International Postgraduate Opportunities

Last updated by Andrew Hu: Jan 19 2014

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Introduction

For those of us wanting to work abroad, the process of obtaining a license to practice in that country may be unfamiliar and a little bit confusing. To help with this, I have researched the different pathways and have given a step by step summary for countries that I think people would be interested in.

**Note of caution:** At the time that I wrote this (mid-June 2013/updated Jan 2014), the information in this document was up to date and, to my knowledge, correct. However, policies are subject to change and websites are constantly updated. This being said, if you plan on obtaining a license in a foreign country, it is **your responsibility** to do the research, understand the process, and plan accordingly. I’ve put this together to be a somewhat short and rough guide, leaving out pieces of information for others, for two main reasons:

1. I found a lot of the information for this project on official websites which detail the nitty gritty stuff in great lengthy pages and to put that on this site would end up being a lot of copying.
2. I have just finished phase 2 and besides trawling the internet, I don’t really have the experience to provide great detail without making a mistake

So for example, I have left out the details as to how to apply for an exam and how that exam is scored in favor of content and when and where you can write it. If you want more detail I suggest that you do your own research and ask around. Most governments have websites and affiliate organizations dedicated to International Medical Graduates (IMGs) wishing to practice in their country. They are great sources of information as to what will be examined, eligibility, applying, scheduling, fees, scoring etc. Throughout the steps, I’ve put in the links where I got the information from so if you want more detail you can have a look.

I really do hope people find this useful! If anybody notices any mistakes or anything they would like to add or change then please let me know. You can contact me at international@medsoc.net.

Both the Medical Careers and BMA website have provided great overviews for UK graduates wishing to work abroad.

Medical Careers

[http://www.medicalcareers.nhs.uk/postgraduate_doctors/medical_training_abroad/medical_training_outside_the_e.aspx](http://www.medicalcareers.nhs.uk/postgraduate_doctors/medical_training_abroad/medical_training_outside_the_e.aspx)

BMA(pretty in-depth and useful)

[http://bma.org.uk/developing-your-career/career-progression/working-abroad/before-you-go](http://bma.org.uk/developing-your-career/career-progression/working-abroad/before-you-go)

Thanks guys enjoy!

Andrew Hu
Canada

Will Canada recognize my medical degree?

Canada will accept your medical degree if your medical school, name of the degree, and year of your graduation is listed in the International Medical Education Directory(IMED) which can be found here: http://www.faimer.org/resources/imed.html

Are you ready?

You can see if you’re ready to take the Medical Council of Canada Evaluating Examination (MCCEE see below) by taking a self-administered evaluating examination. You score will be compared to the results of other MCCEE candidates so you can see how you do.

Submit your credentials

You will have to first make an account and then submit your credentials to physiciansapply.ca which will verify your documents and also allow you to apply to Medical Council of Canada examinations.

*Above 3 were from http://mcc.ca/about/mcc-and-route-to-licensure/licensure-process-for-imgs/

Take the Medical Council of Canada Evaluating Examination(MCCEE)

The MCCEE is designed to assess the core medical knowledge of an International Medical Graduate(IMG) at the level of someone who has graduated medical school. It is a four hour computer based exam consisting of 180 multiple choice questions that will cover:

- Child health
- Maternal Health
- Adult Health
- Mental Health
- Population Health and Ethics

You are eligible to write the MCCEE if you are

- In the last 20 months of your medical school program or a graduate
- Your school must be listed in IMED

The exam is offered in 2-3 week testing windows in January, March, May, September, and November. Scheduling your examination is on a first come first serve basis and will be done through the organization Prometric. You can use their website to find the closest examination centre.
A good MCCEE score is important as most programs use it as a cut-off point when choosing who to interview so preparation is key. The MCC website gives some good tips including online demos, reference books, frequently asked questions and learning objectives. These learning objectives can be examined on any MCC exam and are organized by clinical presentation (kind of like the phase2 list). This study guide can be found at the Objectives for the Qualifying examination website. Furthermore there are websites out there that provide sample questions for a fee.


