Reviewer’s report

Title: International Medical Graduates (IMGs) Needs Assessment Study: Comparison Between Current IMG Trainees and Program Directors

Version: 1 Date: 2 January 2008

Reviewer: Gerald P Whelan

Reviewer’s report:

This paper, from the University of Toronto, attempts to identify the areas of most concern to International Medical Graduates (IMGs) and Program Directors at that institution. Although assessments in this area have been done and reported in the past, the entry of IMGs into Canadian GME appears to be at a slightly new juncture and it is always worthwhile to reassess these issues, given that migration of physicians is an ongoing and dynamic phenomena. So although the question being raised is not new, the answers may reflect a currency that justifies their being shared.

The methods of gathering and analyzing data appear to be appropriate but this reviewer has a few questions. The total number of program directors in the institution is listed as 73 which seems high or one institution but may be accurate. If this included assistant or associate program directors that would probably be fine but if it includes faculty who do not have program directorship responsibilities the data could be less meaningful.

Table 1 presents a summary of responses but it would appear that the two cohorts received slightly different questionnaires. Data reflecting major concern is presented for responses from program directors regarding basic clinical knowledge and professionalism but it appears that IMGs were not queried on those topics. Conversely, several other work-related issues including harassment and discrimination apparently were not posed to program directors. The authors should explain this discrepancy or at least their rationale for the use of apparently different instruments. It would be of interest to this reviewer to see IMGs perceptions of their own basic clinical knowledge and professionalism. If they rank them as relatively less critical issues, that would strengthen the concern of program directors in these areas.

Probably the most useful finding in the paper is the fact that IMGs rate macro or systems issues at the very top of their concerns. This presents a very clear challenge to program directors and others involved in integrating IMGs into this or any other complex healthcare system.

Several times throughout the manuscript the authors make reference to a “horizontal curriculum” without defining their specific use of that terminology. Clarification or an alternative terminology (perhaps longitudinal?) would be helpful.
The authors claim that the results show that IMGs and program directors believe there is a need for additional training. Although this is a relatively safe inference, it is difficult to state that the "results show." Stating that the results suggest a need might be a more accurate representation.

Although it would obviously be in the realm of speculation, some additional discussion as to why there is a discrepancy between the top ranked issues between the cohorts could be illuminating and would move the paper beyond simple reporting of data.

This is a reasonably well-written paper of moderate interest to those responsible for integrating IMGs into Canadian GME. It must be noted that it was based on data from a single institution and may not be as generalizable to other institutions or GME outside of Canada. It may be of some help in designing proposed curriculum at other institutions. The paper could benefit from some of the suggested minor essential revisions or clarifications noted above before publication.

What next?: Accept after minor essential revisions

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests