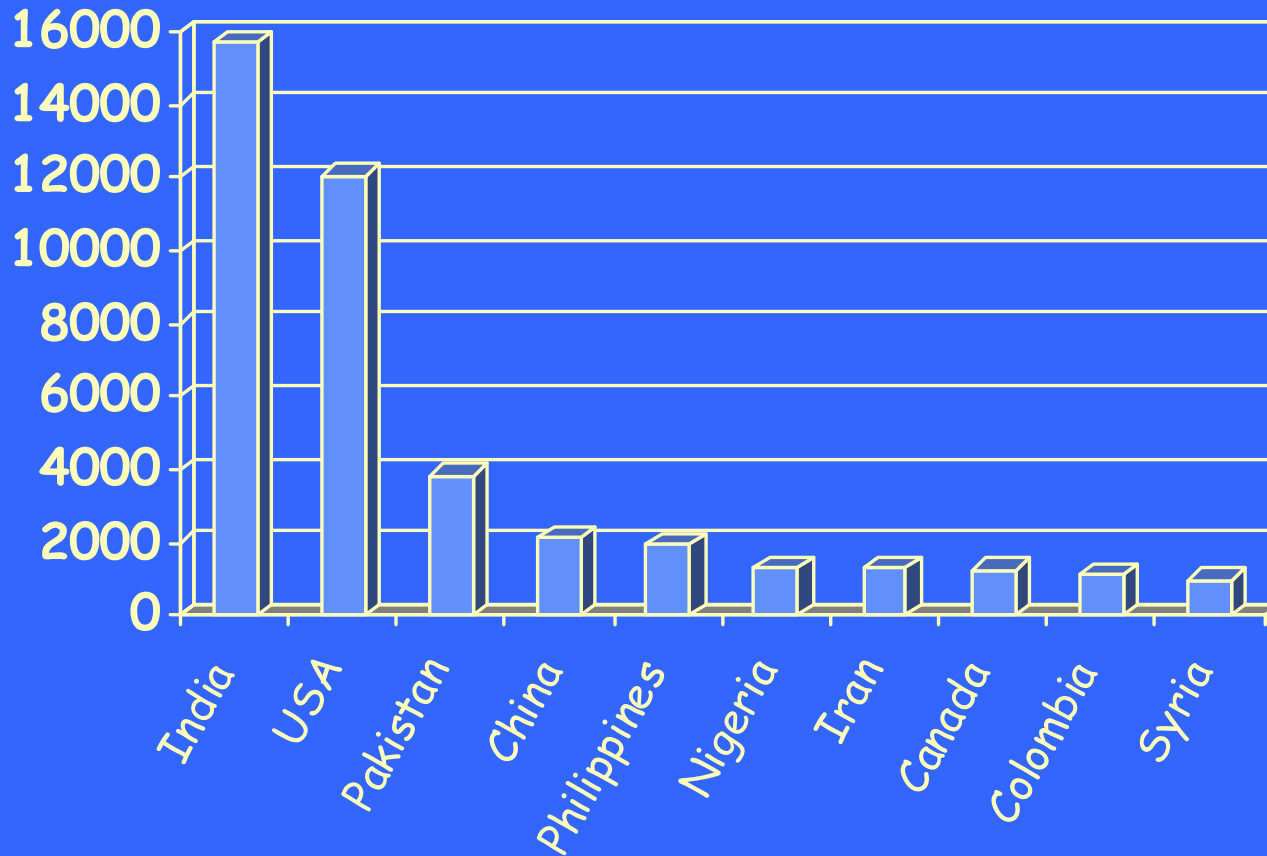
ECFMG Standard Certificates Issued*



•Citizenship is as of time of entrance into medical school.

