On Monday January 11, 2016, the Accreditation Council for Graduate Medical Education (ACGME) released an e-communication to all residency and fellowship program directors announcing recognition and acceptance of COMLEX-USA for fellowship program applications for DOs. While COMLEX-USA has been accepted by the ACGME for residency and fellowship program applications, this acceptance now extends to DOs who are completing American Osteopathic Association-approved residency training programs that are in ACGME's "pre-accreditation status" category and are now applying to ACGME-accredited fellowship programs. It is important to note that DOs who complete ACGME-accredited residency programs have always and will continue to be eligible per the ACGME to apply to their fellowship programs with COMLEX-USA. The ACGME also points out in its e-communication that some subspecialties do not accept as prerequisite residency training for fellowship program applications anything other than completion of an ACGME-accredited residency program. (Specific eligibility criteria for every ACGME-accredited subspecialty can be reviewed on the ACGME’s website.)

The clarification on COMLEX-USA was important as stakeholders were confused about the new ACGME Common Program Requirements under the "exceptionally qualified candidate" provision that most subspecialties allow, which now specifies that residents can apply to ACGME fellowship programs after successfully completing Levels 1, 2 and 3 of the COMLEX-USA licensure examination series without requiring the applicant to also take USMLE.

The ACGME had reported that the USMLE requirement for the "exceptionally qualified candidate" provision was designed for international residency training circumstances and had never been intended to require USMLE for DOs.

Members of the osteopathic medical community, as well as ACGME residency and fellowship program directors, are enthusiastic about the ACGME's clarification about COMLEX-USA, with the news being shared widely.

Included as additional information here, in case you missed it, is the text from ACGME's e-communication to stakeholders:

"Single GME Accreditation System
The ACGME recognizes that during the transition to the single accreditation system, fellowship program directors may wish to consider applicants who have completed a program with a status of pre-accreditation. The following guidelines are provided to
assist program directors in determining whether an individual applicant is eligible for appointment:

Between July 1, 2015 and June 30, 2020, a resident who completes prerequisite training in an AOA-approved program with pre-accreditation status will be subject to the ACGME fellowship eligibility standards (per subspecialty) that were in effect June 30, 2013 or will be in effect July 1, 2016, whichever is less restrictive.

A number of Review Committees (see here for a list) allow programs to grant an exception to the ACGME Common Program Requirements related to eligibility for prior training that become effective on July 1, 2016. If an individual applies to a fellowship program based on the exceptionally qualified applicant provision detailed in the Common Program Requirements, and has successfully completed Levels 1, 2, and 3 of COMLEX-USA, he/she will not be required to take USMLE. If the program director determines that the applicant's qualifications are acceptable he/she may be appointed to the program. This applies only to graduates of programs with a status of pre-accreditation.

NOTE: Some subspecialties did not in 2013, and will not in 2016, accept as prerequisite training anything other than completion of an ACGME-accredited program.

*The eligibility criteria that were in effect as of June 30, 2013, that were/are in effect between June 30, 2013 and July 1, 2016, and that will be in effect as of July 1, 2016, for every ACGME-accredited subspecialty, are available on the Single GME Accreditation System section of the ACGME website."

January 18, 2016