



A Joint Program of the Federation of State Medical Boards of the United States, Inc.,  
and the National Board of Medical Examiners®



# 2012

## Bulletin of Information

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## OVERVIEW

### INTRODUCTION

The United States Medical Licensing Examination® (USMLE®) is a three-step examination for medical licensure in the United States and is sponsored by the Federation of State Medical Boards (FSMB) and the National Board of Medical Examiners® (NBME®).

The Composite Committee, appointed by the FSMB and NBME, establishes policies for the USMLE program. Membership includes representatives from the FSMB, NBME, Educational Commission for Foreign Medical Graduates (ECFMG®), and the American public.

**Note: You must become familiar with the information in this *Bulletin* if you are an applicant with an eligibility period in 2012. If your eligibility period extends into 2013 and you test in 2013, you must become familiar with and will be subject to the policies and procedures detailed in the 2013 *Bulletin of Information*. Eligibility periods are explained on pages 17–18. To apply for the USMLE, you must contact the appropriate *registration entity* (see page 38).**

Changes in the USMLE program may occur after the release of this *Bulletin*. If changes occur, information will be posted at the USMLE website. You must obtain the most recent information to understand current USMLE rules. If you are unable to access updated USMLE information via the Internet, contact the USMLE Secretariat in writing (see page 39) to obtain updated information.

<http://www.usmle.org>  
Visit the USMLE website for  
up-to-date information.

### PURPOSE OF THE USMLE

In the United States and its territories ("United States" or "US"), the individual medical licensing authorities ("state medical boards") of the various jurisdictions grant a license to practice medicine. Each medical licensing authority sets its own rules and regulations

and requires passing an examination that demonstrates qualification for licensure. Results of the USMLE are reported to these authorities for use in granting the initial license to practice medicine. The USMLE provides them with a common evaluation system for applicants for medical licensure.

The USMLE assesses a physician's ability to apply knowledge, concepts, and principles, and to demonstrate fundamental patient-centered skills, that are important in health and disease and that constitute the basis of safe and effective patient care. Each of the three Steps complements the others; no Step can stand alone in the assessment of readiness for medical licensure. Because individual medical licensing authorities make decisions regarding use of USMLE results, you should contact the jurisdiction where you intend to apply for licensure to obtain complete information. Also, the FSMB can provide general information on medical licensure.

#### USMLE Mission Statement

The United States Medical Licensing Examination (USMLE) program supports medical licensing authorities in the United States through its leadership in the development, delivery, and continual improvement of high quality assessments across the continuum of physicians' preparation for practice.

#### Goals:

- To provide to licensing authorities meaningful information from assessments of physician characteristics—including medical knowledge, skills, values, and attitudes—that are important to the provision of safe and effective patient care.
- To engage medical educators and their institutions, licensing authority members, and practicing clinicians in the design and development of these assessments.
- To assure fairness and equity to physicians through the highest professional testing standards.
- To continue to develop and improve assessments for licensure with the intent of assessing physicians more accurately and comprehensively.

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## OVERVIEW

### THE THREE STEPS OF THE USMLE

**Step 1** assesses whether you understand and can apply important concepts of the sciences basic to the practice of medicine, with special emphasis on principles and mechanisms underlying health, disease, and modes of therapy. Step 1 ensures mastery of not only the sciences that provide a foundation for the safe and competent practice of medicine in the present, but also the scientific principles required for the maintenance of competence through lifelong learning.

**Step 2** assesses whether you can apply medical knowledge, skills, and understanding of clinical science essential for the provision of patient care under supervision, with emphasis on health promotion and disease prevention. Step 2 ensures that due attention is devoted to principles of clinical sciences and basic patient-centered skills that provide the foundation for the safe and competent practice of medicine.

**Step 3** assesses whether you can apply medical knowledge and understanding of biomedical and clinical science essential for the unsupervised practice of medicine, with emphasis on patient management in ambulatory settings. Step 3 provides a final assessment of physicians assuming independent responsibility for delivering general medical care.

### EXAMINATION COMMITTEES

Examination committees composed of medical educators and clinicians prepare the examination materials. Committee members broadly represent the teaching, practicing, and licensing communities across the United States. At least two committees critically appraise each test item or case, revising or discarding any materials that are in doubt.

### OWNERSHIP AND COPYRIGHT OF EXAMINATION MATERIALS

The examination materials used in the USMLE are copyrighted. If you reproduce and/or distribute any examination materials, by any means, including memorizing and reconstructing them, without explicit written permission from the USMLE program, you are in violation of the rights of the owners. In addition to actions described on pages 35–36, every legal means available to protect USMLE copyrighted materials and secure redress against those who violate copyright law may be pursued.

### COMPUTER-BASED TESTING (CBT)

Parts of the USMLE are administered by computer. Prometric provides scheduling and test centers for the computer-based components of the USMLE. Step 1 and Step 2 Clinical Knowledge (CK) are given around the world at Prometric Test Centers (PTCs). Step 3 is given at PTCs in the United States and its territories only.

### USMLE STEP 2 CLINICAL SKILLS (CS)

The clinical skills examination is a separately administered component of Step 2 and is referred to as Step 2 Clinical Skills, or Step 2 CS. The computer-based, multiple-choice component of Step 2 is referred to as Step 2 Clinical Knowledge, or Step 2 CK.

USMLE Step 2 CS is administered at five regional test centers in the United States.

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## OVERVIEW

### THE COMPREHENSIVE REVIEW OF USMLE

#### Background

The USMLE examination program was designed in the late 1980s and introduced during the period 1992 to 1994. The program replaced the NBME Part Examination program and the Federation Licensing Examination (FLEX) program, which were the widely accepted medical licensing examination programs at that time. While the content and design for the USMLE Step examinations have been continuously reviewed and refreshed, there had been no in-depth review of overall program design and structure since the sequence was first conceived. In 2004, the USMLE Composite Committee called for a comprehensive review of the entire USMLE program to determine if the mission and purpose of USMLE were effectively and efficiently supported by the current design, structure, and format of the USMLE.

The primary responsibility for this review was given to the Committee to Evaluate the USMLE Program (CEUP), reflecting perspectives of students, residents, fellows, Deans and Associate Deans, basic science and clinical faculty, international medical graduates, state medical boards, practicing physicians, and the public.

To inform CEUP, staff members used surveys and focus groups to gather information about the impact and relevance of the USMLE program from a wide range of individuals and organizations, including representatives from the medical licensing authorities, the US undergraduate and graduate education communities, and institutional and national leaders from the international medical education community.

#### Current Status

The CEUP report and the implications of its recommendations were carefully reviewed by the staff and governing bodies of ECFMG, FSMB, and NBME. In 2009, the proposal for changes to the USMLE was approved. Planning, research and development efforts have been underway for the last three years. Initial modifications are being introduced into upcoming exams. Up-to-date information on the current status of this process is posted at the USMLE website.



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## ELIGIBILITY

### STEP 1, STEP 2 CK, AND STEP 2 CS

To be eligible, you must be in one of the following categories at the time you apply **and** on your test day:

- a medical student officially enrolled in, or a graduate of, a US or Canadian medical school program leading to the MD degree that is accredited by the Liaison Committee on Medical Education (LCME),
- a medical student officially enrolled in, or a graduate of, a US medical school leading to the DO degree that is accredited by the American Osteopathic Association (AOA), or
- a medical student officially enrolled in, or a graduate of, a medical school outside the United States and Canada who meets the eligibility criteria of the ECFMG.

If you are dismissed or withdraw from medical school, you are not eligible for USMLE, even if you are appealing the school's decision to dismiss you or otherwise contesting your status.

### STEP 3

To be eligible for Step 3, prior to submitting your application, you must:

- obtain the MD degree (or its equivalent) or the DO degree,
- pass Step 1, Step 2 CK, and, if required based upon the rules referenced below, Step 2 CS,
- obtain certification by the ECFMG or successfully complete a "Fifth Pathway" program (see **Special Announcement Regarding Fifth Pathway Certificates and Step 3** on page 5) if you are a graduate of a medical school outside the United States and Canada, and
- meet the Step 3 requirements set by the medical licensing authority to which you are applying.

**Note:** A physician who received his or her basic medical degree or qualification from a medical school outside the United States and Canada may be eligible for certification by the ECFMG if the medical school and graduation year are listed in the *International Medical Education Directory* (IMED) of the Foundation for Advancement of International Medical Education and Research (FAIMER®). This applies to citizens of the United States who have completed their medical education in schools outside the United States and Canada but not to foreign nationals who have graduated from medical schools in the United States and Canada. Specific eligibility criteria for students and graduates of medical schools outside the United States and Canada to take Step 1 and Step 2 are described in the *Information Booklet* provided by the ECFMG.

Applications and other requests for services will not be processed if it is determined that doing so would be considered violative of any applicable federal laws or regulations.

**Note:** The USMLE program recommends that for Step 3 eligibility, licensing authorities require the completion, or near completion, of at least one postgraduate training year in a program of graduate medical education accredited by the Accreditation Council for Graduate Medical Education (ACGME) or the AOA. You should contact the FSMB for state-specific eligibility requirements for Step 3.

### WHO IS REQUIRED TO TAKE STEP 2 CS?

In order to be eligible to register for USMLE Step 3, graduates of LCME-accredited medical school programs or AOA-accredited medical schools are required to have passed Step 1 and Step 2. Such individuals must have passed Step 2 CS as part of the examination requirements for Step 3 if they: (a) have graduated from medical school in 2005 or later, or (b) graduated from medical school prior to 2005 but did not pass the CK component of Step 2 taken on or before June 30, 2005.

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## ELIGIBILITY

**Note: After June 30, 2012, all graduates of LCME- and AOA-accredited medical schools will be required to take and pass Step 2 CS in order to be eligible for Step 3.**

### **Special Announcement Regarding Fifth Pathway Certificates and Step 3**

Currently, the USMLE program accepts either a valid Standard ECFMG Certificate or a valid Fifth Pathway certificate (issued through December 31, 2009) from international medical graduates for purposes of meeting Step 3 eligibility requirements. The governing committee of the USMLE program and the USMLE parent organizations (the FSMB and NBME) have determined that **the USMLE program will cease acceptance of Fifth Pathway certificates for the purpose of meeting Step 3 eligibility requirements, effective January 1, 2017. Individuals who hold valid Fifth Pathway certificates, and are otherwise eligible, may use their Fifth Pathway certificates to meet Step 3 eligibility requirements, and may apply for Step 3, through December 31, 2016.**

Individuals holding Fifth Pathway certificates that are not accepted by the USMLE program for purposes of meeting Step 3 eligibility will be required to obtain ECFMG certification in order to be eligible for Step 3.

If you hold a valid Fifth Pathway certificate but have not completed the full USMLE sequence, you should remain mindful of the December 31, 2016 deadline, after which use of your Fifth Pathway certificate to meet Step 3 eligibility requirements will not be permitted.

Step 2 CS replaced the Clinical Skills Assessment (CSA®) formerly administered by the ECFMG. Effective June 14, 2004, Step 2 CS became a requirement for ECFMG certification of international medical graduates who have not passed the CSA. To register for Step 3, ECFMG certificate holders must have taken and passed either the CSA or the Step 2 CS.

In order to register for Step 3, eligible Fifth Pathway participants must have taken and passed either the CSA or Step 2 CS (see **Special Announcement**).

Individuals who have passed Step 2 prior to the implementation of Step 2 CS are not permitted to take Step 2 CK, except under the specific exceptions to the retake policy approved by the Composite Committee (see page 7), but are permitted to take Step 2 CS, provided they meet all other eligibility requirements.