Objectives for the Qualifying Examination(click table of contents) http://apps.mcc.ca/Objectives_Online/

Canada Q-bank - http://www.canadaqbank.com/MCCEE.php

qChimp - http://mccee.ca/questions

*http://mcc.ca/examinations/mccee/

*http://mcc.ca/examinations/mccee/scheduling/

Apply to Canadian Resident Matching Service(CaRMS)

CARMS is an organization that allows both Canadian and eligible IMGs to apply for postgraduate training programs also known as residency positions. Examples of residency positions include Family Medicine, General Surgery, Orthopedic Surgery, Neurology etc. Once applications are through, an algorithm takes into account the applicants wishes (in the form of a ranked list) and the programs wishes and matches you with the best possible result.

The basic eligibility criteria for IMGs:

- Be either a medical student or a graduate having obtained or in the process of obtaining a medical degree by July 1 of the match year (eg. Matched and start working in Canada in 2014, you would need your degree by July 1 2014) from an IMED listed medical school
- Written and passed the MCCEE or be scheduled to write the September or November MCCEE (There is a confusing aspect to the Sep. and Nov. exams that I try and explain below)

Keep in mind that these are basic criteria and each province and program has its own specific criteria for IMGs. You can find the province-specific eligibility criteria here:

https://www.carms.ca/eng/r1_eligibility_prov_e.shtml

For example, all provinces require IMGs to be either Canadian citizens or permanent residents of Canada while also passing some form of language proficiency exam. Most provinces simply require the MCCEE however some state that applicants with good results in the NACOSCE and MCCQE1 (see below for what these are) will have preference. The exception to this is the province of British Colombia which recently
has made pass scores in both the MCCEE and NACOSCE mandatory for IMG applicants. Ontario medical schools are also making the NAC OSCE a mandatory requirement starting July 1 2015.

Each program may also have different criteria that need to be fulfilled and, if available, you can find that on the CARMS website. The program descriptions for the 2014 match will be available in the beginning of September 2013. You can have a look at the 2013 program descriptions on the CARMS website.

Finally, all provinces require the signing of a return of service contract for IMGs. Simply put, once you are done your postgraduate training (this is usually 5 years excluding family medicine which is 2) you will be placed in an underserviced area of the province and be required to work there for 5 years. After that you’re free to move about.

The matching system for CARMS runs in two iterations. In the first iteration, there are two parallel streams; one for Canadian graduates and one for international graduates. Basically, there are designated spots in each program for IMGs and IMGs who apply for those spots will only be in competition with one another. The second iteration aims to fill the spots that were unfilled at the end of the first and whether there are designated spots for IMGs varies between provinces. So once again have a look at the provincial eligibility page!

The schedule for applying to programs through CARMS may differ from year to year. For a rough idea have a look at the applicant timetable for the 2014 first iteration:

https://www.carms.ca/eng/r1_1stIteration_e.shtml

An important date is the MCC examination milestones and NACOSCE milestones. For the 2014 match examination scores must be provided by November 4th 2013. The review of applicants begins on November 25th 2013. Therefore, to be eligible for the 2014 first iteration match the latest you could have written the MCCEE is in November. However, as results for MCCEE in November are only provided to programs in December, well past the time where programs are reviewing applicants, these applicants may not even be considered.

So I hope I summed up CARMS with some sort of sense. If you’re serious about applying to Canada then the CARMS website is really important to read and understand. Best of luck!

*https://www.carms.ca/en/

*http://www.cehpea.ca/examinations/PGY1/NAC-OSCE.htm

Medical Council of Canada Qualifying Examination Part I (MCCQE1)

The MCCQE1 is similar to the MCCEE in that it is a one day computer based test that examines the competence of candidates for entry into supervised postgraduate clinical practice. It is split into two sections. The first section is composed of 196 multiple choice questions focused in the general areas of internal medicine, surgery, pediatrics, obstetrics and gynecology, psychiatry, public health, and the legal and ethical aspects of medicine. The second section assesses clinical decision making skills through case
descriptions. Through short menu and short answer questions you will be expected to order diagnostic procedures, make diagnoses, prescribe therapy, and elicit clinical information. Examination centres are only in in Canada.

