



***THE PRE-ENTRY ASSESSMENT PROGRAM (PEAP)  
FOR RESIDENTS  
FINAL PEAP ASSESSMENT FORM***

The PEAP for **Residents** is an assessment process that evaluates certified international medical graduates to determine whether they can function at the level of Ontario medical school graduate and are qualified to enter an Ontario residency program. The majority of PEAP learners are on a work permit and are expected to return to their country of origin following completion of postgraduate training. The final PEAP assessment form must be used by programs to complete the assessment of the learner. The final PEAP assessment form is to be completed at the end of the scheduled PEAP period (4 – 12 weeks).

The PEAP process allows for appropriate, supervised clinical activity. A PEAP learner is assessed in a multidisciplinary environment where there is patient input on an ongoing basis. The PEAP must meet the following criteria:

- a) Be a minimum of four (4) weeks to a maximum of twelve (12) weeks in duration.
- b) Be completed at an Ontario medical school.
- c) Provide assessment of the learner's clinical skills, knowledge and judgment in the discipline in which the learner is seeking postgraduate education, as well as the learner's basic skills in internal medicine, obstetrics and gynecology, pediatrics, psychiatry and general surgery, appropriate for practice in the chosen discipline.
- d) Provide assessment in respect of whether the learner is:
  - Mentally competent to practice medicine;
  - Able to practice with decency, integrity, and honesty and in accordance with the law;
  - Possessing sufficient knowledge, skill, and judgment to engage in postgraduate medical training as authorized by the educational license; and
  - Able to communicate effectively and display an appropriate professional attitude.



**SECTION 1 [TO BE COMPLETED BY THE PROGRAM]**

**AS A REMINDER:** Enrolment in the PEAP can begin only after the College of Physicians and Surgeons of Ontario (CPSO) has issued a PEAP certificate of licensure and the learner has registered with the Postgraduate Medical Education (PGME) office. It is an offence under the Regulated Health Professions Act for a person to practice medicine in Ontario until they are registered and authorized by the CPSO.

Name of Learner:			
CPSO Registration #			
School of MD Program:		Graduation Year:	
Country of MD Program:			
Residency Program:			
Assessor/Supervisor's Name:			
Assessor/Supervisor's E-mail:			
Assessor/Supervisor's Phone #:			

**SECTION 2 [TO BE COMPLETED BY THE ASSESSOR/SUPERVISOR]**

**Location and Dates of the Pre-Entry Assessment Program:**

Residency Program:	Hospital Training Site:	PEAP Dates:	Duration (in weeks):	Name of Assessor/Supervisor:
<i>E.g. Family Medicine</i>	<i>Mount Sinai Hospital</i>	<i>[Start – End Date]</i>	<i>12 weeks</i>	<i>Dr. X</i>





		DD/MM/YYYY
<i>Name of Assessor/Supervisor</i>	<i>Signature of Assessor/Supervisor</i>	<i>Date</i>
		DD/MM/YYYY
<i>Name of Residency Program Director</i>	<i>Signature of Residency Program Director</i>	<i>Date</i>
		DD/MM/YYYY
<i>Name of Associate Dean of PGME</i>	<i>Signature of Associate Dean of PGME</i>	<i>Date</i>

**Note:** PGME will obtain the Associate Dean’s signature upon submission to [pgme.registration@utoronto.ca](mailto:pgme.registration@utoronto.ca)

**SECTION 3 [TO BE COMPLETED BY THE LEARNER]**

By providing my signature below, I attest that I have read this assessment. I acknowledge that PGME will forward the results of the Final PEAP Assessment to the CPSO.

Learner’s Comments:

	DD/MM/YYYY
<i>Signature of Learner</i>	<i>Date</i>

**Note:** If a learner is unsuccessful in the PEAP, they are not permitted to enter another PEAP in the same discipline in Ontario. An unsuccessful PEAP will be communicated to all Ontario medical schools.

Program must submit completed Final PEAP Assessment forms 5 business days before the end of the PEAP period to [pgme.registration@utoronto.ca](mailto:pgme.registration@utoronto.ca) once all required signatures are obtained.