Individuals who are not required to pass Step 2 CS for Step 3 eligibility but elect to take Step 2 CS and fail the examination are not eligible for Step 3 until such time as the individual's Step 2 CS performance of record (i.e., most recent performance) is a pass and the individual meets all other Step 3 requirements.

### **GRADUATES OF UNACCREDITED MEDICAL SCHOOLS IN THE UNITED STATES AND CANADA**

If you are eligible for licensure by a US medical licensing authority but are **not** in one of the eligibility categories listed on page 4, you may take the USMLE only upon specific request by that medical licensing authority. A licensing authority may sponsor you to take Step 1 and Step 2, followed by Step 3 if Step 1 and Step 2 are passed, if all the following conditions apply to you:

- You are a graduate of an unaccredited medical school program in the United States or Canada;
- You are an applicant for initial medical licensure in the jurisdiction of the sponsoring licensing authority; and
- The sponsoring licensing authority certifies that you have met all of the requirements for licensure in the jurisdiction except for the examination requirement.

If these conditions apply to you, the medical licensing authority should submit the request to sponsor you to the USMLE Secretariat at the address shown on page 39 in advance of your application for each Step.

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## ELIGIBILITY

### SEQUENCE OF STEPS

If eligibility requirements are met (see page 4), you may take Step 1, Step 2 CK, and Step 2 CS in any sequence.

### NUMBER OF ATTEMPTS ALLOWED TO COMPLETE ALL STEPS AND TIME LIMITS

#### Multiple Attempts

The USMLE Program is introducing a limit on the total number of times an examinee can take the same Step or Step Component. When this limit takes effect, an examinee will be ineligible to take a Step or Step Component if the examinee has made **six or more prior attempts** to pass that Step or Step Component, including incomplete attempts.

The effective date for the six-attempt limit depends upon whether an examinee has taken **any** Step or Step Component (including incomplete attempts) before January 1, 2012.

#### Examinees who have NOT taken any Step or Step Component before January 1, 2012

If you have **not** taken any Step or Step Component before January 1, 2012, the six-attempt limit will go into effect for all exam applications that you submit on or after January 1, 2012.

#### Examinees who have taken any Step or Step Component before January 1, 2012

If you have taken **any** Step or Step Component (including incomplete attempts) before January 1, 2012, the six-attempt limit will go into effect for all exam applications that you submit on or after January 1, 2013. After that date, all attempts at a Step or Step Component will be counted toward the limit, regardless of when the exams were taken.

The USMLE program recommends to medical licensing authorities that they:

- ❑ require that the dates of passing the Step 1, Step 2, and Step 3 examinations occur within a seven-year period; and

- ❑ allow no more than six attempts to pass each Step or Step Component without demonstration of additional educational experience acceptable to the medical licensing authority.

For purposes of medical licensure in the United States, any time limit to complete the USMLE is established by the state medical boards. Many require completion of the full USMLE sequence within seven years from the date the first Step or Step Component is passed or, in some cases, from the date of the first attempt at any Step or Step Component. While medical schools may require students to pass one or more Steps for advancement and/or graduation, you should understand the implications for licensure. General information regarding state-specific requirements for licensure can be obtained from the FSMB ([www.fsmb.org](http://www.fsmb.org)). For definitive information, contact the licensing authority in the jurisdiction in which you intend to seek licensure.

#### Special Notice for MD/PhD Candidates

The common pathway for MD/PhD students involves completing the first two years of medical school and then moving to graduate school studies and research for a three- or four-year period. Following completion of PhD course work and all or most of their research projects, these students return to complete their two clinical years, thus completing the medical degree in seven to nine years after first matriculating.

The USMLE program recognizes that the recommended seven-year time limit may pose problems for medical licensure for some candidates with a combined degree (i.e., MD/PhD). For this reason, the USMLE program recommends to licensing jurisdictions that they should consider allowing exceptions to the seven-year limit for MD/PhD candidates who meet certain narrow requirements. The recommended requirements are as follows:

1. The candidate has obtained both degrees from an institution or program accredited by the LCME and regional university accrediting body.
2. The PhD studies should be in a field of biological sciences tested in the Step 1 content. These fields include, but are not necessarily limited to,



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## ELIGIBILITY

anatomy, biochemistry, physiology, microbiology, pharmacology, pathology, genetics, neuroscience, and molecular biology. Fields explicitly not included are business, economics, ethics, history, and other fields not directly related to biological science.

3. A candidate seeking an exception to the seven-year rule should be required to present a verifiable and rational explanation for the fact that he or she was unable to meet the seven-year limit. Although these explanations will vary considerably, each licensing jurisdiction will need to decide on its own which explanation justifies an exception.

Students who pursue both degrees should understand that while many states' regulations provide specific exceptions to the seven-year rule for dual-degree candidates, others do not. Students pursuing a dual degree are advised to check the state-specific requirements for licensure listed by the FSMB.

### Special Notice for International Medical Students and Graduates

ECFMG policy requires that applicants pass those USMLE Steps or Step Components required for ECFMG certification within a seven-year period. (You should refer to ECFMG's *Information Booklet* for complete details, as some exceptions may apply.) This policy applies only to ECFMG certification. The USMLE program recommends, although not all jurisdictions impose, a seven-year limit for completion of the three-Step USMLE program. You should contact the FSMB or the medical licensing authority of the jurisdiction where you plan to apply for licensure for state-specific requirements.

### RETAKES

For exam applications submitted on or after January 1, 2012, the following rules apply to all Steps and Step Components. You may take the same examination no more than three times within a 12-month period. Your fourth and subsequent attempts must be at least 12 months after your first attempt at that exam and at least six months after your most recent attempt

at that exam. Attempts at that examination (complete and incomplete) prior to January 1, 2012 will be counted in determining whether these rules apply.

When you reapply, your exam eligibility period will be adjusted, if necessary, to comply with these rules.

If you pass a Step or Step Component, you are not allowed to retake it, except to comply with certain state board requirements which have been previously approved by USMLE governance. For example, you may retake a passed Step to comply with the time limit of a medical licensing authority for the completion of all Steps or a requirement imposed by another authority recognized by the USMLE program for this purpose. The medical licensing authority must provide information showing that you are an applicant for licensure in that jurisdiction; have fulfilled all requirements for licensure in that jurisdiction; are eligible for licensure except for the out-of-date examination; and have completed the full USMLE sequence, including Step 3. Information regarding retakes allowed to comply with a requirement imposed by a recognized authority other than a medical licensing authority is provided at the time of exam application using ECFMG's Interactive Web Applications (IWA).

If you are repeating a Step or Step Component because of a time limit, you may apply to retake the examination only after the applicable time limit has expired. An exception to the policy of requiring the time limit to expire before applying to retake a previously passed Step or Step Component can be granted if, at the time of application and testing:

- you are currently enrolled in an LCME- or AOA-accredited medical school program leading to the MD or DO degree;
- you have previously passed Step 1 and/or Step 2 but have not passed Step 3;
- you are expected to graduate from the medical school program six or more years after the date you first passed Step 1 and/or Step 2; and
- you are otherwise eligible to retake the examination.

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## ELIGIBILITY

### **OFFICIAL PERFORMANCE OF RECORD FOR EXAMINEES RETAKING A PREVIOUSLY PASSED STEP**

In order to meet the examination requirements for Step 3 eligibility, you must achieve a passing performance on the *most recent administration* of the examinations intended to meet those requirements.

If you have not yet passed Step 3 and wish to retake a previously passed Step 1 or Step 2 examination in order to meet a time limit imposed by a recognized authority other than a medical licensing authority, you should understand the implications for Step 3 eligibility of a failing performance on a retake. Specifically, if a failing performance on a retake is the most recent administration of that examination, that failing score will preclude Step 3 eligibility.

### **FORMERLY ADMINISTERED EXAMINATIONS**

The NBME certifying examinations, Part I, Part II, and Part III, and the Federation Licensing Examination (FLEX) Components 1 and 2 are no longer administered. Use of the former NBME Parts

or FLEX Components to fulfill eligibility requirements for Step 3 is no longer accepted. If you have passed all or a portion of these examinations and have never been granted a medical license by a US medical licensing authority, you may take any Step(s) for which you are otherwise eligible. If you have been granted a medical license by a US medical licensing authority you are not eligible to take USMLE.

### **CHANGE IN ELIGIBILITY STATUS**

If your eligibility for a Step or Step Component changes after you submit your application but before your scheduled test date(s), you must notify your registration entity promptly. Failure to notify your registration entity that you may no longer be eligible to take the examination may result in a determination of irregular behavior (see pages 35–36). If you take a Step or Step Component for which you are not eligible, scores for that examination may not be reported or, if previously reported, may be revoked, and/or you may be subject to sanctions for Irregular Behavior.

# EXAMINATION CONTENT

## STEP 1

Step 1 includes test items in the following content areas:

- anatomy,
- behavioral sciences,
- biochemistry,
- microbiology,
- pathology,
- pharmacology,
- physiology,
- interdisciplinary topics, such as nutrition, genetics, and aging.

Step 1 is a broadly based, integrated examination. Test items commonly require you to perform one or more of the following tasks:

- interpret graphic and tabular material,
- identify gross and microscopic pathologic and normal specimens,
- apply basic science knowledge to clinical problems.

Step 1 classifies test items along two dimensions: system and process, as shown in Table 1.

**<http://www.usmle.org>**  
Sample Step 1 test materials and further information on Step 1 test content are available at the USMLE website.

**Table 1: USMLE Step 1 Specifications\***

### System\*\*

25%–35%	General principles
65%–75%	Individual organ systems <ul style="list-style-type: none"><li>• hematopoietic/lymphoreticular</li><li>• nervous/special senses</li><li>• skin/connective tissue</li><li>• musculoskeletal</li><li>• respiratory</li><li>• cardiovascular</li><li>• gastrointestinal</li><li>• renal/urinary</li><li>• reproductive</li><li>• endocrine</li><li>• immune</li></ul>

### Process

20%–30%	Normal structure and function
40%–50%	Abnormal processes
15%–25%	Principles of therapeutics
10%–20%	Psychosocial, cultural, occupational, and environmental considerations

\* Percentages are subject to change at any time. See the USMLE website for the most up-to-date information.

\*\* The general principles category includes test items concerning those normal and abnormal processes that are not limited to specific organ systems. Categories for individual organ systems include test items concerning those normal and abnormal processes that are system specific.

# EXAMINATION CONTENT

## STEP 2 CLINICAL KNOWLEDGE (CK)

Step 2 CK includes test items in the following content areas:

- internal medicine,
- obstetrics and gynecology,
- pediatrics,
- preventive medicine,
- psychiatry,
- surgery,
- other areas relevant to provision of care under supervision.

Most Step 2 CK test items describe clinical situations and require that you provide one or more of the following:

- a diagnosis,
- a prognosis,
- an indication of underlying mechanisms of disease,
- the next step in medical care, including preventive measures.

Step 2 CK is a broadly based, integrated examination. It frequently requires interpretation of tables and laboratory data, imaging studies, photographs of gross and microscopic pathologic specimens, and results of other diagnostic studies. Step 2 CK classifies test items along two dimensions: disease category and physician task, as shown in Table 2.

Please note that much of the content that addresses normal growth and development and general principles of care is also related to the individual organ systems categories, so that the number of questions that deal solely with normal growth and development and general principles of care is relatively small.

<http://www.usmle.org>

Sample Step 2 CK test materials and further information on Step 2 CK test content are available at the USMLE website.