You are eligible to write the MCCQE1 as an IMG or an international medical student (IMS) if you:

- Have passed MCCEE
- Complete all requirements to graduate by: November 30th for the spring examination session (apply for spring 2013 graduate no later than Nov 30 2013) or March 30th for the fall sessions (Fall 2013 examination graduate no later than March 30 2014).

It is optional whether or not you take the MCCQE1 to add to your application to CARMS. Some provinces (i.e. Alberta and Saskatchewan) and programs (i.e. Anaesthesiology at Macmaster University) give priority to those who have successfully completed and have good grades in the MCCQE1.

You can find a self assessment exam and other preparation tips and materials at:

http://mcc.ca/examinations/mccqe-part-i/exam-preparation-resources/

*http://mcc.ca/examinations/mccqe-part-i/

*https://www.carms.ca/en/

Medical Council of Canada Qualifying Examination Part II (MCCQEII)

The MCCQEII examines your competence to enter independent clinical practice. You are eligible to take it once you have passed the MCCQE1 and have completed a minimum of 12 months of postgraduate training.

The examination itself is a series of clinical stations each with a simulated patient and a clinical problem. Candidates will be required to take histories, perform physical examinations, address patient’s issues, read X-rays, interpret investigation results, and make a diagnosis. The clinical problems will be in the fields of Medicine, Pediatrics, Obstetrics and Gynecology, Preventive Medicine and Community Health, Psychiatry, and Surgery. Examination centres are online in Canada.

You must pass this exam in order to be eligible to obtain a licence to practice.

*NAC OSCE*

The NAC OSCE assesses how ready an IMG is for entrance into a Canadian Postgraduate program. It is composed of 12 eleven minute clinical stations and a 45 minute written therapeutic component with the problems coming from fields such as medicine, pediatrics, obstetrics, gynecology, psychiatry and surgery. The rationale behind the NAC OSCE is to provide postgraduate program directors with an assessment of an IMG’s skills and knowledge which can be used in concert with the MCCEE mark.
For the OSCE you will be presented with a core clinical problem, a standardized patient, and a task such as taking a history. The examiner will assess your interaction with the patient. The written portion is a single best answer multiple choice exam assessing your knowledge of therapeutics such as adverse effects.

Eligibility Criteria

- IMG or a student who will obtain a medical degree by July 1 of the match year which they are applying
- Valid pass result on the MCCEE

There are only specific days in which you can take the NAC OSCE. For 2014 the dates fall within the months of March and September. Examination centres are only in Canada.

Like the MCCQE1 the NACOSCE is an optional exam when applying to CARMS. Different provinces and programs will review the mark and may give priority. Please be aware that British Colombia, and soon to be Ontario, requires their IMG candidates to have completed the NACOSCE. So if you’re interested, make sure to check out the province and program descriptions on the CARMS website.

If you want a little bit more information on the timing of when to take (and pass) your MCCEE in order to take the NACOSCE and have your results ready for your CaRMS match check out the diagram at the bottom of this page:

http://mcc.ca/examinations/nac-overview/application-information/

Lets say you want to graduate in the summer of 2015 and you want to, you know, have a job for fall 2015. In order to have the NACOSCE results ready in time for your CaRMS application in winter of 2014, the latest you could take the MCCEE in order to take the NACOSCE is March 2014...the diagram explains it better.

*http://mcc.ca/examinations/nac-overview/

Other

You can find statistics on residency placements for IMGs on the CARMS website:

https://www.carms.ca/eng/operations_R1reports_12_e.shtml

There is a blog by a Caribbean medical graduate who returned to Canada for residency written to give advice and share his experience. He brings a lot of knowledge to table so it’s worthwhile to have a look:

http://canadianimgmatch.blogspot.ca/
United States

Apply for Educational Commission for Foreign Medical Graduates (ECFMG) certification

The ECFMG is the first stop for International Medical Graduates (IMGs) who want to work in the United States of America. Their purpose is to set a standard for evaluating the qualifications of IMGs. Therefore, ECFMG certification is required to take both the United States Medical Licensing Examination (USMLE) Step 3 and to obtain an unrestricted licence to practice.

