GMEC OVERSIGHT OF EXCEPTIONALLY QUALIFIED (EQ)

APPLICANT/FELLOW FOR ACGME ACCREDITED FELLOWSHIPS

1. Definition (as per ACGME Common Requirements II.A.2.b).(5).(a):
An exceptionally qualified applicant has (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.

2. As per Common Program Requirements (CPRs) copied below:

III.A.2.b) Fellow Eligibility Exception:
A Review Committee may grant the following exception to the fellowship eligibility requirements:
An ACGME-accredited fellowship program may accept an exceptionally qualified applicant**, who does not satisfy the eligibility requirements listed in Sections III.A.2. and III.A.2.a), but who does meet all of the following additional qualifications and conditions: (Core)

III.A.2.b).(1) 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; and, (Core)

III.A.2.b).(2) Review and approval of the applicant’s exceptional qualifications by the GMEC or a subcommittee of the GMEC; and, (Core)

III.A.2.b).(3) Satisfactory completion of the United States Medical Licensing Examination (USMLE) Steps 1, 2, and, if the applicant is eligible, 3; and, (Core)

III.A.2.b).(4) For an international graduate, verification of Educational Commission for Foreign Medical Graduates (ECFMG) certification;

3. To obtain the above, GMEC approval per exceptionally qualified candidate is REQUIRED. The program must submit the required information (see attached) to the GME Office no later than January for fellowship programs beginning July or August of the same year. This information will be reviewed by the Educational Monitoring Subcommittee (EMS) and, if approved at that level, must be presented at the March GMEC meeting by the Program Director or his/her faculty designee. (CR III.A.2.b).(2)
4. If the applicant has scored in the BORDERLINE range on the Clinical Skills (CS) portion of Step 2 USMLE, the Program Director must additionally submit a plan for remediation of this area BEFORE the EMS/GMEC will consider the application.

5. III.A.2.b).(5) 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 12 weeks of matriculation.

Confirmation of the 12 week milestones assessment must be provided to the Office of the Associate Dean for GME upon completion. The progress of exceptionally qualified applicant(s) must be documented in the APE for each year of training and will be reviewed annually during the programs’ Annual Program Review (APR) by the EMS.

6. III.A.2.b).(5)(a) If the trainee does not meet the expected level of Milestones competency following entry into the fellowship program or throughout training, the trainee must undergo a period of remediation, overseen by the CCC and monitored by the GMEC through the EMS. Any period of remediation must not count toward time in fellowship training.

The PD must notify the Associate Dean for Graduate Medical Education and/or Hospital GME of intent of the fellow’s remediation and extension of training. The PD must also inform the fellow in writing of the need of extended training. The documentation for the extension must be retained in the fellow’s file.