**Table 2: USMLE Step 2 CK Specifications\***

### Normal Conditions and Disease Categories

- Normal growth and development and general principles of care
- Individual organ systems or types of disorders
  - immunologic disorders
  - diseases of the blood and blood-forming organs
  - mental disorders
  - diseases of the nervous system and special senses
  - cardiovascular disorders
  - diseases of the respiratory system
  - nutritional and digestive disorders
  - gynecologic disorders
  - renal, urinary, and male reproductive systems
  - disorders of pregnancy, childbirth, and the puerperium
  - disorders of the skin and subcutaneous tissue
  - diseases of the musculoskeletal system and connective tissue
  - endocrine and metabolic disorders

### Physician Task

- 15%–20% Promoting preventive medicine and health maintenance
- 20%–35% Understanding mechanisms of disease
- 25%–40% Establishing a diagnosis
- 15%–25% Applying principles of management

\* Percentages are subject to change at any time. See the USMLE website for the most up-to-date information.

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## EXAMINATION CONTENT

### STEP 2 CLINICAL SKILLS (CS)

Step 2 CS assesses whether you can demonstrate the fundamental clinical skills essential for safe and effective patient care under supervision. There are three subcomponents of Step 2 CS (see Table 3): Integrated Clinical Encounter (ICE), Communication and Interpersonal Skills (CIS), and Spoken English Proficiency (SEP).

**Table 3: The Subcomponents of Step 2 CS**

#### **Integrated Clinical Encounter (ICE)**

- Data gathering – patient information collected by history taking and physical examination
- Documentation – completion of a patient note summarizing the findings of the patient encounter, diagnostic impression, and initial patient workup

#### **Communication and Interpersonal Skills (CIS)**

- Questioning skills
- Information-sharing skills
- Professional manner and rapport

#### **Spoken English Proficiency (SEP)**

- Clarity of spoken English communication within the context of the doctor-patient encounter

Step 2 CS uses standardized patients, i.e., people trained to portray real patients. You are expected to treat the standardized patient as a “real” patient, and accomplish all elements of a physician/patient encounter, assuming responsibility for the immediate post-visit needs of the patient, with the expectation that you may see the patient again. This means you should not defer decision-making to others (such as a supervising physician).

The elements of the history and physical examination necessary for each case will be determined by the nature of the patient's problems. The cases you will

see will not require you to do a complete history and a complete physical examination. In fact, if you attempt to do so, you may run out of time, and will not be able to fully address the emotional and communication needs of the patient.

You will be expected to communicate with the standardized patients in a professional and empathetic manner. As you would when encountering real patients, you should answer any questions they may have, tell them what diagnoses you are considering, and advise them on what tests and studies you will order to clarify their diagnoses.

After each interaction with a patient, you will complete a patient note. You will record pertinent history and physical examination findings, list diagnostic impressions, and outline plans for further evaluation, if necessary.

The cases cover common and important situations that a physician is likely to encounter in common medical practice in clinics, doctors’ offices, emergency departments, and hospital settings in the United States. The cases that make up each administration of the Step 2 CS examination are based upon an examination blueprint. An examination blueprint defines the requirements for each examination, regardless of where and when it is administered. The sample of cases selected for each examination reflects a balance of cases that is fair and equitable across all examinees. While the set of cases administered on a given day will differ from the set of cases administered on another day, each set of cases is comparable.

The intent is to ensure that examinees encounter a broad spectrum of cases reflecting common and important symptoms and diagnoses. The criteria that are used to define the blueprint and create individual examinations focus primarily on presenting complaints and conditions. Presentation categories include, but are not limited to, cardiovascular, constitutional, gastrointestinal, genitourinary, musculoskeletal, neurological, psychiatric, respiratory, and women's health. Examinees will see cases from some, but not all, of these categories. The selection of cases is also guided by specifications relating to acuity, age, gender, and type of physical findings presented in each case.



# EXAMINATION CONTENT

## Planned Enhancements to Step 2 CS

In 2010, pilot tests of changes to communication skills assessment and changes to the patient note were successful, with further testing planned for the second half of 2011. If further testing in 2011 is also successful, changes will be implemented in the Step 2 CS examination in mid-2012. Confirmation of any change will be posted to the USMLE website sometime after November 2011.

Potential changes to the patient note include asking examinees to document their analysis of a patient's possible diagnoses, citing the evidence obtained from the history and physical examination that supports (or refutes) different diagnostic possibilities.

Changes to communication skills assessment are targeted to enhance the nature and difficulty of challenges posed by the standardized patient (SP). Examinees will be assessed based on their ability to tailor their questions and responses to the specific needs of the case presented and on their ability to react to the entire range of the patient's concerns, thus mirroring desirable physician behaviors. More information about the enhancements to the assessment of communication skills is available in the Fall/Winter 2010 NBME Examiner, available on the Publications page of the NBME website, [www.nbme.org](http://www.nbme.org).

<http://www.usmle.org>  
Further information on Step 2 CS  
is available at the USMLE website.

## STEP 3

Step 3 is organized along two principal dimensions: clinical encounter frame and physician task (see Table 4). Step 3 content reflects a data-based model of generalist medical practice in the United States.

Encounter frames capture the essential features of circumstances surrounding physicians' clinical activity with patients. They range from encounters with patients seen for the first time for nonemergency

**Table 4: USMLE Step 3 Specifications\***

### Clinical Encounter Frame

20%–30%	Initial care
50%–60%	Continued care
15%–25%	Emergency care

### Physician Task

8%–12%	Obtaining history and performing physical examination
8%–12%	Using laboratory and diagnostic studies
8%–12%	Formulating most likely diagnosis
8%–12%	Evaluating severity of patient's problems
8%–12%	Applying scientific concepts and mechanisms of disease
45%–55%	Managing the patient <ul style="list-style-type: none"><li>• health maintenance</li><li>• clinical intervention</li><li>• clinical therapeutics</li><li>• legal and ethical issues</li></ul>

\* Percentages are subject to change at any time. See the USMLE website for the most up-to-date information.

problems, to encounters with regular patients seen in the context of continued care, to patient encounters in (life-threatening) emergency situations. Encounters occur in clinics, offices, skilled nursing care facilities, hospitals, emergency departments, and on the telephone. Each test item in an encounter frame also represents one of the six physician tasks. For example, initial care encounters emphasize taking a history and performing a physical examination. In contrast, continued care encounters emphasize decisions regarding prognosis and management.

High-frequency, high-impact diseases also have an effect on how the content of Step 3 is organized. Clinician experts assign clinical problems related to these diseases to individual clinical encounter frames to represent their occurrence in generalist practice.

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## EXAMINATION CONTENT

<http://www.usmle.org>

Sample Step 3 test materials and further information on Step 3 test content are available from the FSMB and at the USMLE website.

### ***Primum*<sup>®</sup> Computer-Based Case Simulations (CCS)**

Step 3 examinees test using two formats: multiple-choice questions and *Primum* computer-based case simulations (CCS), a testing format that allows you to provide care for a simulated patient. You decide which diagnostic information to obtain and how to treat and monitor the patient's progress. The computer records each step you take in caring for the patient and scores your overall performance. This format permits assessment of clinical decision-making skills in a more realistic and integrated manner than other available formats.

In *Primum* CCS, you may request information from the history and physical examination; order laboratory studies, procedures, and consultants; and start medications and other therapies. Any of the thousands of possible entries that you type on the "order sheet" are processed and verified by the "clerk." When you have confirmed that there is nothing further you wish to do, you decide when to reevaluate the patient by advancing simulated time. As time passes, the patient's condition changes based on the underlying problem and your interventions; results of tests are reported, and results of interventions must be monitored. You suspend the movement of simulated time as you consider next steps. While you cannot go back in time, you can change your orders to reflect your updated management plan.

The patient's chart contains, in addition to the order sheet, the reports resulting from your orders. By selecting the appropriate chart tabs, you can review vital signs, progress notes, patient updates, and test results. You may care for and move the patient among the office, home, emergency department, intensive care unit, and hospital ward.

The cases used in the CCS portion of the Step 3 examination are based upon a CCS examination blueprint. The blueprint defines the requirements for CCS examination forms. The CCS blueprint is used to construct CCS examination forms focusing primarily on presenting symptoms and presenting locations. Presenting symptoms relate to the Step 3 Problem/Disease List and are associated with the central nervous system, eye/ear/nose/mouth/throat, respiratory system, circulatory system, digestive system, behavioral/emotional disorders, musculoskeletal system, skin/subcutaneous tissue, endocrine/nutrition/metabolic disorders, kidneys/urinary tract, reproductive system, pregnancy/childbirth, neonate/childhood illnesses, blood and blood-forming organs, infectious/parasitic diseases, injuries/wound/toxic effects/burns, and health maintenance issues. Presenting locations include the outpatient office, emergency department, inpatient unit, intensive care unit, and the patient's home.

You will see cases related to some, but not all, of these problem/disease and location categories. The intent is to ensure that all examinees encounter a broad range of cases reflecting common and important symptoms and diagnoses. The selection of cases is also guided by specifications relating to age and gender. Each CCS examination form is structured to reflect a balance of cases that is fair and equitable for all examinees.

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## PREPARING FOR THE TEST

### MATERIALS AVAILABLE THROUGH USMLE

The best preparation for the USMLE is a general, thorough review of the content reflected in the examination descriptions on pages 9–13. You should also review further information on the examination content and test formats available on the USMLE website and run the sample test materials available on the USMLE website. Self-assessment information and materials are also available at [www.nbme.org](http://www.nbme.org).

### MATERIALS AVAILABLE THROUGH THIRD PARTIES

There are no test preparation courses affiliated with or sanctioned by the USMLE program. Information on such courses is not available from the ECFMG, FSMB, NBME, USMLE Secretariat, or medical licensing authorities.

Test preparation courses and materials are available from individuals and companies not associated with USMLE. It is unlawful for any test preparation service or program to use, disclose, distribute, or otherwise provide access to questions or answers from actual USMLE exams. If you are involved with any enterprise that disseminates USMLE content, you should be aware of the consequences to you, regardless of whether your exposure to USMLE content was advertent or inadvertent: **If there is evidence that you enrolled, participated in, or used any test preparation program or service that distributes, provides access to, or uses USMLE questions or answers, or provides a forum for others to share such information, your registration and/or testing may be canceled, your scores on the USMLE may be withheld or canceled, and you may be subject to further sanctions.**

### TEST LENGTHS AND FORMATS

- ❑ Step 1 has 322 multiple-choice test items, divided into seven 60-minute blocks, administered in one eight-hour testing session.
- ❑ Step 2 CK has 346 multiple-choice test items, divided into eight 60-minute blocks, administered in one nine-hour testing session.
- ❑ Step 2 CS has 12 patient cases. You will have 15 minutes for each patient encounter and 10 minutes to record each patient note. If you do not use the entire 15 minutes for the patient encounter, the remaining time will be added to the time you have to record the patient note. The testing session is approximately eight hours.
- ❑ Step 3 has 480 multiple-choice test items, divided into blocks of 35 to 50 items. You will have 45 to 60 minutes to complete each of these blocks. The number of computer-based case simulations (see page 12) may vary, but will generally be in the range of 9 to 12 cases. There may be one or two cases in each block and the maximum time allowed per block will be in the range of 22 to 25 minutes.

For Step 1, Step 2 CK, and Step 3 multiple-choice sections, during the defined time to complete the items in each block, you may answer the items in any order (with the exception of Sequential Item Sets; see the USMLE website for further information), review your responses, and change answers. After you exit the block, or when time expires, you can no longer review test items or change answers.

Step 2 CS cases and Step 3 case simulations must be taken in the order presented. After you exit the case or session, or when time expires, you can no longer review test items or cases, change answers, or collect additional information.