You are eligible to apply for ECFMG certification if you are:

- Either a student or a graduate of a medical school listed in the International Medical Education Directory (IMED) [http://www.faimer.org/resources/imed.html](http://www.faimer.org/resources/imed.html)

An IMG is ECFMG certified once they have:

- Completed USMLE Step 1
- Completed USMLE Step 2 CK
- Completed USMLE Step 2 CS
- Obtained final medical school diploma

* [http://www.ecfmg.org/forms/certfact.pdf](http://www.ecfmg.org/forms/certfact.pdf)

USMLE Step 1

The USMLE Step 1 is a multiple choice exam that assesses your understanding of **basic science concepts relevant to medicine**. Step 1 will examine you in 9 content areas

- Anatomy
- Behavioral sciences
- Biochemistry
- Microbiology
- Pathology
- Physiology
- Interdisciplinary topics such as nutrition genetics and aging
Just to provide a bit more insight than just “pathology”, the exam will be divided into general principles(25-35%) and into the individual organ systems where you would expect i.e cardiovascular, respiratory, musculoskeletal etc.(65-75%). Check out the content outline link if this confuses you!

To get a better understanding of the depth of knowledge that you will have to know, check out the USMLE website. You can find content outlines with an impressive number of bullet points along with sample questions. It’s great. Here are the links:

Content outlines: [http://www.usmle.org/step-1/#content-outlines](http://www.usmle.org/step-1/#content-outlines)


You are eligible for Step 1 if you are:

- A student or a graduate of a medical school listed in IMED
- Completed at least 2 years of medical school with the idea that you have now completed the basic medical science component of your curriculum

After you have successfully applied for ECFMG certification, you can then apply for writing the USMLE Step 1. The USMLE Step 1 is offered regularly throughout the year barring the occasions when the test centers are closed such as the first 14 days of January or major holidays. How it works is that you apply for a three month eligibility period such as February-March-April during which to write your exam. You can write Step 1 on any day of your eligibility period and at any of the Prometric sites where it is offered. Testing dates are on a first come first served basis and can be scheduled from up to six months in advance. Have a look at the Prometric website to find the closest examination centre.

[https://www.prometric.com/en-us/Pages/home.aspx](https://www.prometric.com/en-us/Pages/home.aspx)

**The retake policy is universal for each USMLE Step exam.** You are allowed to retake a Step exam no more than three times within a 12 month period. Your 4th attempt must be at least six months after your most recent attempt. They have recently introduced a limit where you can only take each Step 6 times in total including incomplete attempts. Once you have passed a Step exam then you are not allowed to retake the exam.

* [http://www.ecfmg.org/2013ib/application-for-usmle.html](http://www.ecfmg.org/2013ib/application-for-usmle.html)


**USMLE Step 2 Clinical Knowledge(CK)**

The USMLE Step 2 is a **multiple choice exam** with a focus on **clinical science**. It is designed to assess your ability to practice medicine in a supervised postgraduate training environment. Therefore the exam will test you in areas of:
You will be expected to understand the normal growth, development, and general principles of care along with disorders for each of the organ systems. To break it down further, for each clinical situation you are presented with you may be expected to establish a diagnosis, make a prognosis, understand the pathophysiology and be able to manage the disease. Have a look at these content description pages for more detail and practice questions:

http://www.usmle.org/step-2-ck/#contentoutlines


The eligibility criteria and scheduling process is the same as for the USMLE Step 1 (see above). The eligibility period that you choose to write your Step 2 CK is entirely up to you. Step 2CK is offered at Prometric sites. It could be the same period as you choose for your Step 1 or even before. However it is advised that you first complete your core clinical attachments before taking Step 2 CK.


**USMLE Step 2 Clinical Skills (CS)**

The USMLE Step 2 CS is an **OSCE style exam** designed to assess your ability to apply medical knowledge, skills, and understanding of the clinical science essential for patient care. The exam consists of twelve 15 minute encounters with standardized patients. For each encounter you are expected to:

- Communicate with patient in professional and empathetic manner
- Ask the relevant elements of a medical history for each case
- Perform relevant parts of a physical examination
- Form a preliminary differential diagnosis and a diagnostic workup plan

After each 15 minute encounter, you will be given 10 minutes to complete a patient note. The note will record the positive and negative findings of the history and examination while listing differential diagnoses. Finally you are required to list the diagnostic studies you would order for the patient. You are not expected to include referrals, consultations, or treatment.

