



The Original Research article, “Characteristics and Outcomes of Individuals Engaging in USMLE Irregular Behavior, 2006–2015,” (*JMR* Volume 106 #4) provides a nuanced understanding of the unsettling problem of unprofessional conduct during the USMLE process. As the authors explain, the irregular behaviors were enormously costly from a USMLE perspective. However, they were also costly from an individual perspective, as demonstrated by the article’s Case Study. We read that approximately one-quarter of those who engaged in irregular behavior ultimately passed the entire USMLE sequence and even fewer obtained an unrestricted medical license.

Although it appears that none of the offending individuals was required to participate in a remedial intervention, there may be a role for remedial education for at least some of those identified. Instruction in professional ethics cultivates trainees’ professional identity and inculcates in them the higher standard to which they will always be held. Test-takers from other cultures where group learning and sharing of information are both accepted and encouraged would learn that these behaviors are not acceptable in the United States.

Besides giving regulators confidence that these individuals can be trusted to care for patients, successful remediation would accomplish other important objectives. Individuals would be rehabilitated by identifying the unique factors that put them at risk for exercising such poor judgment, and by learning how to prevent future relapse. They would internalize crucial lessons about the privilege of licensure, professional virtue, and accountability. And the public would benefit from a physician who has learned early on about the meaning of a professional role, expectations of professional conduct, and the fragility of licensure. For some years, our colleagues at the Federation of State Boards of Physical Therapy (FSBPT) have used this approach and mandated remedial

education among other consequences when National Physical Therapy Examination test-takers breach professional conduct.

Who would merit such a second chance? Boards make case-by-case dispositions like this every day. Elements to consider include motivation, remorse, cultural misunderstandings, and efforts at self-rehabilitation undertaken even prior to being contacted by the USMLE Committee for Individualized Review.

Through impactful educational interventions that are proportional to the severity of the infraction and that take into account mitigating and aggravating factors, the public could benefit from the services of otherwise capable future physicians who have learned the hard way about the privilege of licensure.

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