

MEDICAL BOARD STAFF REPORT

DATE REPORT ISSUED: July 14, 2008
ATTENTION: Board Members
DEPARTMENT: Medical Board of California, Licensing Program
SUBJECT: Recognition of International Medical School Programs
STAFF CONTACT: Deborah Pellegrini, Chief, Licensing Program

The issue before the Board on this agenda item is the recognition of international medical schools – medical schools not located in the United States or Canada. The Board has promulgated regulations regarding the recognition of international medical schools. That regulation, Section 1314.1 of Title 16 of the California Code of Regulations is attached to Agenda Item 7A.

Essentially, the Board’s regulation divides international medical schools into two types. The first type, commonly called “(a)(1)” schools in light of the Board’s regulation, are schools opened and operated by the national government for the purpose of training that country’s own citizens to practice medicine for the benefit of the country. California law does not require these schools to apply to the Board on their graduates’ behalf to become eligible to train in and become licensed in California. In most cases, the national government bears the cost of the education of the students.

The second type of international medical schools called “(a)(2)” schools are medical schools that are not operated by the national government for the purpose of training its own citizens to practice medicine in that country. These schools are generally for-profit operations that accept students from all parts of the world. After receiving their medical education, these students then leave to practice medicine elsewhere, including California. These schools, which must apply to the Board for recognition, rely on tuition paid by the students to operate; there is little if any government subsidy or control.

In the 1990s, several Eastern European countries began opening and operating "English-language" programs at government medical schools. These operate alongside the government schools’ preexisting medical education programs intended for their own citizens and taught in the native language. The English programs use the existing school’s building and other resources, such as bilingual faculty who have the time available to teach additional classes in English. In other words, an (a)(1) school now offers an (a)(2) style education, because the English-language program trains paying students for practice elsewhere. These “English-language” programs also permit students to complete a few or all of their clinical rotations in hospitals in the U.S. and other countries.

Since the “English-language” programs do not comport to Section (a)(1) they must apply to the Board for recognition utilizing the established procedures.

This agenda item contains two of these “English-language” programs for your approval.