Whereas the eligibility requirements for Step 2 CS are the same as both Step 1 and 2CK, the scheduling of this exam is slightly different. Instead of 3 month eligibility periods, an applicant would apply for a 12
Electronic Residency Application Service (ERAS)/National Resident Matching Program (NRMP)

Postgraduate specialist training in the United States is done in the form of a residency. A medical graduate would apply for a residency program in a field that interests them. Some examples include orthopaedic surgery, family medicine, radiology etc. The length of a residency program varies between different states and specialties ranging from 3 to 7 years.

For information on different residency programs take a look at the FRIEDA Online database:

https://freida.ama-assn.org/Freida/user/viewProgramSearch.do

Obtaining a residency position in the United States will involve three separate organizations

- ECFMG – acts as the Deans office for IMGs using ERAS and is responsible for sending supporting documents and other required information to ERAS
- ERAS – is where you complete residency applications which are then sent to residency program directors
- NRMP – uses an algorithm to match applicants and programs based upon both parties preferences

There are programs out there that do not participate in ERAS and/or NRMP and application to those will have to be done individually. However, the majority use ERAS and NRMP.

As an IMG, you must have a USMLE/ECFMG Identification number to participate in ERAS. To be eligible for NRMP you must have completed all the exams required for certification by the ECFMG. This means passing USMLE Step 1, 2CK, and 2CS and ensuring that results are available by the rank order deadline (see NRMP schedule). It is very important to note that each state and each program has its own specific requirements and that you should be familiar with them before applying.

This link below will take you to a list of residency programs (scroll to the bottom) that participate in ERAS for the next application cycle. The links will eventually lead you to the programs website where you can find specific requirements.

https://services.aamc.org/eras/erasstats/par/index.cfm
The next two links are schedules for both ERAS and NRMP just to give a rough idea on dates. Keep in mind that these dates are subject to change year after year.


If you decide to use the NRMP to match you with a residency program, you will have to accept a binding commitment stating that you will accept the position that the match results in. Basically this means that once you are matched to a program you can’t decide not to accept it. If you are not matched then you will be eligible to participate in the Supplemental Offer and Acceptance Program (SOAP) which fills positions offered by unfilled programs.

Right so I tried to summarize everything that I thought was important but if you do want to work in the United States it would be a good idea to have a solid read through both NRMP and ERAS websites.

Here are some useful links:

Roadmap to Residency 2nd edition - *https://members.aamc.org/eweb/upload/Roadmap%20to%20Residency%202ndEd.pdf*

Independent Applicants section of NRMP website(IMGS count as independent applicants) – *http://www.nrmp.org/residency/i-am-not-a-us-allopathic-senior/*

ECFMG ERAS support service is a very useful summary – *http://www.ecfmg.org/eras/applicants-index.html*

ERAS website – *https://www.aamc.org/students/medstudents/eras/


USMLE Step 3

The USMLE Step 3 is the final examination in the USMLE process and is required to obtain full licensure. It is normally taken after you are in postgraduate training. It examines you on your ability to practice
medicine unsupervised. It is a two day exam with the majority of questions being multiple choice. The second day includes a computer based case simulation. The content of this exam is a bit tricky to summarize so make sure that you take a look at the USMLE bulletin.

Essentially the questions are centered on physician tasks performed under different clinical encounter scenarios. So for example, in the multiple choice format you would be given a case where the patient comes in as an emergency and you would then be asked to choose the best tests, diagnosis, treatment etc. The computer simulation is similar. They will present you with a case and then you will have to provide care for the simulated patient. You can choose what information to get and how to treat and monitor the patient. The computer takes into account each step and changes the patient’s condition based on what you do.

You are eligible to take step 3 if:

- Obtain MD degree or equivalent from medical school outside US or Canada listed in the IMED
- Pass step 1, 2CK, and CS
- Obtain certification by ECFMG
- Meet step 3 requirements set by medical licensing authority to which you are applying

USMLE recommends that you have completed or are close to completing at least one postgraduate training year.


Obtaining a visa

If you are a foreign national who wishes to train in the United States you must obtain a visa that permits clinical training activities. At the moment, one can get either a J-1 visa or an H-1b visa.

The J-1 visa is a temporary non-immigrant visa reserved for educational training purposes. The ECFMG is authorized to sponsor physicians enrolled in education, training, or advanced research programs making this quite a commonly used visa by foreign national physicians. It is important to know a couple of things regarding this visa:

- Full time participation in a training program is required to maintain J-1 status
- All J-1 physicians sponsored by the ECFMG are subject to the two year home country physical presence requirement of the Immigration and Nationality Act. In fact you need a statement from your country of last legal permanent residence saying that you intend to return there in order to get a J-1 visa.

Under this visa you will be required to leave the United States and return home for at least 2 years once you are done your training program, after which you may return to the United States. Now, there are ways to waive the two year home presence requirement, one of which is to request a waiver based on the request of a State Public Health department. This is similar to Canada’s ‘return of service’ agreement(see Canada CaRMs). You must have an offer of full time employment at a health care facility
in a designated health care professional shortage area and must work there for a total of 40 hours a week for no less than 3 years. This process is called the Conrad 30 Waiver Program and you can find info on it here:

http://www.uscis.gov/working-united-states/students-and-exchange-visitors/conrad-30-waiver-program

For more information have a look at:


J-1 Visa official website - * http://j1visa.state.gov/basics/

Information about Waivers -* http://travel.state.gov/content/visas/english/study-exchange/student/residency-waiver/eligibility.html

An H1-b visa is a non-immigrant visa that allows United States employers to employ foreign workers in speciality occupations. This visa lasts for 3 years but can be extended to six. You will need to have your residency program sponsor you. There are a limited number of H1-b visas issued every year. Government information on the H1-b visa was actually pretty scarce but some other websites had some information worth looking at.

Official government site - http://travel.state.gov/visa/temp/types/types_1271.html


H1bvisa - http://www.h1bvisa.org/

The following blog is a great source of information about visas for IMG’s wishing to do residency in the United States. It takes a look at both the J-1 and the H-1b visas explaining their differences so I would definitely recommend reading it.

http://fmgvisas.blogspot.ca/2006/10/different-types-of-j1-visas.html
Australia

Competent Authority Pathway

The competent authority pathway is for International Medical Graduates (IMGs) who have completed training or assessment from authorities that the Australian Medical Council (AMC) have deemed competent. The General Medical Council (GMC) is one of these meaning that you are eligible for this pathway if you:

- Have completed the Professional and Linguistic Assessments Board test and completed Foundation Year 1 or 12 months supervised training approved by GMC in the UK
- Are a graduate of a medical course conducted by a medical school in the UK accredited by the GMC and completed Foundation Year 1 or 12 months supervised training approved by the GMC in the UK

This pathway is great because there are no exams involved! After your eligibility has been confirmed you can apply for limited registration with the Medical Board of Australia. There are two types of limited registration:

1. Limited registration postgraduate training or supervised practice
2. Limited registration for area of need – you will be working under supervision in an area of medical workforce shortage

Once you have attained limited registration you either work in general practice or hospital based practice. The AMC website has outlined the steps for each:


IMG’s who choose general practice tend to apply for limited registration for an area of need. Once they have completed a 12 month period of workplace-based performance assessment in a general practice setting, the accredited authority provides a letter of recommendation that you be issued with an AMC Certificate. This certificate allows you to apply for general registration with the AMC.

IMG’s who choose hospital based practice will usually choose either postgraduate training or area of need limited registration. The pathway is similar to the general practice pathway. You will be required to complete a 12 month workplace based performance assessment in a hospital based setting after which you are awarded with an AMC certificate. This certificate allows you to apply for general registration with the AMC. If you are pursuing specialist training then you will have your qualifications assessed by a specialist college upon completion of your program.

This is just one of the pathways that an IMG can become registered in Australia. There are other pathways for IMGs who already have specialist training and those who are not eligible for the competent authority pathway.
The AMC have published some IMG guides. You can find them here:


New Zealand

Competent Authority Pathway

Right so first things first! It would be a good idea to explain the difference between a general and vocational scope registration. Medical practitioners registered within a general scope are typically junior doctors and doctors undergoing vocational training. Vocational scope is a form of permanent specialist registration which allows you to work independently in New Zealand.