<http://www.usmle.org>

**Note:** The test descriptions provided here, including test length and number of test items or cases, may be changed at any time. Notice of any changes will be posted at the USMLE website.

### PRACTICING WITH THE SOFTWARE

For Steps 1, 2 CK, and 3, you should acquaint yourself with the test software well before your test date(s). Practice time is not available on the test day, and test center staff are not authorized to provide instruction on use of the software. A brief tutorial on

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## PREPARING FOR THE TEST

the test day provides a review of the test software, including checking the sound with the audio headphones, navigation tools and examination format, prior to beginning the test. It does not provide an opportunity to practice. Step 3 examinees should review the *Primum* CCS orientation materials and practice with all of the sample cases well in advance of the testing day to have a thorough understanding of how the software works.

Sample test materials to practice with the software (both multiple-choice questions and *Primum* CCS cases) are available at the USMLE website.

All examinees taking the Step 2 CS examination are required to type the patient note. Examinees are not permitted to handwrite the note, unless technical difficulties on the test day make the patient note-typing program unavailable. A simulation of the computerized patient note program, which examinees may use to practice typing the patient note, is available at the USMLE website.

### PRACTICE AT PROMETRIC TEST CENTERS

If you wish to experience some of the conditions of test administration for Step 1, Step 2 CK, or Step 3, you may schedule time to review sample test materials at a Prometric Test Center for a fee. This material is shorter than the actual USMLE examinations and is based on older software and content. Instructions regarding how to register for a practice session are available on the USMLE website.

**Note:** If you register for the practice session, you will be issued a separate Scheduling Permit specifically for the practice session. You must have this Permit before you can contact Prometric to schedule the practice session. You should allow seven business days for issuance of your practice session Scheduling Permit.

**Note:** Changes to the Practice Sessions may occur in 2012. Please monitor the USMLE website for updates.

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## APPLYING FOR THE TEST AND SCHEDULING YOUR TEST DATE

### APPLICATION MATERIALS

If you meet the eligibility requirements on page 4, you can apply for Step 1, Step 2 CK and CS, or Step 3. Applications are available from the appropriate registration entity. You must use current application materials to apply.

**Note:** See page 38 for information on how to contact your registration entity to apply for a Step or Step Component.

### APPLYING FOR STEP 1, STEP 2 CK, AND STEP 2 CS

Students and graduates of LCME-accredited programs and AOA-accredited medical schools should apply for Step 1, Step 2 CK, and Step 2 CS by following the instructions at the NBME website (<http://www.nbme.org>). Review and follow the application instructions, complete your application, and submit it to the NBME.

Students and graduates of medical schools outside the United States and Canada should apply for Step 1, Step 2 CK, and Step 2 CS by following the instructions at the ECFMG website (<http://www.ecfm.org>). Review and follow the application instructions, complete your application, and submit it to the ECFMG.

If you are dismissed or withdraw from medical school, you are not eligible for USMLE, even if you are appealing the school's decision to dismiss you.

### APPLYING FOR STEP 3

To request information on Step 3 eligibility requirements and application procedures, follow the instructions at the FSMB website (<http://www.fsmb.org>), or contact the FSMB or the medical licensing authority to which you wish to apply.

Application procedures for Step 3 vary among jurisdictions. You should begin inquiries at least three

months in advance of the dates on which you expect to take the test.

After you obtain application materials, review and follow the application instructions to complete your application and submit it to the medical licensing authority or the FSMB as directed in the instructions.

### EXAMINEES WHO REQUIRE PERSONAL ITEMS IN THE TESTING ROOM

As more fully explained on page 23, unauthorized possession of personal items while you are in the secure areas of the testing center is prohibited. However, in certain limited circumstances, exceptions to this policy may be made for medical reasons, provided that permission is granted in advance of test administration. If you believe that you have a medical condition that requires you to use medication, an external appliance, or electronic device in the secure areas of the test center, please submit a written request via e-mail to [PIE@nbme.org](mailto:PIE@nbme.org), via fax to 215-590-9422, or via mail to Personal Item Exception Coordinator, 3750 Market Street, Philadelphia, PA 19104 at least four weeks prior to your anticipated test date. You will need to explain the necessity for the exception and provide documentation from your medical professional substantiating your need to use the item(s) during test administration. Professional documentation must be typewritten on the professional's letterhead. Examples of appliances and devices to which this policy applies include insulin pumps, inhalers, medications, TENS units, breast pumps, hearing aids, electronic or digitally amplified or otherwise enhanced nonstandard stethoscopes (for Step 2 CS), wheelchairs, canes, crutches, and casts. This list is not exhaustive; if you are unsure whether you should request an exception, please contact the Personal Item Exception Coordinator via e-mail at [PIE@nbme.org](mailto:PIE@nbme.org).

You are not required to obtain advance permission to wear eyeglasses or contact lenses during testing, or to consume food or medication on authorized breaks. All personal items, including those permitted as an exception under this policy, are subject to inspection



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## APPLYING FOR THE TEST AND SCHEDULING YOUR TEST DATE

at the test center. If you bring an item, including an appliance or device, to your test administration without obtaining permission in advance, you may not be permitted to test, you may be required to relinquish the item, you may be investigated for irregular behavior, and/or your score may be held until you provide adequate documentation from your medical professional.

### EXAMINEES WITH DISABILITIES REQUESTING TEST ACCOMMODATIONS

The USMLE program provides reasonable accommodations for examinees with disabilities who are covered under the Americans with Disabilities Act as amended (ADA). If you are a disabled individual covered under the ADA and require test accommodations, the following guidelines apply to you:

- You must obtain information regarding procedures and documentation requirements in advance of applying for each Step or Step Component. This information is available at the USMLE website.
- Your application and your request for accommodations and accompanying documentation must be submitted at the same time to the appropriate address. All documentation received with your request will be audited, and you will be contacted if additional information is needed. Processing may take up to sixty days from the date sufficient documentation of the impact of your reported impairment is received.
- When test accommodations are granted for USMLE Steps and Step Components, score reports and transcripts may include an annotation that an accommodation was granted. Score recipients who inquire about the annotation will be provided with information about the nature of the accommodation only.

### OBTAINING AN ELIGIBILITY PERIOD FOR STEP 1 AND STEP 2 CK

When applying for Step 1 or Step 2 CK, you must select a three-month period, such as January-February-March or February-March-April, during which you prefer to take the examination. A Scheduling Permit with instructions for making an appointment at a Prometric Test Center will be issued to you after your registration entity processes your application and determines your eligibility. The Scheduling Permit specifies the three-month eligibility period during which you must complete the examination. During peak periods, allow up to approximately four weeks for processing of your application. After obtaining your Scheduling Permit, you are able to contact Prometric immediately to schedule a test date.

Prometric schedules testing appointments for Steps 1 and 2 CK up to six months in advance. If your application is submitted more than six months in advance of your requested eligibility period, it will be processed, but your Scheduling Permit will be issued no more than six months before your assigned eligibility period begins.

If you are unable to take the test within your eligibility period, contact your registration entity to inquire about a **one-time** contiguous three-month eligibility period extension. A fee is charged for this service. Visit your registration entity's website for more information. If you do not take the test within your original or extended eligibility period and wish to take it in the future, you must reapply by submitting a new application and fee(s).

**<http://www.prometric.com>**

Use the Prometric website for up-to-date information on the locations of Prometric Test Centers and to schedule an appointment.

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## APPLYING FOR THE TEST AND SCHEDULING YOUR TEST DATE

**Note:** USMLE examinations are available year-round and you may select the testing time period that is most appropriate for you. You may reschedule your testing appointment, if you decide not to test on the scheduled date (see pages 20–21). Except in the case of USMLE Step 2 CS, you may, for a small fee, extend your testing eligibility period if you need to defer your exam (see page 17). **Accordingly, you should not feel compelled to test on a particular day when ill, when under unusual stresses of personal life, when feeling unprepared for the examination, or for other reasons.**

### OBTAINING AN ELIGIBILITY PERIOD FOR STEP 2 CS

Step 2 CS is offered regularly throughout the year; however, there may be occasional, brief periods when all centers are closed. In planning the timing of your application, see below for information on how Step 2 CS eligibility periods are assigned. You should be aware that demand for test dates/centers at certain times during the year may exceed the number of testing spaces available.

When you apply for Step 2 CS, you are assigned a 12-month eligibility period that begins when processing of your application is completed. A Scheduling Permit with instructions for making a testing appointment will be issued to you.

Your eligibility period will be listed on your Scheduling Permit. You must take the exam during your eligibility period. You can schedule a testing appointment for any available date in your eligibility period. Once your eligibility period is assigned, it cannot be changed. If you do not take the exam within your eligibility period, you must reapply to take the exam, including payment of the examination fee. Although you cannot change your assigned eligibility period, you can reschedule a scheduled testing appointment within your eligibility period (see **Rescheduling**). A fee is charged if a change is made during the 14 days before your scheduled appointment.

### OBTAINING AN ELIGIBILITY PERIOD FOR STEP 3

Step 3 eligibility periods are assigned immediately once your application has been processed and approved. Time for processing will vary depending on the particular medical licensing authority and the

volume of applications. Check the FSMB website for more detailed information on processing times. Upon complete processing of your Step 3 application and confirmation of eligibility, a Scheduling Permit will be issued to you with instructions for making an appointment at a Prometric Test Center. On receipt of your Scheduling Permit, you should contact Prometric immediately to schedule the test dates. The Scheduling Permit specifies the eligibility period (beginning immediately and extending for approximately 90 calendar days) during which you must complete the examination. If you are unable to take the test within your eligibility period, contact the FSMB to inquire about a **one-time** contiguous three-month eligibility period extension. A fee is charged for this service, and some restrictions may apply. Visit the FSMB website ([www.fsmb.org](http://www.fsmb.org)) for more detailed information. If you do not take the test within your original or extended eligibility period and wish to take it in the future, you must reapply by submitting a new application and fee(s). The USMLE Step 3 fee is nonrefundable and nontransferable from one eligibility period to another or from one application to another.

### SCHEDULING STEP 1, STEP 2 CK, AND STEP 3

#### Testing Regions

Step 1 and Step 2 CK are administered in the United States and Canada and in more than 50 other countries. International testing locations are distributed among defined international testing regions. There is an additional international test delivery surcharge.

#### Your Scheduling Permit

Your Scheduling Permit will be issued to you when the processing of your application is complete. You should verify the information on your Scheduling

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## APPLYING FOR THE TEST AND SCHEDULING YOUR TEST DATE

Permit before scheduling your appointment. Your Scheduling Permit includes the following:

- your name (see **Important Note**, page 25),
- the examination for which you registered,
- your eligibility period,
- your testing region,
- your Scheduling Number,
- your Candidate Identification Number (CIN).

**Note: You will not be able to take the test if you do not bring your Scheduling Permit to the test center.**

**Note:** Your Scheduling Number is needed when you contact Prometric to schedule test dates. It differs from your **Candidate Identification Number (CIN)**, which is your private key, and is needed to test. Prometric does not have access to your CIN.

### Scheduling Test Dates

When applying for USMLE Steps 1, 2 CK, and 3 or scheduling test dates, please keep the following in mind:

- You must have your Scheduling Permit before you contact Prometric to schedule a testing appointment. Appointments are assigned on a "first-come, first-served" basis; therefore, you should contact Prometric to schedule as soon as possible after you receive your Scheduling Permit.
- You may take the test on any day that it is offered during your assigned eligibility period, provided that there is space at the Prometric Test Center you choose.
- Prometric Test Centers are closed on major local holidays.
- USMLE Steps 1, 2 CK, and 3 are not available during the first 14 days of January.