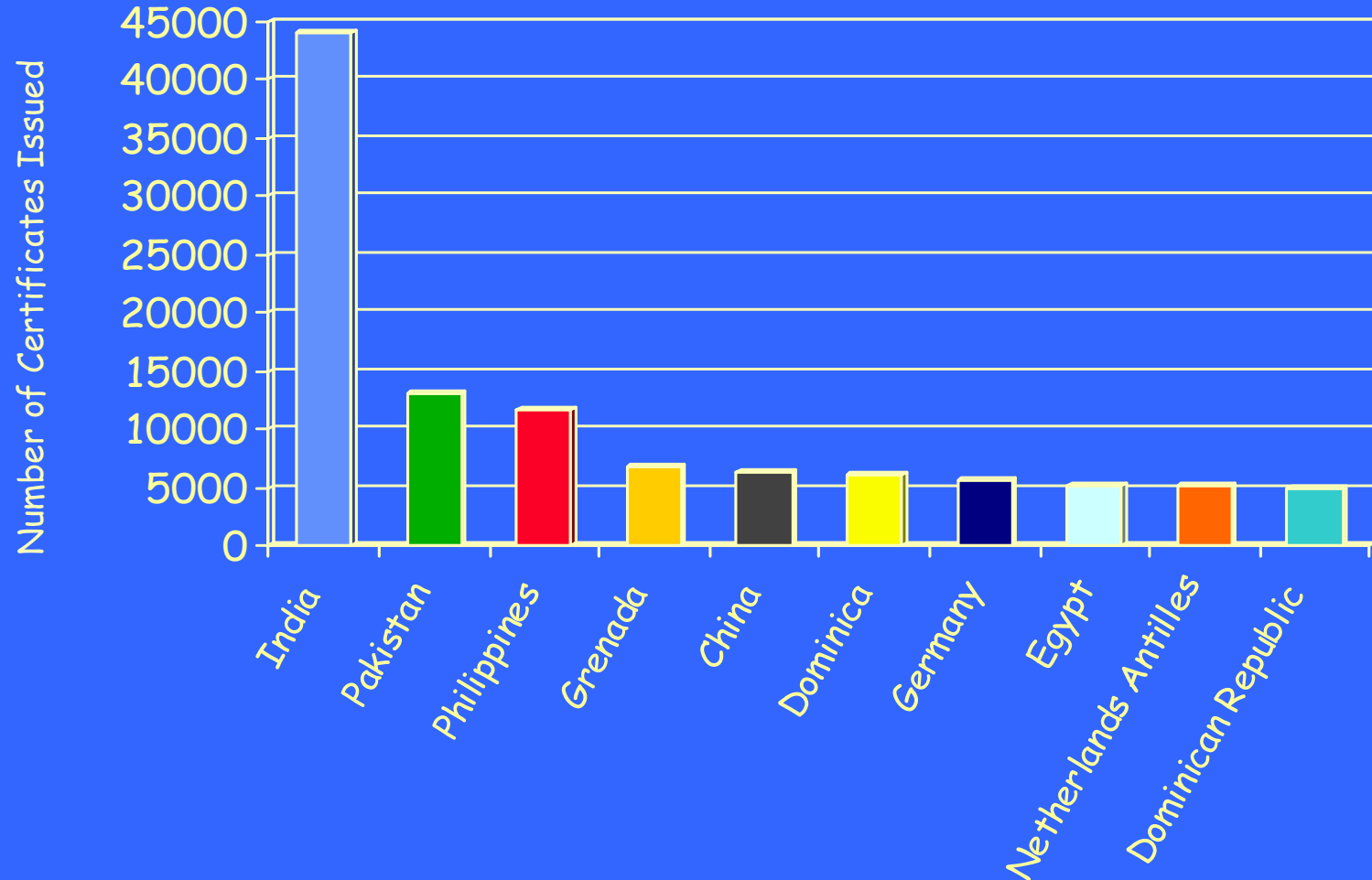
Note: The availability of exam results for some examinees taking the Step 2 CS during the initial months of test administration was delayed until early 2005. As a result, the number of certificates issued in 2004 is lower than it would have been had this delay had not occurred.

