

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 1
(A-18)

Introduced by: International Medical Graduates Section

Subject: Foreign Trained IMGs Obtaining a U.S. License Without U.S. Residency

Referred to: Reference Committee _____
(_____, Chair)

1 Whereas, There is a predicted shortage of 40,800-104,900 physicians in the U.S. by
2 2025;¹ and
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4 Whereas, There are many qualified International Medical Graduates (IMGs) waiting for a
5 residency position²; and
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7 Whereas, U.S. medical schools and the Accreditation Council of Graduate Medical Education
8 (ACGME) are moving towards competency-based criteria and not necessarily time-based
9 criteria for graduation³; and
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11 Whereas, Many overseas residency programs are equally as rigorous as residency programs in
12 the U.S.; and
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14 Whereas, Many well trained and experienced IMGs could meet the competency-based criteria
15 required for graduation from the residency programs; and
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17 Whereas, There is precedent where several physicians who were trained abroad entered
18 medical practice in the U.S., or even served on U.S. medical school faculties, without being
19 required to undergo any additional residency training; therefore be it
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21 RESOLVED, That the American Medical Association accept it as a policy that IMGs who have
22 completed residency programs in their own countries, have passed the USMLE I, II, and III to be
23 eligible for a license to practice medicine without additional residency training in the U.S..
24 (Directive to Take Action)
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References:

¹Association of American Medical Colleges, "The Complexities of Physician Supply and Demand: Projections form 2015 to 2030, February 28, 2017.

²National Residency Matching Program, <http://www.nrmp.org>

³ACGME Common Program Requirements for Graduate Medical Education,
<http://www.acgme.org>

RELEVANT AMA POLICY

Competency Based Medical Education Across the Continuum of Education and Practice D-295.317

1. Our AMA Council on Medical Education will continue to study and identify challenges and opportunities and critical stakeholders in achieving a competency-based curriculum across the medical education continuum and other health professions that provides significant value to those participating in these curricula and their patients.
2. Our AMA Council on Medical Education will work to establish a framework of consistent vocabulary and definitions across the continuum of health sciences education that will facilitate competency-based curriculum, andragogy and assessment implementation.

Mechanisms to Measure Physician Competency H-275.936

Our AMA (1) reviews and proposes improvements for assuring continued physician competence, including but not limited to performance indicators, board certification and recertification, professional experience, continuing medical education, and teaching experience; and (2) opposes the development and/or use of "Medical Competency Examination" and establishment of oversight boards for current state medical boards as proposed in the fall 1998 Report on Professional Licensure of the Pew Health Professions Commission, as an additional measure of physician competency.