- The busiest testing times in the Prometric testing network in the United States and Canada are May through July and November through December.
- Some, but not all, Prometric Test Centers are open on weekend days. When you schedule your Step 3 test dates, the two days on which you take the test must be consecutive, unless the center is closed on the day that follows your first day of testing. In that event, Prometric will assign you to the next day the center is open for your second day of testing. In all other cases, you must take Step 3 on two consecutive days at the same test center.

Your Scheduling Permit includes specific information for contacting Prometric to schedule your test date(s) at the test center of your choice.

**<http://www.prometric.com>**

Use the Prometric website for up-to-date information on the locations of Prometric Test Centers and to schedule your test.

You will be required to provide information found only on your Scheduling Permit. When you schedule your appointment, you will receive the following specific information:

- the confirmed test day(s), date(s), and time;
- the address and telephone number of the Prometric Test Center where you will test; and
- your Prometric Confirmation Number(s).

After you schedule your testing appointment, you can print a confirmation of your appointment from the Prometric website. Scheduling a testing appointment for a specific date at a Prometric Test Center is not a guarantee that the scheduled test time or location will remain available. The Prometric Test Center at which you are scheduled may become unavailable after you have scheduled your appointment. In that event, Prometric will attempt to notify you in advance of your scheduled testing appointment and to schedule you for a different time and/or center. However, on rare occasions, rescheduling your appointment for a different time or center may occur at the last minute.

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## APPLYING FOR THE TEST AND SCHEDULING YOUR TEST DATE

To avoid losses you would incur as a result, you should try to maintain flexibility in exam scheduling and in your travel arrangements. You are encouraged to confirm your testing appointment one week prior to your test date. Your registration entity cannot refund expenses incurred as a result of center closures due to inclement weather or natural disasters.

### Rescheduling Test Dates

If you are unable to keep your testing appointment on the scheduled date(s) or at the scheduled location, you may change your date(s) or center by following the instructions on your Scheduling Permit for contacting Prometric. You will need to provide your Prometric Confirmation Number when you cancel and reschedule.

A fee may be charged if you change your appointment, depending upon how much notice you provide when making the change. If you reschedule, your rescheduled test date(s) must fall within your assigned eligibility period.

### SCHEDULING STEP 2 CS

Step 2 CS is administered at five Clinical Skills Evaluation Centers: Atlanta, Georgia; Chicago, Illinois; Houston, Texas; Los Angeles, California; and Philadelphia, Pennsylvania.

### Your Scheduling Permit

After your registration for Step 2 CS is complete, your registration entity will issue you a Scheduling Permit. The Scheduling Permit contains the following:

- your name (see **Important Note**, page 25),
- your USMLE identification number, and
- your eligibility period.

### Scheduling Test Dates

Follow the instructions on your Scheduling Permit to schedule your test date(s) at the Clinical Skills Evaluation Center of your choice. To browse available test dates in your eligibility period at each of the five centers, you can access Step 2 CS Calendar and

Scheduling from the website of your registration entity. Before accessing Step 2 CS Calendar and Scheduling, you should review the important information in **How Test Dates Become Available**.

A schedule for reporting Step 2 CS results is available at the USMLE website. Please refer to this calendar **before scheduling a testing appointment if you need your results by a specific deadline**.

After you confirm your testing appointment, you will be able to print a confirmation notice from the scheduling system. The confirmation notice includes your scheduled test date, arrival time, center, and other important information. If you lose the confirmation notice, you can reprint it by accessing Step 2 CS Calendar and Scheduling at the website of your registration entity.

Your registration entity cannot refund expenses incurred as a result of center closures due to inclement weather or natural disasters.

### *How Test Dates Become Available*

- Testing appointments are available on a “first-come, first-served” basis (although some scheduling restrictions may be imposed). It is possible that you will not be able to obtain a testing appointment for the first time period and/or center you prefer.
- The availability of testing appointments will change frequently as a result of examinee scheduling and rescheduling.
- It is possible that testing appointments will become available for a time period and/or center that you prefer after you have scheduled an appointment for a different time period and/or center. In this event, you can change your scheduled test date and/or center. See page 21 for rescheduling fees.
- Although you can monitor available test dates for your preferred time period and center, availability is not guaranteed. You must take the exam during your eligibility period;

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## APPLYING FOR THE TEST AND SCHEDULING YOUR TEST DATE

if the exam is not taken during the eligibility period, you must reapply and pay the full exam fee in order to take the examination.

### Rescheduling Test Dates

If you have a scheduled testing appointment and are unable to take the exam on your scheduled test date or at your scheduled center, you can cancel your scheduled testing appointment and reschedule for a different date and/or center, subject to availability. A fee may be charged for this service depending on how much notice you provide when canceling your appointment. To cancel or reschedule, follow the instructions on your Scheduling Permit for accessing Step 2 CS Calendar and Scheduling.

Before canceling and/or rescheduling a scheduled testing appointment, you will have the opportunity to review available test dates at all testing locations. Your rescheduled test date must fall within your assigned eligibility period. There is no limit on the number of times you can cancel and reschedule your testing appointment. However, a rescheduling fee is charged for each rescheduled testing appointment that does not meet the notice requirements described below. **Any** change to a scheduled testing appointment constitutes rescheduling.

You can cancel and reschedule at the same time, or you can cancel and reschedule later. You can cancel and/or reschedule at any time through the end of the day before your scheduled test date. However, no canceling is allowed beginning at 12:00 AM, Eastern Time in the United States, on the scheduled test date. If you do not cancel and you miss your scheduled testing appointment, you can reschedule within your assigned eligibility period once it is confirmed that you did not take the test.

**IMPORTANT NOTE: If you cancel without rescheduling or miss your scheduled testing appointment, there is no guarantee that testing appointments during your eligibility period will be available at a given test center, or at any test center, when you attempt to reschedule. If you do not reschedule within your eligibility period, you must submit a new application and payment in order to take the exam.**

There is no fee to **cancel** a scheduled testing appointment; the fee, if applicable, is due at the time of **rescheduling**. However, the date that you **cancel** your appointment, using Eastern Time in the United States, will determine whether you pay a rescheduling fee and the amount of this fee.

- If you cancel more than 14 calendar days before (but not including) your scheduled test date, there is **no fee** to reschedule.
- If you cancel during the 14-day period before (but not including) your scheduled test date, your fee will be **\$150** when you reschedule.
- If you miss your scheduled testing appointment without canceling, your fee will be **\$400** when you reschedule.

If you are unable to keep your scheduled testing appointment, **you should cancel your appointment as soon as possible to avoid a rescheduling fee**, regardless of whether you are ready to reschedule.



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## APPLYING FOR THE TEST AND SCHEDULING YOUR TEST DATE

### SUMMARY OF PROCESS

In summary, to take Steps 1, 2 CK, 2 CS, and 3, you must meet the eligibility requirements shown on page 4 and do the following:

- Contact the appropriate registration entity for application materials (see page 38).
- Complete your application materials and submit them to your registration entity.
- Obtain a Scheduling Permit verifying your eligibility and authorizing you to schedule the examination.
- Follow the instructions on your Scheduling Permit to schedule your test date(s) at a specific Prometric Test Center (for Step 1, Step 2 CK, and Step 3) or Clinical Skills Evaluation Center (for Step 2 CS).
- On the scheduled test date(s) and at the scheduled time, bring to the test center your Scheduling Permit and the required identification.
- Take the test.

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## TESTING

The USMLE program has established rules to govern administration of the examinations to ensure that no examinee or group of examinees receives unfair advantage on the examination, inadvertently or otherwise. The rules include standard test administration conditions consistent with the principles on which the examinations are developed and scored. For example, examinations are designed to sample knowledge across specified content domains, and unauthorized access to examination content prior to testing violates that principle.

If there is a reason to believe that the integrity of the examination process is jeopardized, the USMLE parent organizations may invalidate all or any part of an examination. If information indicates that continued testing would jeopardize the security of examination materials or the integrity of scores, the USMLE parent organizations reserve the right to suspend or cancel test administration.

### TESTING REGULATIONS AND RULES OF CONDUCT

Test center staff monitor all testing sessions for USMLE Steps. You must follow instructions of test center staff throughout the examination. Failure to do so may result in a determination of irregular behavior (see pages 35–36) and permanent annotation of your USMLE transcript.

Test center staff are not authorized to answer questions from examinees regarding examination content, testing software, or scoring. Test center staff are also not authorized to answer inquiries with regard to registration or retesting.

If staff observe you violating test administration rules or engaging in other forms of irregular behavior during an examination, the center staff will not necessarily tell you of the observation at the time of the examination. Test center staff are required to report such incidents to the USMLE program; each report is fully investigated.

### PERSONAL ITEMS

Unauthorized possession of personal items while in the secure areas of the testing centers may lead to a finding of irregular behavior and permanent annotation of your

USMLE transcript. **It is important that you read and understand the rules regarding personal possessions; the rules for Steps 1, 2 CK, and 3 differ from those for Step 2 CS.**

For Step 1, Step 2 CK, and Step 3, unauthorized items include, but are not limited to:

- mechanical or electronic devices, such as cellular telephones, personal digital assistants (PDAs), calculators, watches of any type, electronic paging devices, recording or filming devices, radios;
- outerwear, such as coats, jackets, head wear, gloves;
- book bags, backpacks, handbags, briefcases, wallets;
- books, pens/pencils, notes, written materials, or scratch paper;
- food, candy, gum, or beverages.

For the computer-based examinations, you may bring soft-foam earplugs into the testing room. However, they must be out of the packaging and ready for inspection by test center staff during check-in. Earplugs must be left at the workstation during all breaks.

For Step 2 CS, unauthorized items include, but are not limited to:

- mechanical or electronic devices, such as cellular telephones, personal digital assistants (PDAs), calculators, watches of any type, electronic paging devices, recording or filming devices, radios;
- book bags, backpacks, handbags, briefcases, wallets;
- books, pens/pencils, notes, written materials, or scratch paper;
- medical equipment of any kind other than a standard stethoscope (without digital amplification, electronic, or any other enhancement).

For Step 2 CS, the entire testing session from orientation until the evaluation is completed, including all breaks, is considered a closed and secure testing session, and the entire test center, including the orientation room and the restrooms, is a secure testing area. Therefore, the rules regarding unauthorized possession during Step 2 CS apply to the orientation room and to all breaks.

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## TESTING

For all Steps, if you bring personal items to the test center, you must store them in a designated locker outside the secure testing area or in the designated storage area for Step 2 CS. You should keep in mind that the storage facilities are small and that all stored mechanical or electronic devices must be turned off. Personal items and their contents are subject to inspection. Any materials that reasonably appear to be reproductions of

any USMLE examination materials will be confiscated. Making notes of any kind during an examination, **except on the materials provided by the test center for this purpose**, is not permitted. Making notes on the provided materials prior to the announcement to begin a case is also forbidden. Removal of those materials from the secure testing area is prohibited.