ECFMG Certifications by Citizenship at Entry to Medical School (2002 - 2008)



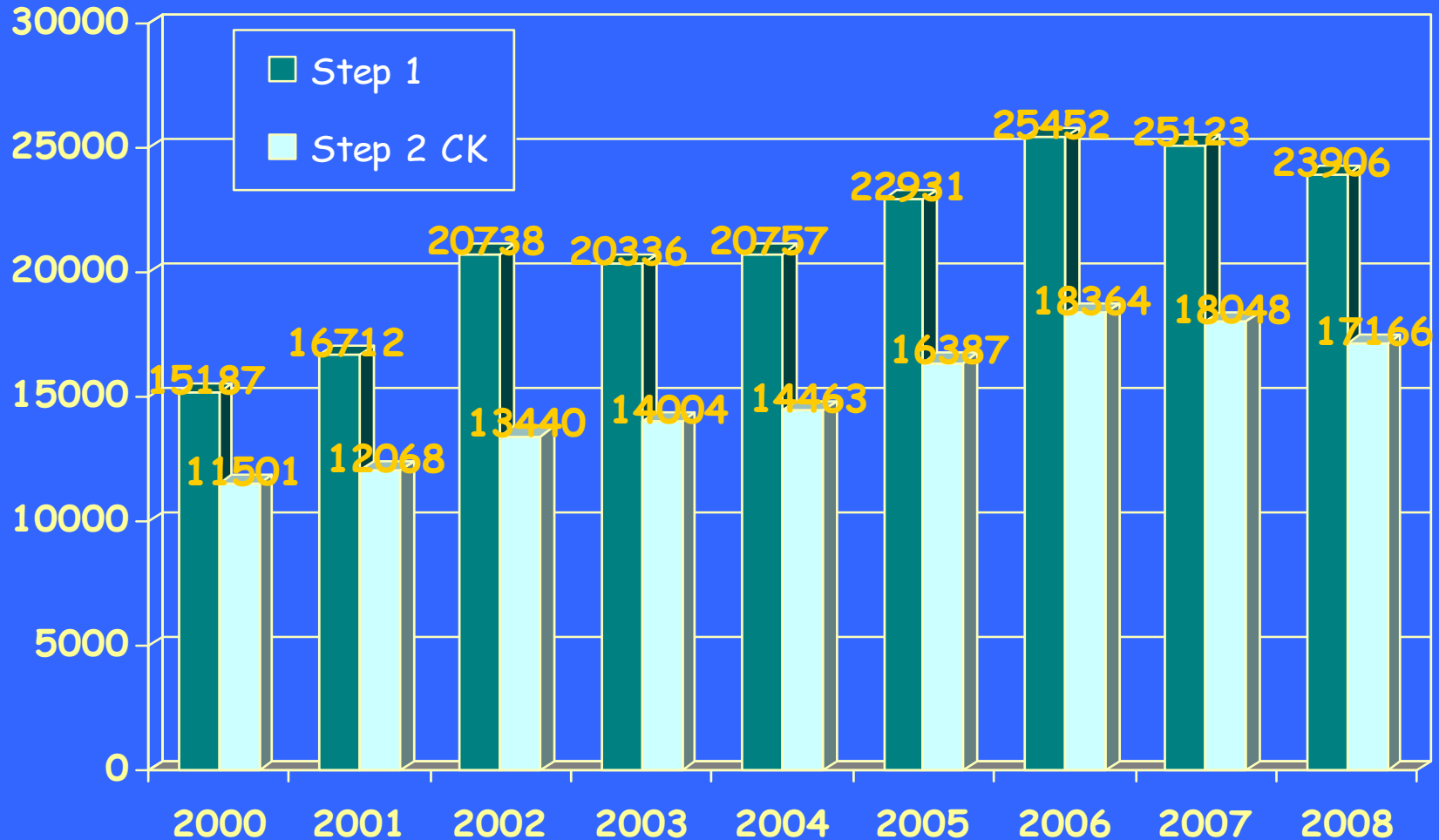
63,403 total ECFMG certificates issued

Top 10 Countries of Medical School Certificates, 1982-2008



Top 10 Countries based on aggregate data over a 27-year period.

