

## The Pre-Entry Assessment Program (PEAP) for FELLOWS— Final Assessment Form

The Pre-Entry Assessment Program (PEAP) for Fellows is an assessment process that evaluates certified international medical specialists to determine whether they can function at the level of Ontario residents who have completed their primary certification and are qualified to enter an Ontario fellowship program.

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

- a) Be of four to twelve weeks in duration
- b) Be taken at a medical school in Ontario
- c) Provide assessment of the candidate's general knowledge and competency in the specialty in which s/he is certified, appropriate for the practice in the discipline in which the candidate is entering fellowship training,
- d) Provide assessment in respect of whether the candidate,
  1. Is mentally competent to practice medicine
  2. Has the ability to practice with decency, integrity and honesty and in accordance with the law,
  3. Has sufficient knowledge, skills and judgment to engage in the kind of medical practice authorized by the certificate, and
  4. Can communicate effectively and displays an appropriately professional attitude

Name of Candidate: \_\_\_\_\_

**IMPORTANT! DO NOT BEGIN PEAP WITHOUT A VALID CPSO REGISTRATION #**

CPSO Registration # \_\_\_\_\_

Specialty Certification/ Equivalent Certification In: \_\_\_\_\_ Year: \_\_\_\_\_

\_\_\_\_\_ Country: \_\_\_\_\_

Fellowship Program: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone: \_\_\_\_\_

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**To be completed by the Assessors**

Location and Dates of the Pre-Entry Assessment Program:

Department	Hospital	Dates:	Duration in Weeks

Cumulative Summary Observed Assessments						
	U	BE	ME	AE	O	Legend
Clinical Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<b>U = Unsatisfactory</b>
Technical Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<b>BE = Below Expectations</b>
Knowledge and Judgment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<b>ME = Meets Expectations</b>
Communication skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<b>AE = Above Expectations</b>
Professional attitudes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<b>O = Outstanding</b>

Has the assessment of the candidate included assessment of the candidate's general knowledge and competence appropriate for practice in the discipline in which the candidate is seeking fellowship education?  YES  NO

Has the assessment of the candidate included assessment of the candidate's ability to demonstrate receptive and productive fluency in one of the official languages of Ontario sufficient for safe and effective medical practice in the fellowship program?  YES  NO

Has the candidate successfully completed the Pre-Entry Assessment Program?  YES  NO

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Supervisor's comments:

  
  
  
  

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<b>Name of Supervisor</b>	<b>Signature of Supervisor*</b>	<b>Date</b>
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<b>Name of Divisional Program Director</b> <i>(where applicable)</i>	<b>Signature of Divisional Program Director*</b>	<b>Date</b>
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<b>Name of Program Director</b>	<b>Signature of Program Director*</b>	<b>Date</b>
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<b>Signature of Dean of Postgraduate Education*</b>	<b>Date</b>
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*\*Digital signature images (jpg, Word snippet, or pdf) can be inserted on the line above: Click on the icon and "Browse..." button to load the file)*

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**To be completed by the Candidate**

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By providing my signature below, I attest that I have read this assessment and understand that the Postgraduate Office will forward the results to the CPSO.

Candidate's comments:

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**Signature of Candidate**

**Date**

*\*Digital signature images (jpg, Word snippet, or pdf) can be inserted on the line above: Click on the icon and "Browse..." button to load the file)*

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**Important notes to the assessors and the candidate:**

- 1 If a candidate is unsuccessful in the PEAP, s/he is not permitted to enter another PEAP in the same discipline in Ontario. An unsuccessful PEAP result will be communicated to all Ontario medical schools.
- 2 Before the candidate begins his or her PEAP, he or she must have received from the College an educational certificate for PEAP or been advised by the College's Registration Department that a certificate has been issued. Upon successful completion of the PEAP, the CPSO will be responsible to convert the educational certificate for PEAP into a full certificate of registration for Postgraduate Education to coincide with commencement of the fellowship program.

It is an offence under the Regulated Health Professions Act for a person to practice medicine in Ontario until such time as the person is registered and authorized to practice medicine by the College of Physicians and Surgeons of Ontario.

**Completed Assessment Report must be forwarded to:**

Postgraduate Medical Education  
500 University Avenue, Suite 602  
Toronto, Ontario, M5G 1V7  
Tel: (416) 978-6976