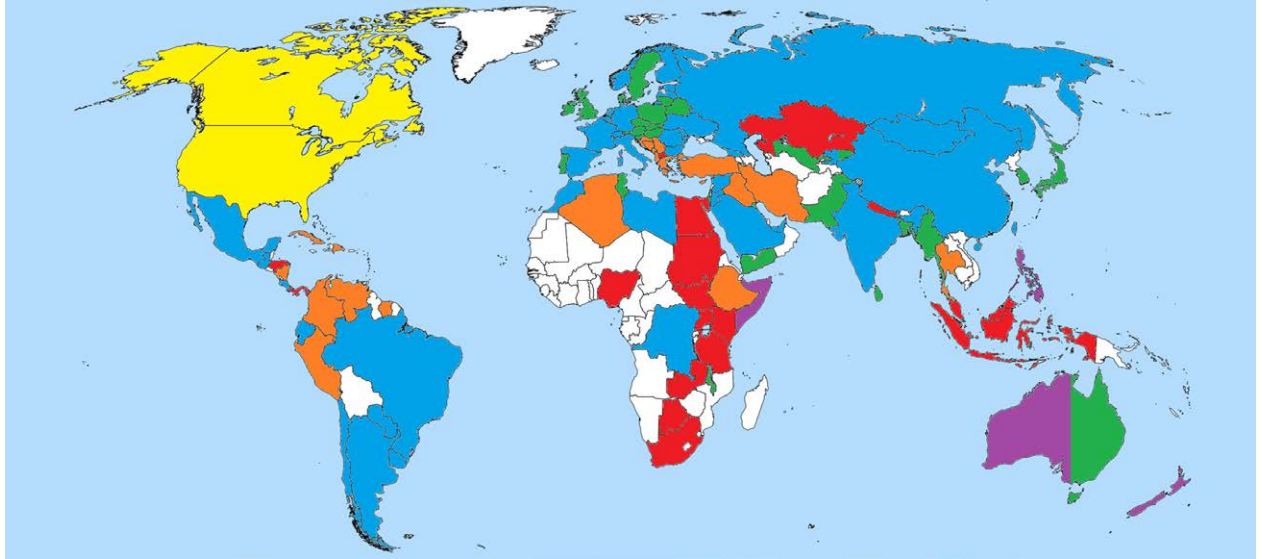


## Six Routes to Unsupervised Clinical Practice

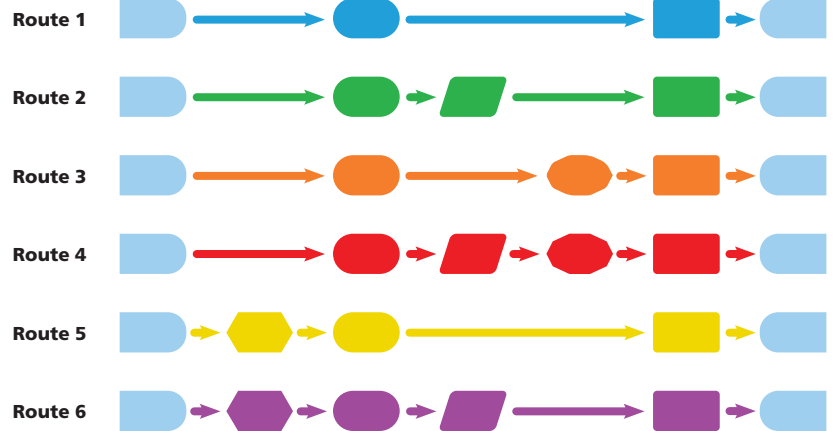
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Many medical students and faculty members do not question the formal pathways to becoming a practicing clinician since legal rules and regulations seem fixed; however, those who spend time in other countries discover that these pathways differ from country to country and that the standard pathway in their own country of origin does not apply universally. Based on earlier work distinguishing six pathways from secondary school to unsupervised clinical practice worldwide,<sup>1,2</sup> we have attempted to answer, for as many countries as possible, the following question: *Which of the 6 routes or pathways applies?* We asked faculty, administrators, and others active in medical education: *Which of these six routes is predominant in your country?* We received answers from experts in 106 countries, during and before 2019. We supplemented this information with analyses of relevant documents.



### Glossary

- Secondary school:** education that follows primary school and prepares learners for their vocation or tertiary education
- Separate college or university education:** 3 or 4 years of education, culminating in a baccalaureate degree
- Undergraduate medical education:** 4 to 7 years of education, culminating in a MBBS, MBChB, or MD degree
- Postgraduate internship:** 0.5 to 2 years (foundation or housemanship), often leading to licensure
- Mandatory service:** 1 or more practice years, often in rural or underserved areas, in exchange for waived tuition, sometimes after postgraduate medical education
- Postgraduate medical education or residency:** 2 to 6 years of training for registration or licensure as a specialist, including as a primary care physician
- Fellowship:** a training period in a medical subspecialty
- Unsupervised practice:** period during which the physician is allowed to work without supervision



From O'Brien B, Forrest K, Wijnen-Meijer M, ten Cate O.<sup>2</sup> Used with permission.

### Note

We thank our many informants, drawn from personal networks (including faculty members, administrators, and student colleagues), snowballing, conference participants, and contacts of the International Federation of Medical Students Association. We note that these informants may not have complete information and that many countries may have more than one model or are transitioning between models. When information from different sources was discrepant, we chose the current predominant model based on the most credible source. Our sources also indicated that in several countries the medical degree directly leads to unsupervised practice (not depicted).

### References:

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