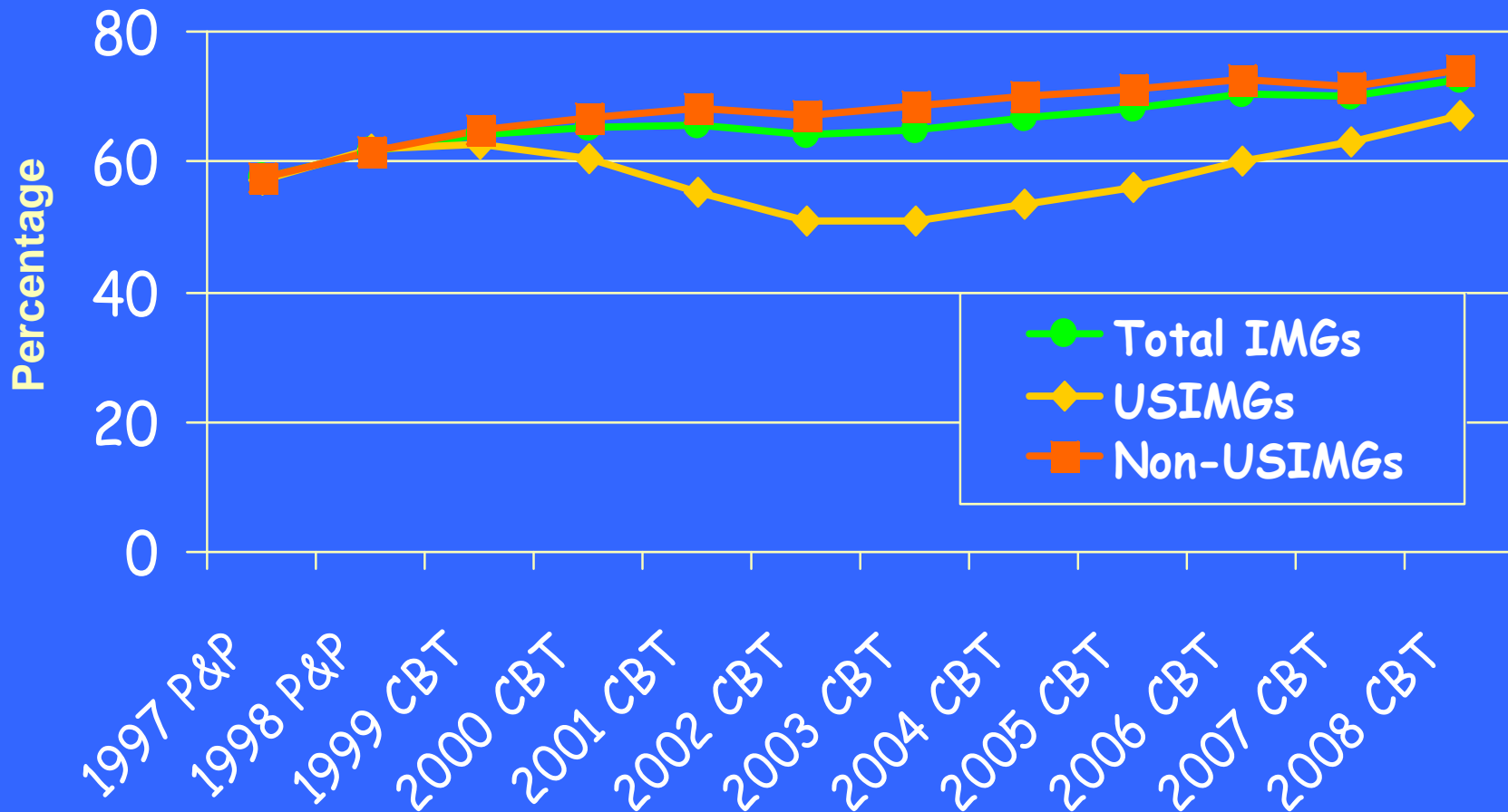
USMLE Step 1 & Step 2 CK IMG Registrations



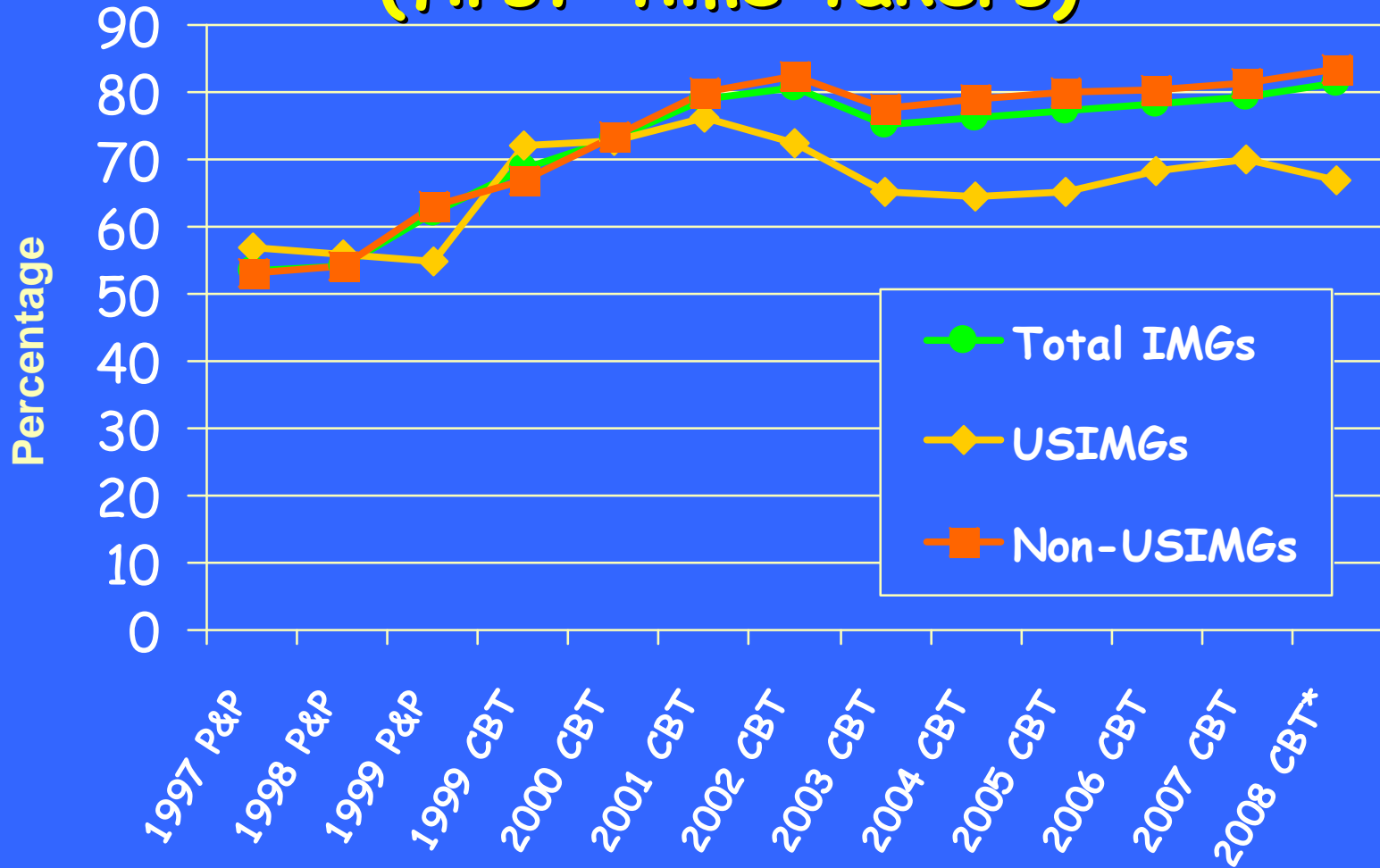
USMLE Step 1

Percent IMGs Passing 1997-2008

(first-time takers)



USMLE Step 2 CK Percent IMGs Passing 1997-2008* (first-time takers)



* January through June 2008. Not a complete cohort.