The pathway to working in New Zealand is fairly straightforward for graduates of UK medical schools who have completed their internship. As a graduate who is recognized by the GMC, you are eligible for the competent authority pathway. As a UK graduate you are eligible for registration in a provisional general scope if:

- Hold a primary medical degree from university medical school accredited by competent authority
- Have 1 year of general medical experience under jurisdiction of that same competent authority
- Satisfy their English language policy requirements
- Satisfy section 13 of health practitioners competence assurance act

If accepted, this pathway grants you a provisional general scope registration. A provisional general scope registration is kind of like a probation period before they give you a full general scope registration.

The conditions of a provisional general scope are:

- Must work in a position approved by the Medical Council of New Zealand
- Must work in an approved hospital, general practice, educational institution
- Must work under an approved supervisor

From here you will be given a full general scope license once you have:

- Satisfied provisional general scope conditions
- Been recommended for general scope by supervisor
- Completed 6 months working within a provisional general scope
- Received two consecutive satisfactory supervisor’s reports
Once you have your general scope registration you will be able to undergo vocational (specialist) training and from there achieve vocational registration. This means that you are recognized by the Medical Council of New Zealand as a specialist and can work independently in New Zealand.

You can apply for registration within a general scope once you have fulfilled the provisional general scope requirements. Most people with general are typically junior doctors and doctors undergoing vocational (specialist) training who have fulfilled the provisional requirements.

For more information on New Zealand have a look at the New Zealand Medical Council website.


**Hong Kong**

All international medical graduates (IMGs) who want to register as doctors in Hong Kong have to pass the Council Licensing Examinations and complete a period of internship training and assessment in hospitals approved by the Medical Council of Hong Kong (the council).

There are three council licensing examinations:

- **The Examination in Professional Knowledge** – a multiple choice question paper designed to test knowledge in basic sciences, medical ethics, community medicine, medicine, surgery, orthopaedic surgery, psychiatry, paediatrics and obstetrics & gynaecology.
- **The Proficiency Test in Medical English** – a written paper that ensures your English is adequate for professional purpose
- **The Clinical Examination** - designed to test your ability to apply professional knowledge to clinical problems in medicine, surgery, obstetrics & gynaecology and paediatrics.

Eligibility for these exams includes:

- Paying a prescribed fee
- Completed not less than 5 years full time medical training and is a holder of a medical qualification acceptable to the council
- These 5 years must include a period of internship as approved by the council
- Be of good character

Once you have completed the Licensing examination, candidates must go undergo a 12 month training and assessment in approved hospitals as interns. Once you have completed this you may apply to the council for full registration.
For more information have a look at the Medical Council of Hong Kong website page regarding IMGs.

*http://www.mchk.org.hk/licensing_exam/index_e.htm


Singapore

As a graduate of the University of Sheffield, becoming a registered doctor as an international medical graduate (IMG) in Singapore is a fairly straightforward process.

IMGs who hold a degree from a university listed in the Second Schedule of the Medical Registration Act, which the University of Sheffield is, are recognized by the Singapore Medical Council (SMC). This means that these IMGs are eligible to apply for conditional registration

A conditional registration allows an IMG to work in an SMC approved healthcare institution under the supervision of a fully registered medical practitioner. After a period of supervised practice and having obtained consistent good assessment reports on your performance; you can then apply for full registration.

A full registration with the SMC allows you to practice medicine independently in Singapore.

The periods of supervised practice during conditional registration can vary depending on whether you are Singaporean or a non-Singaporean with permanent residence status.

For details have a look at the Conditional Registration page on the SMC website:


For more information on how to become a registered doctor in Singapore, including the pathway for those who have completed specialist training, have a look at the SMC website.

*http://www.healthprofessionals.gov.sg/content/hprof/smc/en.html

**Note:** I understand that for those of you wanting to work in Singapore, this may not seem like a lot of information. This is all I could find on the internet so if anyone has anything to help expand/correct this page please let me know!
IMGs wishing to stay in the United Kingdom

Coming soon!