

In response to the suspension of the Step 2 Clinical Skills (CS) exam by the United States Medical Licensing Examination® (USMLE®) program, the Educational Commission for Foreign Medical Graduates (ECFMG®) has established new pathways that will allow qualified medical students and graduates to meet the clinical skills requirement for ECFMG Certification. These pathways are intended only for individuals who, among other requirements:

- do not have a passing performance on USMLE Step 2 CS that is valid for ECFMG Certification, and
- are not certified by ECFMG, and
- plan to enter a U.S. program of graduate medical education (GME) **in 2021**.

[Detailed information on the pathways](#) is available on the ECFMG website.

The eligibility requirements for [Pathways 3, 4, and 5](#) require that the applicant's medical school attest to the applicant's clinical skills. To satisfy this requirement, the applicant's medical school must follow the instructions below and complete and return the following form directly to ECFMG **no later than January 31, 2021**.

If the ECFMG pathway to which a medical school student/graduate applies has a clinical skills attestation requirement and the applicant's ECFMG Clinical Skills Attestation form is not received by ECFMG directly from the applicant's medical school by January 31, 2021 or the ECFMG Clinical Skills Attestation form received by ECFMG is not acceptable to ECFMG, the applicant's pathway application will be rejected, the applicant's application fee will not be refunded, and the applicant will not meet the requirements for ECFMG Certification or entry to U.S. GME for the 2021-2022 academic year.

Instructions

1. Assessment of Three Clinical Patient Encounters by Faculty. The applicant's clinical skills must be assessed by appropriate medical school faculty, and those evaluations must be reviewed by the medical school's dean.

For students who have not yet completed their clinical rotations, this should include three clinical patient encounters lasting 10 to 20 minutes each. At least one of the encounters must be on the general medical hospital service. Each patient should be new to the applicant, and each encounter must be observed directly by a different faculty member who routinely evaluates medical students. The observed encounters must take place at the applicant's medical school or affiliated clinical rotation site.

The [Mini-Clinical Evaluation Exercise \(Mini-CEX\)](#) form outlines the skills on which the applicant should be evaluated. To evaluate each encounter, the observing faculty member may use the Mini-CEX form or the institution's own form, if that form uses the same clinical skills as those outlined on the Mini-CEX form. Each completed Mini-CEX form should be signed by both the applicant and the observing faculty member.

For graduates and for students whose clinical rotations are complete, patient encounters that were evaluated previously are acceptable, provided they were assessed using the same clinical skills as those outlined on the Mini-CEX form.

2. Attestation of Clinical Skills and Submission of the Attestation Form. The medical school's dean, or the dean's designee, must review the completed Mini-CEX forms, or equivalent forms, and confirm that they indicate a satisfactory level of clinical skills. The Mini-CEX forms should not be submitted to ECFMG.

An authorized school official must then complete the following ECFMG Clinical Skills Attestation form. All information requested on the form must be provided. The official must sign and date the form and affix the school's seal. The signature must match the authorized signature on file with ECFMG. The form must be sent via e-mail by the school directly to ECFMG at msattestations@ecfm.org.

The following form must be received by ECFMG no later than January 31, 2021.



Please complete this form and return directly to ECFMG via e-mail at msattestations@ecfm.org.

1 USMLE/ECFMG ID	Applicant's USMLE® / ECFMG® Identification Number <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/>
2 Applicant's Name	Applicant's Last Name (Surname/Family Name) Generational Suffix (Jr, Sr, II, III, IV) Rest of Applicant's Name (First Name, Middle Name)
3 Medical School Information	Name of Medical School _____ Country of Medical School _____
4 Signature and Certification	<p>By my signature below, I certify that:</p> <ul style="list-style-type: none"> The information provided on this form is an accurate account of the above-named individual's official records as maintained in this medical school and is true and correct to my knowledge. The dean of this medical school or the dean's designee has received and reviewed three completed Mini-CEX forms (or their equivalents) evaluating clinical patient encounters performed by this applicant. Each of this applicant's Mini-CEX forms (or their equivalents) was completed by a different faculty member of the medical school or affiliated clinical rotation site, and these faculty members routinely assess medical student performance. The dean or dean's designee has confirmed that the three completed Mini-CEX evaluations (or their equivalents) indicate that the applicant has demonstrated a satisfactory level of clinical skills. I understand that this ECFMG Clinical Skills Attestation will be used to evaluate this individual's application to meet the clinical skills requirement for ECFMG Certification for the purpose of entering graduate medical education in the United States. I am authorized to certify this on behalf of this institution as reported to ECFMG on an ECFMG Authorized Signature List or other official notification from this institution. I have read the ECFMG Policies and Procedures Regarding Irregular Behavior and agree to abide by these policies and procedures. I understand that, as provided in the ECFMG Policies and Procedures Regarding Irregular Behavior, ECFMG may find that submission of falsified documents to ECFMG constitutes irregular behavior. <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 60%;"> <p>_____ Name of Authorized School Official</p> <p>_____ Title</p> <p>_____ Signature</p> <p>_____ E-mail Address</p> </div> <div style="width: 30%;"> <p>_____ Date of Signature (mm/dd/yyyy)</p> </div> <div style="width: 10%; border: 1px solid black; height: 150px; margin-left: 20px;"> <p style="text-align: center;">Seal</p> </div> </div>

This form must be received by ECFMG no later than January 31, 2021.