ECFMG Certification

- All students/graduates (341,855) who initially applied for an examination leading to ECFMG certification (1981-2005)
- 183,238 (53.6%) ultimately achieved certification (as of March 2009)
 - 61.6% of USIMGs
 - 52.6% of Non-USIMGs
- Of those applicants (1981-2005) who achieved certification 73% appeared in the AMA master file (2008)
 - 88.7% USIMGs
 - 70.2% Non-USIMGs

Exchange Visitor Sponsorship Program

Top Specialties for J-1 Physicians*

<i>SPECIALTY</i>	<i>COUNT</i>	<i>% of TOTAL</i>
Internal Medicine	2884	44.4%
Pediatrics	675	10.6%
Family Medicine	503	7.5%
General Surgery	486	7.4%
Psychiatry	369	5.7%
Neurology	236	3.7%
Obstetrics & Gynecology	179	2.7%
Pathology	163	2.4%
Orthopaedic Surgery	91	1.4%
Anesthesiology	88	1.3%

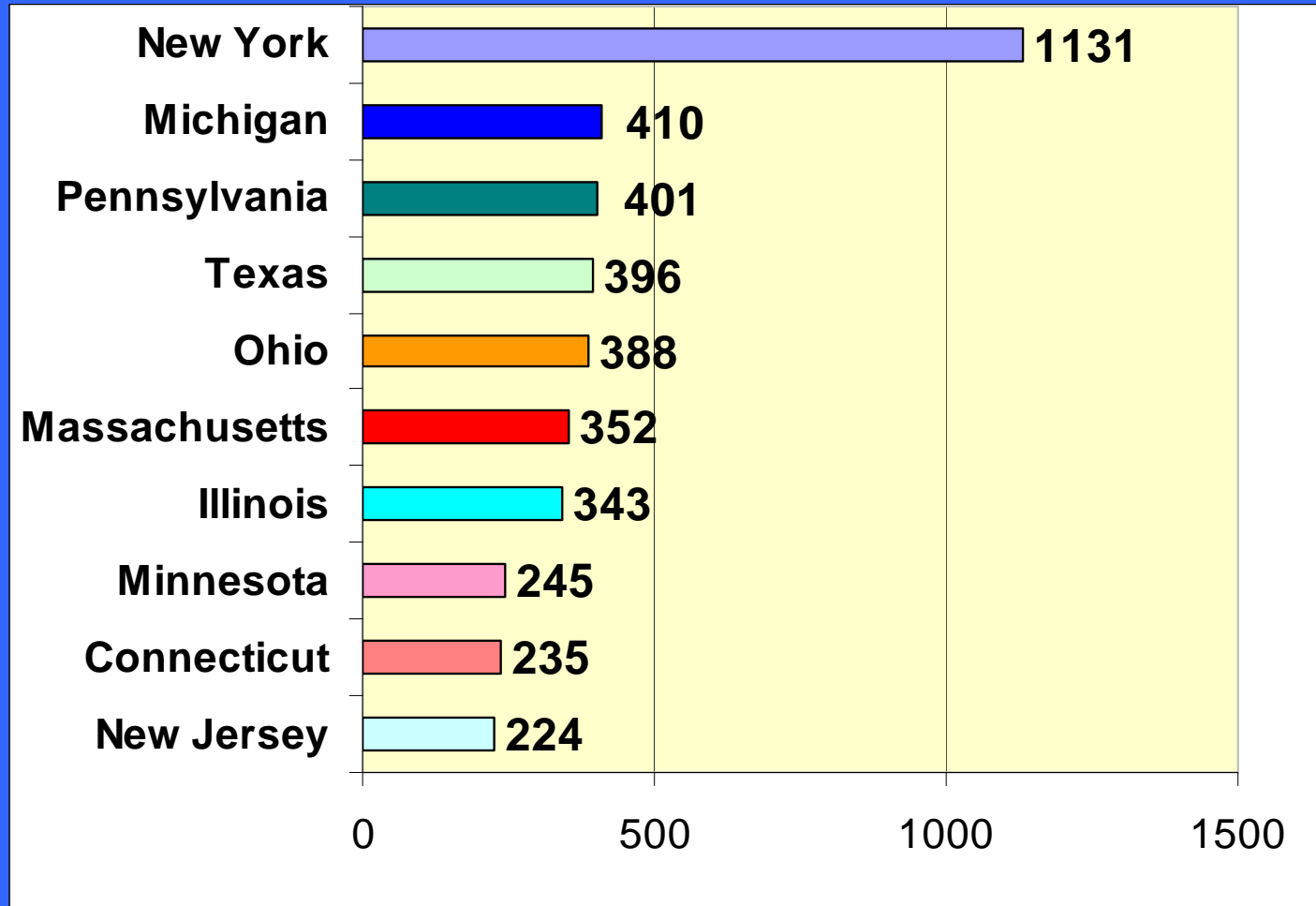
*Sponsorship Period July 1, 2007 through June 30, 2008