### Rules of Conduct

When you apply to take the USMLE, you are agreeing to the following Rules of Conduct:

1. You are the person named on the Scheduling Permit for the examination.
2. You will not give, receive, or obtain any form of unauthorized assistance during the examination or during breaks.
3. You will not have any formulas, study materials, notes, papers, or electronic devices of any kind in your possession while you are in the secure areas of the center.
4. You will place in a locker or cubicle all personal belongings, including cellular telephones, watches, pagers, personal digital assistants (PDAs), formulas, study materials, notes, papers, pens/pencils, and your purse or wallet, before you enter the testing room (or Orientation Room for Step 2 CS).
5. During the computer-based examinations (Steps 1, 2 CK, and 3), you will not leave your testing station for breaks unless the break screen is visible on your monitor. It will be considered a violation of the Rules of Conduct if you indicate on the center log that your break screen is visible when it is not.
6. During computer-based testing (Steps 1, 2 CK, and 3), you may use a telephone or other communication device while outside the secure testing area and only during an authorized break. You may not use it for any purpose related to test content. During Step 2 CS, you may not use a personal telephone at any time while you are in the testing center.
7. You will not remove materials in any form (written, printed, recorded, or any other type) from the test center.
8. All examination materials remain the property of the USMLE parent organizations, and you will maintain the confidentiality of the materials, including the multiple-choice items, and the case content for Step 2 CS and *Primum* CCS. You will not reproduce or attempt to reproduce examination materials through memorization or any other means. Also, you will not provide information relating to examination content that may give or attempt to give unfair advantage to individuals who may be taking the examination. This includes postings regarding examination content and/or answers on the Internet.

**If you violate these Rules of Conduct, you may be directed to leave the test center before you complete the examination. Also, evidence of violation of any test administration rule, including these Rules of Conduct, will result in actions being taken under USMLE policies and procedures on irregular behavior. If you are found to have engaged in irregular behavior, your score report and transcripts will include this finding, and you may be barred from taking the USMLE in the future.**

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## TESTING

### ADMISSION TO THE TEST

When you arrive at the test center, you must present your Scheduling Permit and the required identification described on your Scheduling Permit. Acceptable forms of identification include the following forms of unexpired identification:

- passport,
- driver's license with photograph,
- national identity card,
- other form of dated, unexpired, government-issued identification,
- ECFMG-issued identification card.

Your identification must contain both your signature and recent (no more than 10 years earlier) photograph. If it contains your photograph but not your signature, you can use another form of unexpired identification that contains your signature, such as a student/employee identification card or a credit card, to supplement your photo-bearing, government-issued identification.

If you do not bring your Scheduling Permit and acceptable identification, you will not be admitted to the test. In that event, you must pay a fee to reschedule your test. Your rescheduled test date(s) must fall within your eligibility period.

**Important Note:** Your name as it appears on your Scheduling Permit must match the name on your form(s) of identification exactly. Refer to your scheduling permit for limited exceptions. If the name listed on your Scheduling Permit is not correct, contact your registration entity immediately.

### STEP 1, STEP 2 CK, AND STEP 3

#### Test Centers and Testing Conditions

Prometric provides computer-based testing services for academic assessment, professional licensure, and certification. USMLE Step 1 and Step 2 CK are given at Prometric Test Centers around the world. USMLE Step 3 is given at Prometric Test Centers in

the United States and its territories. These centers provide the resources necessary for secure administration of the USMLE, including video and audio monitoring and recording, and use of digital cameras to record the identity of examinees.

Individual examinations are drawn from large pools of content-parallel test forms, which are in turn created from very large banks of test materials. Individual examinations vary within and across test centers, and within and across test days. Electronic encryption is employed to protect the security of item banks, test forms, and test responses. Physical security at test centers is maintained by proctoring and video surveillance and recording.

You should arrive at the Prometric Test Center 30 minutes before your scheduled testing appointment on your testing day(s). If you arrive after your appointment time, you may not be admitted. If you arrive more than 30 minutes after your scheduled testing appointment, you will not be admitted. In that event, you must pay a fee to Prometric to reschedule your test. Your rescheduled test date(s) must fall within your assigned eligibility period.

There are no waiting facilities for family and friends at the center; plan to meet them elsewhere after the examination ends.

**<http://www.prometric.com>**

Use the Prometric Test Center Locator for directions to Prometric Test Centers.

Upon arrival at the test center, you must present the required identification, sign a test center log, be photographed, and store your personal items in your assigned locker. You will be scanned with a handheld metal detector and asked to empty and turn your pockets inside out prior to entry into the testing room to confirm that you have no prohibited items. You will be asked to repeat this process prior to every entry into the testing room after a break. In addition, your identification document and fingerprint may be scanned electronically. (To learn more about this process, please visit the USMLE website at [www.usmle.org](http://www.usmle.org))

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## TESTING

and the Prometric website, [www.prometric.com](http://www.prometric.com).) You will be provided with laminated writing surfaces and markers. You will be instructed to write your name and Candidate Identification Number (CIN) on one of the laminated writing surfaces provided. Your Scheduling Permit will be retained at the Test Center Administrator's station. You may request access to the permit during the examination if it becomes necessary for you to rewrite the CIN on the laminated writing surface. Test center staff will escort you to your assigned testing station and provide brief instructions on use of the computer equipment. Laminated writing surfaces and markers issued for USMLE Step 1, Step 2 CK, and Step 3 are to be used for making notes and/or calculations during the testing session. They should only be used at your assigned testing station, and only after you have begun your examination by entering your CIN. You must enter your CIN to start the examination. Depending upon the type of markers provided, you may also be provided an eraser. Otherwise, if you have filled the laminated writing surfaces and need additional space for making notes, you will need to notify test center staff and a replacement will be provided. Laminated writing surfaces must be returned to test center staff at the end of the testing session.

### Completing the Test

Once you begin a block of the test, no authorized breaks are provided during the block. Each block lasts approximately 30 to 60 minutes. During blocks, the block and daytime clocks continue to run even if you leave the testing room, (e.g., for a personal emergency). If you leave during a block, the test center staff will report that fact as an irregular incident. In addition, the "unauthorized break" screen, described in the examination tutorial, may appear on the monitor at your workstation during a testing block. As explained in the tutorial, the unauthorized break screen will appear after a defined period of inactivity (no mouse click or key entry). Thirty seconds before the appearance of the unauthorized break screen, an "inactivity timeout" warning will appear. If you do not click as instructed on the warning screen, the unauthorized break screen will appear after 30 seconds. You will then have to enter your CIN in order to continue with the examination. Each time you leave the testing room, you are required to sign out

and sign in when you return. You must present your identification each time you sign in. Each block ends when its time expires or when you exit from it.

The test session ends when you have started and exited all sections or the total time for the test expires. You will sign out as you leave the test center, hand in the laminated writing surfaces, and receive a notice that you appeared for the test. If you encounter an error message at the conclusion of your exam, the notice that you appeared for the test may not print. However, please be assured that it does not affect your examination data or our receipt of the data. If your test is scheduled for multiple days, be sure to ask test center staff to return your scheduling permit to you at the end of your test day; you will need it for check-in on the following day(s). Note: You can reprint your permit for the consecutive day(s), should test center staff neglect to return the permit to you.

After you start taking an examination, you cannot cancel or reschedule that examination unless a technical problem prevents you from completing your examination. If you experience a computer problem during the test, notify test center staff immediately. The testing software is designed to allow the test to restart at the point at which it was interrupted. In most cases, your test can be restarted at the point of interruption with no loss of testing time. However, it is possible that a technical problem may occur that does not permit you to complete your examination. In the rare event that this occurs, please send a written description of the incident to Test Administration Services at the NBME (refer to **Test Administration Problems/Inquiries** on page 39 for details). Your problem will be thoroughly investigated, and if necessary, arrangements will be made to allow you to test at a later date at no additional charge.

If you start to test and elect not to complete the examination, you may contact the NBME for consultation (see page 38). The attempt may appear as an "incomplete" on your USMLE transcript (see **Examination Results and Scoring** for further details).

### How Break Time Works

Your entire testing session is scheduled for a fixed amount of time. The computer keeps track of your



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## TESTING

overall time and the time allocated for each block of the test. At the start of the testing session, you have a total of 45 minutes of break time. This allotment of time is used for authorized breaks between blocks and may also be used to make transitions between blocks. Authorized breaks include any time taken between test blocks whether you take a brief break at your seat or you leave the testing room. If you complete the tutorial or other blocks of the test early, the remaining time will be available as break time. It will not be available to complete other blocks of the test.

As you progress through the blocks of the test, you should use the features available in the testing software to monitor how many blocks are remaining and how much break time is remaining. **If you take too much break time and exceed the allocated or accumulated break time, your time to complete the last block(s) in the testing session will be reduced. You should use the time summary feature (as explained in the tutorial) to keep track of the number of blocks completed and the number remaining.**

When section time runs out, you will not be able to move to any new screens within that section. The computer will close the section. After you complete or run out of time for each block during the test, you must respond when the computer asks you to indicate whether you want to take a break or continue. After the test blocks, you may be asked to complete an additional block that contains survey questions about your testing experience.

### STEP 2 CS

The time you should arrive at the testing center is listed on the confirmation notice you will print after scheduling your appointment. If you arrive during the on-site orientation, you may be allowed to test; however, you will be required to sign a Late Admission Form. If you arrive after the on-site orientation, you will not be allowed to test. You will have to reschedule your testing appointment and will be required to pay the rescheduling fee. If you start to test and elect not to complete the examination, the attempt may appear as an “incomplete” on your USMLE transcript.

At the time of check-in, you will be required to present your Scheduling Permit and unexpired identification (see **Admission to the Test**, page 25). You will be given a small storage cubicle in which you must place personal belongings. These cubicles are not secure, so do not bring valuables. In addition, please note the following:

- You should bring your own stethoscope and white laboratory coat; all other equipment is provided at the center. Please be sure that **all of the pockets** of your laboratory coat are **empty**.
- You should wear comfortable, professional clothing.
- There are no waiting facilities for family and friends at the center; plan to meet them elsewhere after the examination ends.
- Test center staff (wearing name tags) will direct you throughout the day, and their instructions should be followed at all times.
- There will be an on-site orientation to demonstrate the equipment available for you to use in the examination rooms, as well as to acquaint you with procedures and regulations.
- Once you enter the secure area of the test center (beginning with the orientation), you may not leave that area until the examination has been completed. The examination lasts about eight hours. Two breaks are provided (one 30-minute break and one 15-minute break). A light meal is provided during the first break; however, you may bring your own food (provided that no refrigeration or preparation is required). No special meals are available.
- All examinees taking the Step 2 CS examination are required to type the patient note. Examinees are not permitted to handwrite the note, unless technical difficulties on the test day make the patient note-typing program unavailable.
- You may not discuss the cases with your fellow examinees at any time, and conversation among

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## TESTING

examinees in any language other than English is prohibited at all times. Proctors will monitor all examinee activity.

- ❑ Should you wish to file a concern regarding your Step 2 CS testing experience, you may do so at the test center on your test day. If you do not file a report at the test center, and wish to report a concern, you must notify NBME Test Administration (see page 39) in writing within three weeks of your testing date(s).
  
- ❑ The USMLE program retains the right to remove from the examination and/or to impose conditions upon retesting for any examinee who appears to represent a health or safety risk to the standardized patients or test center staff. This includes, but is not limited to, examinees who appear ill, are persistently coughing or sneezing, have open skin lesions, or have evidence of active bleeding. Examinees who are not feeling well are encouraged to seek medical advice prior to arrival at the center and should consider requesting a change in the date of their examination, if appropriate.

**NOTE:** Behaviors that could constitute a real or potential threat to a standardized patient's safety, such as careless or dangerous actions during physical examination, may impact your pass/fail determination, may result in a determination of irregular behavior and annotation of your USMLE record, and/or may result in the imposition of conditions on retesting.

**Visitors from medical testing and academic organizations will on some occasions be observing an examination in progress. They will be given no information regarding examinee identity or performance and will have no interaction with examinees.**

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## SCORING AND SCORE REPORTING

### EXAMINATION RESULTS AND SCORING

When you take Step 1, Step 2 CK, or Step 3, the computer records your responses. After your test ends, your responses are transmitted to the NBME for scoring. The number of test items you answer correctly is converted into a three-digit score and an associated two-digit score. Both scores are used for score-reporting purposes.

