

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 301  
(A-24)

Introduced by: Medical Student Section

Subject: Fairness for International Medical Students

Referred to: Reference Committee C

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1 Whereas, international students comprise over 10% of US graduate students but only 0.6% of  
2 US medical students, indicating that the US recruits globally for academia, research, and other  
3 highly educated professions, but not for medicine<sup>1-3</sup>; and  
4

5 Whereas, only 35% of medical schools consider international applicants, only 17% of whom are  
6 admitted compared to 38% of domestic applicants<sup>4-7</sup>; and  
7

8 Whereas, international medical students are ineligible for public loans, may be ineligible for  
9 medical school scholarships, require a US cosigner for private loans, and may be required to  
10 deposit up to four years of tuition upfront into an escrow account prior to matriculation<sup>7-10</sup>; and  
11

12 Whereas, many common national medical student scholarships, including the AMA Physicians  
13 of Tomorrow scholarship, the Tylenol Future Care scholarship, and the National Medical  
14 Fellowships awards, are restricted to domestic students only<sup>11-13</sup>; and  
15

16 Whereas, international medical students offer valuable diversity of thought, cultural  
17 perspectives, and unique life experiences that enrich medical schools, complement efforts to  
18 improve physician workforce diversity, address physician shortages, and allow the US to attract  
19 and retain the best and brightest future doctors from around the world<sup>9,14</sup>; therefore be it  
20

21 RESOLVED, that our American Medical Association encourage additional medical schools to  
22 consider applications from and to admit international students to their programs alongside  
23 domestic students (New HOD Policy); and be it further  
24

25 RESOLVED, that our AMA amend policy H-255.968 "Advance Tuition Payment Requirements  
26 for International Students Enrolled in US Medical Schools" by addition and deletion to read as  
27 follows;  
28

29 Advance Tuition Payment Requirements for International Students  
30 Enrolled in US Medical Schools H-255.968

31 Our AMA:

- 32 1. supports the autonomy of medical schools to determine optimal tuition  
33 requirements for international students;
- 34 2. encourages medical schools and undergraduate institutions to fully  
35 inform international students interested in medical education in the US of  
36 the limited options available to them for tuition assistance;
- 37 3. supports the Association of American Medical Colleges (AAMC) in its  
38 efforts to increase transparency in the medical school application process  
39 for international students by including school policy on tuition requirements  
40 in the Medical School Admission Requirements (MSAR); and

- 1           4. supports efforts to re-evaluate and minimize the use of pre-payment  
2           requirements specific to international medical students; and  
3           5. encourages medical schools to explore alternative means of  
4           prepayment, such as a letter of credit, for four years for covering the costs  
5           of medical school. (Modify Current HOD Policy); and be it further  
6

7 RESOLVED, that our AMA advocate for increased scholarship and funding opportunities for  
8 international students accepted to or currently attending United States medical schools.  
9 (Directive to Take Action)  
10

Fiscal Note: Minimal - less than \$1,000

Received: 3/28/2024

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14. Retaining U.S. International Student Graduates Could Help Fill Millions of Critical Job Openings. FWD.us. Accessed August 30, 2022. <https://www.fwd.us/news/us-international-students>

#### RELEVANT AMA POLICY

##### **D-255.980 Impact of Immigration Barriers on the Nation's Health**

1. Our AMA recognizes the valuable contributions and affirms our support of international medical students and international medical graduates and their participation in U.S. medical schools, residency and fellowship training programs and in the practice of medicine.
2. Our AMA will oppose laws and regulations that would broadly deny entry or re-entry to the United States of persons who currently have legal visas, including permanent resident status (green card) and student visas, based on their country of origin and/or religion.
3. Our AMA will oppose policies that would broadly deny issuance of legal visas to persons based on their country of origin and/or religion.
4. Our AMA will advocate for the immediate reinstatement of premium processing of H-1B visas for physicians and trainees to prevent any negative impact on patient care.
5. Our AMA will advocate for the timely processing of visas for all physicians, including residents, fellows, and physicians in independent practice.

6. Our AMA will work with other stakeholders to study the current impact of immigration reform efforts on residency and fellowship programs, physician supply, and timely access of patients to health care throughout the U.S. [Alt. Res. 308, A-17; Modified: CME Rep. 01, A-18; Reaffirmation: A-19; Reaffirmed: CME Rep. 4, A-21; Reaffirmed: Res. 234, A-22; Reaffirmed: Res. 210, A-23]

**H-295.888 Progress in Medical Education: the Medical School Admission Process**

1. Our AMA encourages: (A) research on ways to reliably evaluate the personal qualities (such as empathy, integrity, commitment to service) of applicants to medical school and support broad dissemination of the results. Medical schools should be encouraged to give significant weight to these qualities in the admissions process; (B) premedical coursework in the humanities, behavioral sciences, and social sciences, as a way to ensure a broadly-educated applicant pool; and (C) dissemination of models that allow medical schools to meet their goals related to diversity in the context of existing legal requirements, for example through outreach to elementary schools, high schools, and colleges.

2. Our AMA: (A) will continue to work with the Association of American Medical Colleges (AAMC) and other relevant organizations to encourage improved assessment of personal qualities in the recruitment process for medical school applicants including types of information to be solicited in applications to medical school; (B) will work with the AAMC and other relevant organizations to explore the range of measures used to assess personal qualities among applicants, including those used by related fields; (C) encourages the development of innovative methodologies to assess personal qualities among medical school applicants; (D) will work with medical schools and other relevant stakeholder groups to review the ways in which medical schools communicate the importance of personal qualities among applicants, including how and when specified personal qualities will be assessed in the admissions process; (E) encourages continued research on the personal qualities most pertinent to success as a medical student and as a physician to assist admissions committees to adequately assess applicants; and (F) encourages continued research on the factors that impact negatively on humanistic and empathetic traits of medical students during medical school. [CME Rep. 8, I-99; Reaffirmed: CME Rep. 2, A-09; Appended: CME Rep. 3, A-11; Reaffirmed: CME Rep. 1, A-21]