Total Number of J-1 Physicians Sponsored in Top Countries of National Origin*

India	1177
Canada	638
Pakistan	556
Lebanon	384
Philippines	380
Syria	228
Jordan	208
Peru	159
Thailand	140
Mexico	129

*Sponsorship Period July 1, 2007 through June 30, 2008

Top States with J-1 Physicians*



*Sponsorship period July 1, 2007 through June 30, 2008

Patterns of Global Physician Migration

Sub-Saharan Africa	→	South Africa
South Africa	→	Canada, New Zealand, Australia
India	→	U.S., U.K., Canada
Pakistan	→	U.K., U.S.
Albania	→	Greece
Germany	→	Denmark, Sweden
European Union	→	Much movement primarily to U.K. from Eastern Europe, Spain, Italy

FAIMER®

Foundation for Advancement of International Medical Education and Research

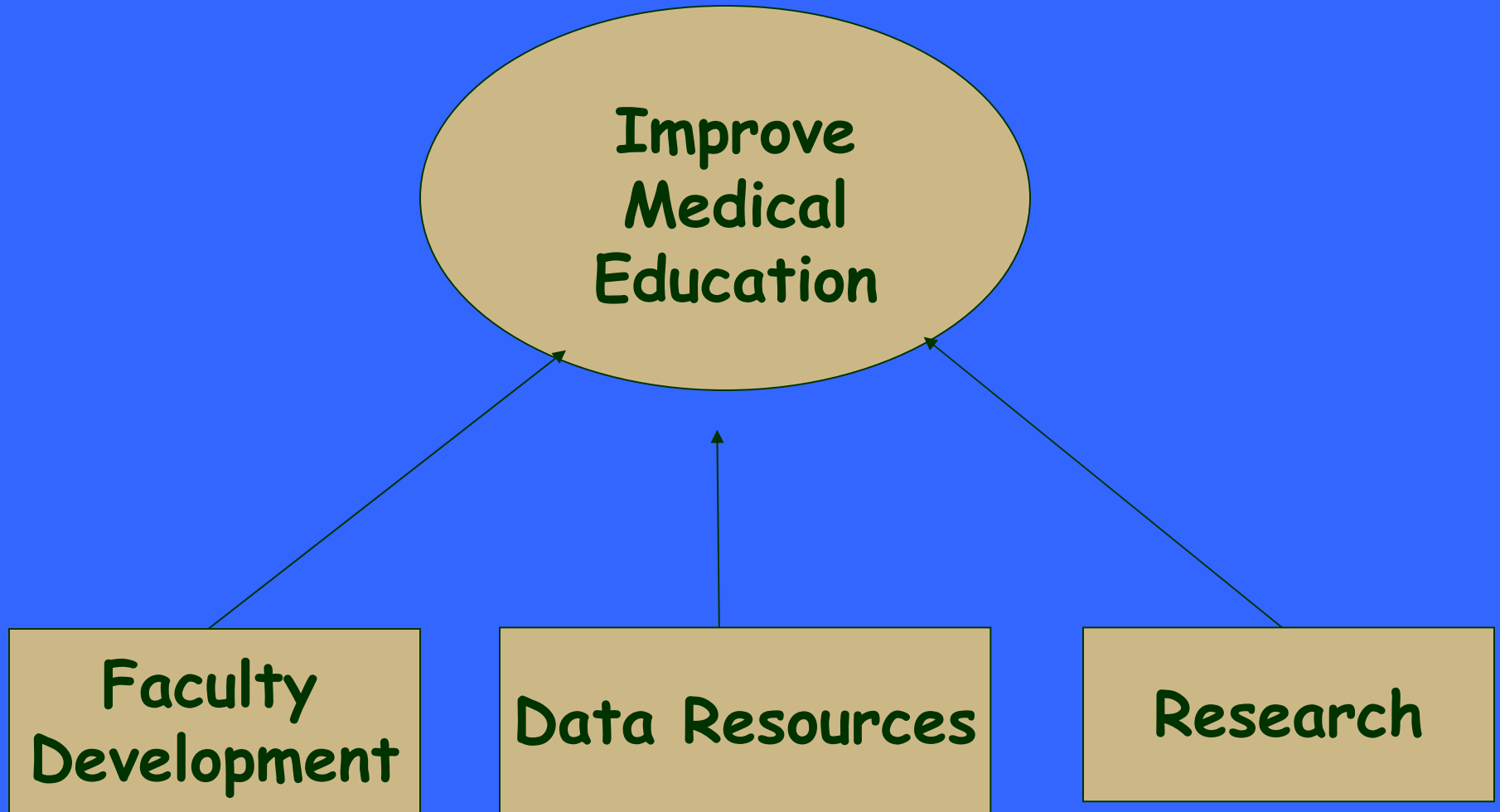
FAIMER: Developing Global Medical Education