On the three-digit scale, most Step 1, 2 CK, or 3 scores fall between 140 and 260. The mean score for first-time examinees from accredited medical school programs in the United States is in the range of 215 to 235, and the standard deviation is approximately 20. Your score report will include the mean and standard deviation for recent administrations of the examination. All score users are urged to rely on the three-digit score since its equivalence is maintained over time through statistical procedures. The two-digit score is derived from the three-digit score and the current passing score. Consequently, two-digit scores are not equivalent over time across the entire scale. The two-digit scale is used in score reporting because some medical licensing authorities have requirements that include language describing a "passing score of 75." The two-digit score is derived in such a way that a score of 75 always corresponds to the minimum passing score. The USMLE program has begun the process of limiting the reporting of scores on the two-digit scale. Visit the USMLE website for more information.

For Step 2 CS, examinees are assessed on their data-gathering and communication skills (including spoken English) by the standardized patients, and on their ability to complete an appropriate patient note by physician raters. Performance on Step 2 CS is reported as pass or fail, with no numerical score.

USMLE score reports and transcripts (described on pages 31–33) show your scores (for Step 1, Step 2 CK, and Step 3) and an indication of whether you passed or failed (for all examinations). The same information is sent to medical licensing authorities upon your authorization for their use in granting the initial license to practice medicine.

Except as otherwise specified below, to receive a score on Step 1, Step 2 CK, and Step 3, you must begin every block of the test. If you do not begin every block, no results are reported, and the "incomplete" attempt appears on your USMLE transcript. If you register for but do not begin an examination, no record of the test will appear on your transcript.

If your Step 1, Step 2 CK, or Step 3 examination is incomplete, you may request that a score be calculated and reported, with all missed test items or cases scored as incorrect. This score is likely to be lower than the score you would have achieved had you completed all sections of the examination. If you receive notification that your examination resulted in an incomplete attempt, contact the NBME in writing no later than 45 days after the date the notification is sent to you if you would like further information on having the score calculated and reported. If you decide to request calculation and reporting of your score, the score will appear on your USMLE transcript as though it were complete; it will remain the permanent score for the examination administration.

For Step 2 CS, if you leave the test early, or for some other reason you fail to carry out one or more of the cases, your performance may be assessed on those cases completed. If this assessment were to result in a passing outcome no matter how poorly you may have performed on the missed case(s), then a "pass" will be reported. If this assessment were to result in a failing outcome no matter how good your performance

**Note:** USMLE makes every effort to provide that your registration information is properly processed and that the Step examinations are properly prepared, administered and scored. In the unlikely event that an error occurs in the preparation, processing, administration or scoring of your USMLE examination or in the reporting of your USMLE scores, USMLE will make reasonable efforts to correct the error, if possible, or permit you either to retest at no additional fee or to receive a refund of the examination fee. These are the exclusive remedies available to examinees for errors in the registration process; in preparing, processing, or administering exams; or in determining or reporting scores.

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## SCORING AND SCORE REPORTING

may have been on the missed case(s), then a "fail" will be reported. Otherwise, the attempt may be recorded as an "incomplete."

**Note:** The USMLE program routinely monitors examinee performance on the Step examinations for unusual results. If such review raises concerns, e.g., about your readiness to test or your level of motivation in trying to pass the examination, you may be contacted by representatives of the USMLE program. Unusual performance patterns may result in your being unable to reapply and/or retest and/or the imposition of conditions for retesting. Your score report and transcript will be annotated accordingly.

If you wish to become more familiar with the USMLE examinations, you should utilize the materials designed for this purpose (see **Preparing for the Test** on page 14.) You should not take a USMLE Step for purposes of becoming familiar with its format or structure.

If it is determined that you took a Step for which you were not eligible, results for that test may not be reported or, if previously reported, may be revoked (see pages 8 and 35–36).

Some examination materials are included in the USMLE to enhance the examination system and to investigate the measurement properties of the examinations. Such materials are not scored.

### Scoring for Multiple-Choice Items

Multiple-choice items are provided in blocks of approximately 45 to 60 minutes (see page 14). Blocks of items are constructed to meet specific content specifications. As a result, the combination of blocks of items creates a form of the examination that is comparable in content to all other forms. The percentage of correctly answered items required to pass varies from form to form. However, examinees typically must answer 60 to 70 percent of items correctly to achieve a passing score.

### Scoring for *Primum* CCS

The CCS scoring process compares your patient management strategy with policies obtained from experts. Actions resembling a range of optimal strategies will produce a higher score. You must balance thoroughness, efficiency, avoidance of risk, and timeliness in responding to the clinical situation. Dangerous and unnecessary actions will detract from your score.

### Scoring for Step 2 CS

Passing performances on all three subcomponents (ICE, CIS, SEP) in a single administration are required to obtain the overall designation of passing on Step 2 CS. Additional score information is found in the Step 2 CS Content Description and General Information, available at the USMLE website.

#### Patient Note: Important Information

You will not receive credit for listing parts of an examination you **would** have done or questions you **would** have asked had the encounter been longer. Write **only** the information you elicited from the patient and describe **only** the physical examination that you did. Patient notes and videos of encounters may be reviewed for compliance.

### MINIMUM PASSING SCORES

The USMLE program provides a recommended pass or fail outcome for all Step examinations. Recommended performance standards for the USMLE are based on a specified level of proficiency. As a result, no predetermined percentage of examinees will pass or fail the examination. The recommended minimum passing level is reviewed periodically and may be adjusted at any time. Notice of such review and any adjustments will be posted at the USMLE website.

**Note:** Visit the USMLE website at <http://www.usmle.org> for up-to-date information.

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## SCORING AND SCORE REPORTING

A statistical procedure ensures that the performance required to pass each test form is equivalent to that needed to pass other forms; this process also places scores from different forms on a common scale.

For Step 3, your performance on the case simulations will affect your Step 3 score and could affect whether you pass or fail. The proportional contribution of the score on the case simulations is no greater than the amount of time you are allowed for the case simulations.

### EXAMINEE SCORE REPORTS

For Steps 1, 2 CK, and 3, your score report includes a pass/fail designation, numerical scores, and graphical performance profiles summarizing areas of strength and weakness to aid in self-assessment. These profiles are developed solely for your benefit and will not be reported or verified to any third party.

Performance on Step 2 CS is reported as pass or fail. Score reports include performance profiles, which reflect the relative strengths and weaknesses of your performance across the subcomponents of Step 2 CS.

**Note:** To avoid misinterpretation and protect your privacy, the USMLE program does not provide scores or pass/fail outcomes by telephone, e-mail, or fax to anyone.

Results for computer-based examinations (Steps 1, 2 CK, and 3) are typically available within three to four weeks after your test date. However, delays are possible for various reasons. In selecting your test date and inquiring about results, you should allow at least eight weeks to receive notification that your score report is available.

Results for Step 2 CS are available according to the Step 2 CS Schedule for Reporting Results, available at the USMLE website. Before selecting your test date, you should consult the reporting schedule.

**Note:** The scoring process for USMLE Steps 1, 2 (CK and CS), and 3 is not expedited or accelerated for any single individual or group.

### SCORE RECHECKS

For Steps 1, 2 CK, and 3, standard quality assurance procedures ensure that the scores reported for you accurately reflect the responses recorded by the computer. When a request for a score recheck is received, your original response record is retrieved and rescored using a system that is outside of the normal processing routine. The rechecked score is then compared with your original score.

For Step 2 CS, score rechecks first involve retrieval of the ratings you received from the standardized patients and from the physician note raters. These values are then re-summed and reconverted into final scores in order to confirm that the reported pass/fail outcome was accurate. There is no re-rating of your encounters or of your patient notes; videos of encounters are not reviewed. Videos are used for general quality control and for training purposes and are retained only for a limited period of time.

Patient notes are carefully reviewed, in some instances by multiple physicians, before scores are released. As part of the quality control procedures for initial scoring, examinees who fail Step 2 CS solely on the basis of the Integrated Clinical Encounter subcomponent and who are performing at a level that is near the minimum passing point have their patient notes rated by multiple physician note raters. Therefore, patient notes are not reviewed again when a recheck is requested.

For all Steps and Step Components, a change in your score or in your pass/fail outcome based on a recheck is an extremely remote possibility. However, a recheck will be done if you submit a written request and service fee to the entity that registered you for the examination. Your request must be received by your registration entity no later than 90 days after your result was released.



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## SCORING AND SCORE REPORTING

### SCORE REPORTING

When your scores are available, you will receive an e-mail notification from your registration entity. Follow the instructions in the e-mail notification for accessing your USMLE score report. Your score report will remain available for approximately 120 days from the date of e-mail notification. Using password protection, you will be able to view, download, and print your score report. Once the score report is removed from the website, your scores will be provided to you only in the form of an official USMLE transcript. To obtain a transcript, you will be required to submit a request to your registration entity and to pay a fee.

After taking Step 1, Step 2 CK, or Step 3, you should allow at least eight weeks after your test date to receive notification that your score report is available. For Step 2 CS results, you should refer to the Step 2 CS Schedule for Reporting Results ([www.usmle.org](http://www.usmle.org)).

The NBME reports the results of the USMLE to LCME- and AOA-accredited medical school programs for their students, who are enrolled at the time of application, and graduates.

If you are a student or graduate of an LCME- or AOA-accredited medical school program and you do not want your Step 1, Step 2 CK, or Step 2 CS results reported to your medical school, you must send a signed request to the NBME. Your request must be postmarked or faxed at least two weeks before your scheduled test date. If you make this request, the score information provided to the medical school will list your name and the notation "record withheld at the request of the examinee." If you want your scores reported to your medical school subsequently, you must submit a transcript request and pay the required fee.

The ECFMG may provide the results of the USMLE to international medical schools for their students and graduates. If you are a student or graduate of an international medical school and you do not want your Step 1, Step 2 CK, or Step 2 CS results reported to your medical school, you must submit a request for each exam administration using ECFMG's Interactive Web Applications (IWA), available on the

ECFMG website at [www.ecfm.org](http://www.ecfm.org). Your request must be submitted at least 10 days before your scheduled test date. If you make this request, the score information provided to the medical school for that exam administration will list your name and the notation "withheld at the request of the examinee." If you want your score for that exam administration reported to your medical school subsequently, you must submit a transcript request and pay the required fee.

If you are a graduate of an LCME- or AOA-accredited medical school program, you must indicate on your Step 3 application your preference for reporting your Step 3 score to the school from which you graduated.

### OFFICIAL USMLE TRANSCRIPTS AND PROVIDING SCORES TO THIRD PARTIES

If you want to send your USMLE scores to a third party, you must submit a request and pay a fee. Your scores will be provided in the form of an official USMLE transcript.

Examination data (including performance information and recorded patient encounters) from USMLE examinations may be used by the USMLE program or made available to third parties for research. In such instances, the data will be confidential, and individual examinees will not be identified in any publication. If you do not wish your score to be made available for research purposes, you must advise the USMLE Secretariat in writing (see page 39).

Except as described in this *Bulletin*, USMLE results will not be reported to you or third parties without your request and payment of the transcript fee.

Your USMLE transcript includes the following:

- your name and other personal identification information, including your date of birth;
- your complete results history of all Steps and Step Components that you took, with the possible exception of your two-digit results (see Note on page 33);
- your history of any examinations for which no results were reported;

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## SCORING AND SCORE REPORTING

- indication of whether you have previously taken the former NBME Parts I, II, or III, Federation Licensing Examination (FLEX), or ECFMG Clinical Skills Assessment (CSA);
- annotation(s) if you were provided with test accommodations as applicable (see page 17);
- annotation(s) and information documenting classification of any scores as indeterminate (see page 35);
- annotation(s) and information documenting any irregular behavior (see pages 35–36); and
- notation(s) of any actions taken against you by medical licensing authorities or other credentialing entities that have been reported to the FSMB Board Action Databank.

