

UTHSCSA Graduate Medical Education Policies

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| Section 4 | Program Policies & Procedures | Effective: | June 2015 |
| | | Revised: | June 2015 December 2021 |
| Policy 4.3.1 | Process for Accepting Transferring Residents | Responsibility: | Designated Institutional Official |
| Process for Accepting Transferring Residents | | | |
| Policy | <p>According to ACGME Institutional Requirements, the institution and our ACGME- accredited programs are at risk for loss of accreditation if non-eligible residents are accepted into our training programs. For that reason, when applicants for positions are under consideration via transfer, the GME Office must be included in the process. The process follows the sequence:</p> <ol style="list-style-type: none"> 1. Application is made by an individual to transfer from another ACGME- accredited program. 2. The receiving program reviews supporting documentation. If the applicant is considered to be suited to the position, the program obtains further information as appropriate and completes the checklist below. 3. The completed checklist is sent to the GME Office for review. 4. The GME Office will review the information and communicate approval/non- approval to the program within five business days of receipt of a completed checklist. 5. If the GME Office approves, the position may be officially offered to the applicant. <p style="text-align: center;">(See form subsequent pages)</p> | | |

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Transferring Resident Form

| | Applicant Name: _____ Program _____ | |
|-------------------------------------|--|----------|
| <input checked="" type="checkbox"/> | Items | Comments |
| | Do <u>not</u> offer position until checklist is complete and approved | |
| | CV reviewed by Program Director | |
| | Medical school: <ul style="list-style-type: none"> • <input type="checkbox"/> Graduation date: • <input type="checkbox"/> If US, get Dean's Letter • <input type="checkbox"/> If international medical school, check acceptability at TMB at http://www.tmb.state.tx.us/professionals/physicians/applicants/physicianapplicants.php (click on 'Substantial Equivalence') | |
| | USMLE scores: Step 1 _____ number of attempts _____ Step 2 _____ number of attempts _____ Step 3 _____ number of attempts _____ COMLEX _____ Residents must meet current TMB requirements. | |
| | ECFMG Certificate: Date _____ Number _____ | |
| | Obtain a signed release to speak to particular individual(s) involved in the applicant's medical education (e.g., program directors) and/or written documentation of training and evaluations to date | |
| | Residency #1: <ul style="list-style-type: none"> • <input type="checkbox"/> Dates: • <input type="checkbox"/> Letter from Program Director: • <input type="checkbox"/> Phone call to Program Director if appropriate: | |
| | Residency #2 (if applicable): <ul style="list-style-type: none"> • Dates: • Letter from Program Director: • Phone call to Program Director if appropriate: | |
| | Why switching program? | |

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| | Unexplained time periods on CV: | |
| ☑ | Items | Comments |
| | <p>Updated Licensure:</p> <ul style="list-style-type: none"> • Updated permit or documentation of Texas licensure | |
| | <p>ABMS Board Certificate/eligibility? Check with ABMS Board if any doubt about months of credit to this point. Get letter or email from the board, or send them a letter confirming a verbal conversation.</p> <ul style="list-style-type: none"> • Has taken boards? • Deficiencies? • Eligible for months toward _____ABMS Certification • Letter from ABMS | |
| | <p>ACGME Common Program Requirements III.C: III.C. Resident Transfers III.C.1. Before accepting a resident, who is transferring from another program, the program director must obtain written or electronic verification of previous educational experiences and a summative competency-based performance evaluation of the transferring resident.</p> | |
| | <p>If applicant needs a visa, check with International Services regarding eligibility and application process. <i>Please don't proceed until this is clear.</i></p> | |
| | <p>Obtain a signed release for security background check. Any candidate with an issue discovered by the background check must have the background check adjudicated by the DIO to determine if the candidate can transfer into the program.</p> | |
| | <p>We pay at PGY level of our program, not at level of previous training.</p> | |
| | <p>You <u>cannot</u> ask about disabilities, illnesses, family problems or illnesses.</p> <p>You <u>can</u> ask about academic failures, probation, evaluations, etc. If a candidate asks for special accommodations (religious holidays, military leave, disability accommodations, etc.) ask the candidate to articulate the request in writing after he/she is accepted. If a candidate requests an accommodation for a disability refer the individual to ADA Office (Dr. Blankmeyer). You should not offer an accommodation for a disability outside of the ADA process. You can make accommodations for military leave and for religious holidays.</p> | |