Strategic Plan

“Improve the health of populations”



Strategic Plan



Principles

- Identify individuals with potential to become agents for change
- Deliver an effective learning intervention relevant for the environment
- Facilitate the opportunity for application of acquired knowledge and skills
- Promote development of a sustainable career path with opportunities for growth

Nchinda TC. Research capacity building in the South. *Soc Sci Med*, 2002;54 1699-1711.

Focus

- Principles and model are best served by a geographic focus
 - Increases the ability to have a measurable impact given our resources
 - Increases the effectiveness of our programs in supporting regional medical education
 - Allows meaningful oversight
- South Asia, Africa, and Latin America are given preference

Programs: FAIMER Institute

- Format of Year One
 - 3 weeks in the US
 - Basic topics and meet mentors
 - 11 month distance learning
 - On-line discussion and progress reports



Format of Year Two

- 2 weeks in the US
 - Advanced topics and meet new fellows
- 11 month distance learning
 - Focus on publishing work, collaborative research

Programs: FAIMER Institute

- Curriculum based on needs assessment
 - Educational practice
 - Large/small group teaching, PBL
 - Assessment
 - Educational leadership
 - Change theory
 - Project management
 - Scholarship
 - Publication, presentation



Programs: IFME Program

- Started in 1983
- Current program
 - Institute Fellows only
 - Support for an M.Ed.
 - Provides additional skills
 - Degree enhances local credibility
 - Accountability and efficiency
 - Relationships with M.Ed. programs



Programs: Regional Institutes

- Regional versions of the Institute
 - Advantages
 - Locally relevance, networking, efficiency
 - Draws more local participation
 - Run by FAIMER Fellows
 - Funded by FAIMER plus others



Programs: Regional Institutes

- **India**
 - Mumbai (2005)
 - Ludhiana (2006)
 - Coimbatore (2007)
- **Brazil**
 - Brazil (2007)
- **Africa**
 - Southern Africa (2008)
 - East and West Africa (in development)



- **January 2006:**
 - 56 FAIMER Institute Fellows
 - 41 Fellows at 2 FAIMER Regional Institutes

- **June 2009 (projected)**
 - 104 FAIMER Institute Fellows
 - 286 Fellows at 5 FAIMER Regional Institutes

Data Resources

- Expansion plans
 - IMED
 - Include data that support research
 - Curriculum, training sites, faculty, students, resources
 - Recognition/Accreditation Database
 - Include information on the process of accreditation and whether it conforms to WFME standards
 - Establish a link between the two databases

Research: Understanding Medical Education

- Focused on curriculum, accreditation...
 - Are there curricular differences between US medical schools and those that produce the most USIMGs?
 - Is there variability in the quality of Caribbean medical schools?
 - Are there differences between the US and developing countries in the process of accreditation?
- Done by FAIMER Fellows

Summary

- FAIMER has a big goal
 - Improving medical education is a way to leverage limited resources
 - Faculty development
 - Support quality improvement
 - Inform policy and practice
 - Partnerships are critical to FAIMER's success



Thank you very much!

Questions?

www.ecfmq.org

www.faimer.org