**Note:** Graphical performance profiles, which are included on your original score reports, are not included in your USMLE transcript.

**Note:** The USMLE program has begun the process of limiting the reporting of scores on the two-digit scale. Visit the USMLE website for more information.

To obtain your USMLE transcript or have it sent to a third party, you must contact the ECFMG, FSMB, or NBME. Which entity you contact depends on which examinations you have taken and where you want your transcript sent. Contact the FSMB if you want your transcript sent to a medical licensing authority at any time. If you have not registered for or taken Step 3 and want your transcript sent to anyone other than a medical licensing authority, the request should be sent to the last entity that registered you.

### ELECTRONIC RESIDENCY APPLICATION SERVICE (ERAS®)

If you use ERAS, you may request electronic transmittal of your USMLE transcript to residency programs that participate in ERAS. If your program does not participate in ERAS, you must submit a transcript request and pay the required fee. Information on ERAS is available for students and graduates of LCME- and AOA-accredited medical school programs from the medical schools, and for students and graduates of medical schools outside the United States and Canada from the ECFMG. The Association of American Medical Colleges (AAMC) and ECFMG websites also include information on ERAS and/or links to the ERAS website.

Visit these websites for information on ERAS:  
<http://www.aamc.org>  
<http://www.ecfm.org>

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## SCORING AND SCORE REPORTING

### Requesting USMLE Transcripts

<b>Step(s)/Component(s) Taken</b>	<b>Recipient of Transcript</b>	<b>Contact (see page 37)</b>
One or more USMLE Steps	Medical licensing authority	<b>FSMB</b>
All three USMLE Steps; or Step 1 and Step 2 CK and CS (if required), only when registered for or after taking Step 3	Any recipient	<b>FSMB</b>
Step 1 and/or Step 2 CK and/or CS only, registered by ECFMG	Any recipient other than a medical licensing authority	<b>ECFMG</b>
Step 1 and/or Step 2 CK and/or CS only, registered by NBME		<b>NBME</b>

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## SCORE VALIDITY AND IRREGULAR BEHAVIOR

### VALIDITY OF SCORES

The USMLE program assures the validity of scores reported for USMLE examinations by every means available. Your scores may be canceled if the scores are at or above the passing level and the USMLE program cannot certify that they represent a valid measure of your knowledge or competence as sampled by the examination. Questions about score validity may result from irregular behavior (see following section) or other factors.

The performance of examinees is monitored and may be analyzed to detect aberrancies that raise questions about the validity of scores. In addition, evidence of irregular behavior and/or inadvertent access to test content in advance of test administration may indicate that your scores do not represent a valid measure of your knowledge or competence as sampled by the examination. In these circumstances, your score report may be delayed or any further reporting or verification of such scores may be withheld, pending completion of further review and/or investigation. If your score report is delayed, you and any other party to whom scores would normally be reported will be notified. You will have an opportunity to provide information that you consider relevant.

After review and analysis of all available information, scores will be classified as valid and will be reported, or scores will be canceled, i.e., will not appear on your record and will not be reported or verified to any party. If the scores are canceled, you will be advised of the options for retaking the examination. Anyone who has received a report of scores that are later canceled will be notified.

If irregular behavior appears to have contributed to a decision that your scores are not valid, action will also be taken as described below.

### IRREGULAR BEHAVIOR

Irregular behavior includes any action by applicants, examinees, potential applicants, or others when solicited by an applicant and/or examinee that subverts or attempts to subvert the examination process.

If you have information or evidence indicating that any type of irregular behavior or any infringement of legal rights has occurred, you should write to [webmail@nbme.org](mailto:webmail@nbme.org) or call your registration entity (see page 38).

Specific examples of conduct that is deemed to be irregular behavior include, but are not limited to, the following:

- seeking, providing, and/or obtaining unauthorized access to examination materials;
- providing false information or making false statements on or in connection with application forms, Scheduling Permits, or other USMLE-related documents;
- taking an examination without being eligible for it or attempting to do so;
- impersonating an examinee or engaging someone else to take the examination for you;
- giving, receiving, or obtaining unauthorized assistance during the examination or attempting to do so;
- making notes of any kind while in the secure areas of the test center except on the writing materials provided at the test center for this purpose;
- failing to adhere to any USMLE policy, procedure, or rule, including instructions of the test center staff;
- verbal or physical harassment of test center staff or other disruptive or unprofessional behavior at a test center;
- possessing any unauthorized materials, including photographic equipment, or communication or recording devices, including electronic paging devices and cellular telephones, in the secure testing areas;
- altering or misrepresenting examination scores;

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## SCORE VALIDITY AND IRREGULAR BEHAVIOR

- ❑ any unauthorized reproduction by any means, including reconstruction through memorization, and/or dissemination of copyrighted examination materials by any means, including the Internet; and
- ❑ communicating or attempting to communicate about specific test items, cases, and/or answers with another examinee, potential examinee, or formal or informal test preparation group at any time before, during, or after an examination.

**NOTE:** Looking in the direction of another examinee's computer monitor or talking to another examinee during the examination may be reported as evidence of giving, receiving, or obtaining unauthorized assistance. The report may result in a determination of irregular behavior. Discussion of examination content or answers on the Internet may also result in a determination of irregular behavior.

If information received suggests that irregular behavior has occurred, statistical analyses may be conducted and additional information may be gathered.

You will be advised of the alleged irregular behavior, and you will have an opportunity to provide informa-

tion that you consider relevant to the evaluation of the allegation. Your scores may be withheld, if they have not been reported previously. Applications may not be processed, and you may not be permitted to take subsequent examinations until a final decision regarding irregular behavior is made. If the evidence suggests that the alleged irregular behavior affects score validity, the score will also be reviewed as described on page 35.

If it is determined that you engaged in irregular behavior, information regarding this determination becomes part of your USMLE record. Your score report (if applicable) and USMLE transcript will contain a notation regarding the irregular behavior.

Information about the irregular behavior will be provided to third parties that receive or have received your USMLE transcript. Such information may also be provided to other legitimately interested entities. You may be barred from taking future USMLE examinations and/or special administrative procedures may be implemented for your future examinations. The USMLE program also reserves the right to take such actions when information regarding behavior of examinees on predecessor examinations indicates such actions may be necessary to ensure the security of the USMLE.



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## **SCORE VALIDITY AND IRREGULAR BEHAVIOR**

### **ANOMALOUS PERFORMANCE**

Anomalous performance and/or unusual testing history may be indicative of irregular behavior or other issues that bear on your access to USMLE. If your performance raises concerns about your readiness to test or your motivation to pass, the USMLE program reserves the right to restrict your future access to its examinations and/or to impose conditions upon future access. If you are unable or unready to test on your scheduled test date, or if you are planning to take a Step administration to familiarize yourself with the examination format, or for any reason other than to pass, you should be aware that such behavior may result in a limitation on your access to USMLE in the future.

## COMMUNICATING ABOUT USMLE

Examination	Type of Applicant	Registration Entity to Contact
Step 1 or Step 2 (CK or CS)	Students and graduates of medical school programs in the United States and Canada accredited by the Liaison Committee on Medical Education or students and graduates of medical schools in the United States accredited by the American Osteopathic Association	<b>NBME</b> Examinee Support Services 3750 Market Street Philadelphia, PA 19104-3190 Website: <a href="http://www.nbme.org">http://www.nbme.org</a> Telephone: (215) 590-9700 Fax: (215) 590-9457 E-mail: <a href="mailto:webmail@nbme.org">webmail@nbme.org</a>
Step 1 or Step 2 (CK or CS)	Students and graduates of medical schools outside the United States and Canada	<b>ECFMG</b> 3624 Market Street Philadelphia, PA 19104-2685 Website: <a href="http://www.ecfm.org">http://www.ecfm.org</a> Telephone: (215) 386-5900 Fax: (215) 386-9196 E-mail: <a href="mailto:info@ecfm.org">info@ecfm.org</a>
Step 3	All medical school graduates who have passed Step 1 and Step 2 (CK and CS)	<b>FSMB</b> Assessment Services 400 Fuller Wiser Road, Suite 300 Euleless, TX 76039-3856 Website: <a href="http://www.fsmb.org">http://www.fsmb.org</a> Telephone: (817) 868-4041 Fax: (817) 868-4098 E-mail: <a href="mailto:usmle@fsmb.org">usmle@fsmb.org</a> or <b>Medical licensing authority</b> ( <a href="http://www.fsmb.org/usmle_eliinitial.html">www.fsmb.org/usmle_eliinitial.html</a> )

### APPLICATION AND REGISTRATION INQUIRIES

You must contact the appropriate registration entity (see above) for the following:

- information on how to apply for the USMLE,
- application materials,
- information on the status of your application or Scheduling Permit.

**<http://www.usmle.org>**

Visit the USMLE website for  
up-to-date information.

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## COMMUNICATING ABOUT USMLE

### SCHEDULING AND TEST CENTER INQUIRIES

For Steps 1, 2 CK, and 3, your Scheduling Permit includes instructions on how to contact Prometric to schedule your appointment to test. Inquiries about your appointment, such as a request to reschedule an appointment within your eligibility period, must be directed to Prometric. For current information on the locations of Prometric Test Centers, visit the Prometric website.

**<http://www.prometric.com>**

Use the Prometric Test Center Locator for up-to-date information on the locations of Prometric Test Centers.

To schedule an appointment for Step 2 CS, follow the instructions provided on your Scheduling Permit. For test center availability and to schedule or reschedule an appointment, access Step 2 CS Calendar and Scheduling through the website of your registration entity.

If you receive a Scheduling Permit but experience a problem that Prometric or CS scheduling staff are unable to resolve in scheduling your appointment, you may contact your registration entity (see page 38).

### TEST ADMINISTRATION PROBLEMS/INQUIRIES

If you experience a problem during the administration of the examination that test center staff were unable to resolve to your satisfaction, you may forward a written description of your experience to the NBME (attention: Test Administration; see page 38), by mail, e-mail ([testadmin@nbme.org](mailto:testadmin@nbme.org)), or fax. Your correspondence should also include your name, your

USMLE ID number, the examination name (Step 1, 2 CK, 2 CS, or 3), date of administration, test center location, and a detailed description of the difficulty experienced. Please allow 10 to 15 business days for your report to be thoroughly investigated and evaluated. You will receive written notification of the results of the investigation. If you have questions, you may call (215) 590-9700.

**Important Note:** Written notification of problems experienced during administration must be received by NBME Test Administration within three weeks of your testing date for Step 2 CS and within 45 days of your testing date for Steps 1, 2 CK, and 3. If notification is not received within the above time frames, it may not be possible for your concerns to be investigated.

### GENERAL INQUIRIES

Complete information about the USMLE is available at the USMLE website. General inquiries regarding the USMLE or inquiries for the USMLE Secretariat may be directed to the NBME (see page 38) or the USMLE Secretariat:

USMLE Secretariat  
3750 Market Street  
Philadelphia, PA 19104-3190  
Telephone: (215) 590-9700

### STEP 3 AND MEDICAL LICENSURE INQUIRIES

Inquiries for Step 3 applications and general questions on medical licensure may be directed to the FSMB. Specific inquiries regarding licensure may be directed to the individual medical licensing authorities. Please visit [www.fsmb.org/usmle\\_elinitial.html](http://www.fsmb.org/usmle_elinitial.html).