



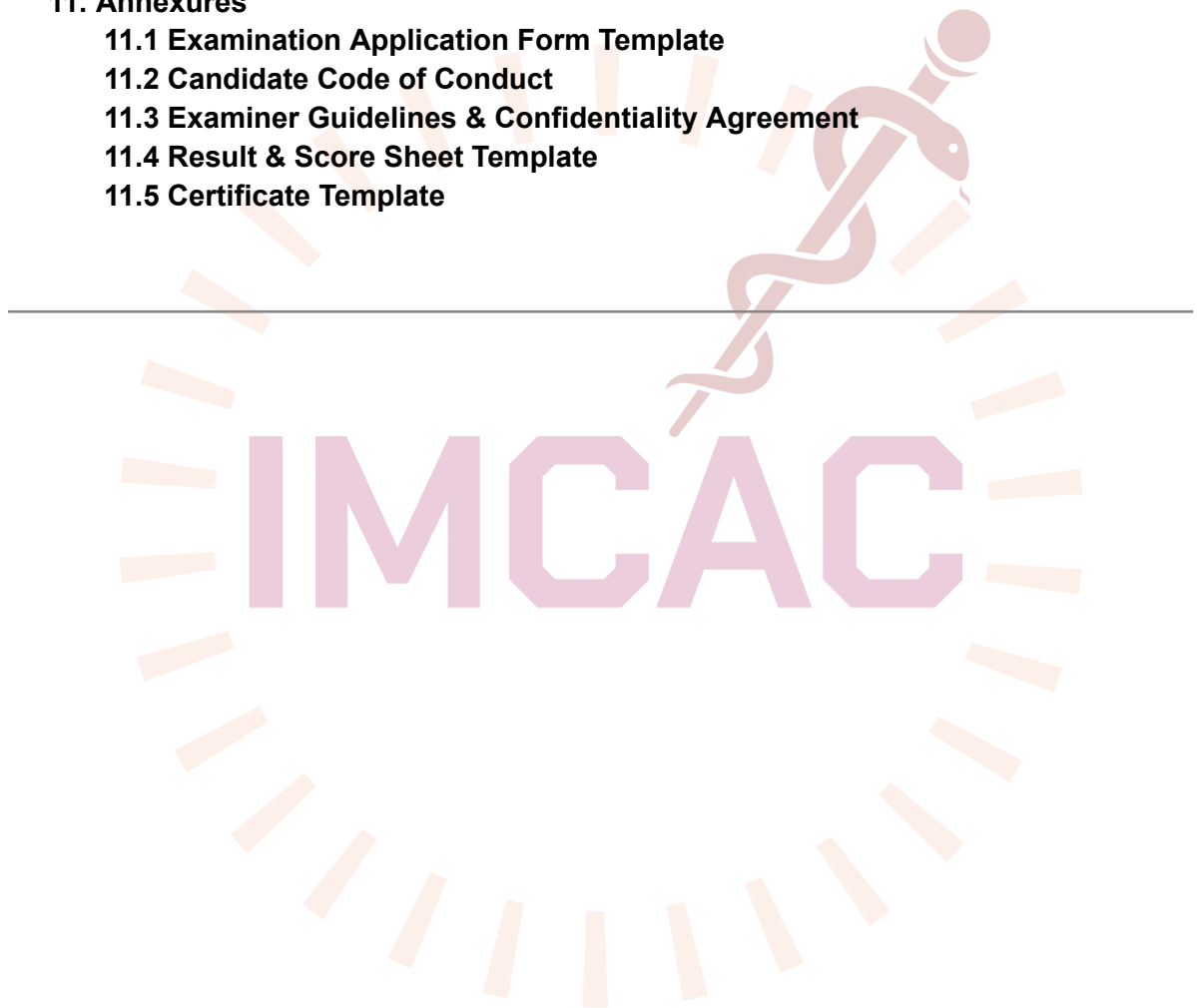
Guidelines for Conducting Board Certification Examinations

International Medical Competency Accreditation Council (IMCAC)

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1. Introduction

1.1 Purpose:

To establish standardized procedures for conducting IMCAC Board Certification Examinations to ensure competence, fairness, transparency, and global recognition of certified professionals.

1.2 Scope & Applicability:

Applicable to all candidates seeking board certification through IMCAC and all staff, examiners, and institutions involved in the process.

1.3 Guiding Principles:

- **Integrity:** Fair, unbiased assessment based on merit.
 - **Transparency:** Clear communication of criteria, timelines, and results.
 - **Excellence:** Ensuring highest professional and clinical standards.
 - **Confidentiality:** Protection of candidate and institutional data.
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2. Objectives of Board Certification

1. Verify professional competence in a standardized framework.
 2. Promote consistency in education, training, and clinical practice.
 3. Recognize and reward professional excellence globally.
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3. Eligibility & Criteria

- **Academic Qualifications:** Relevant degree (e.g., MBBS, BDS, BAMS, BHMS) from recognized institutions.
 - **Clinical Experience:** Minimum required clinical hours or case numbers.
 - **Professional Ethics:** No history of malpractice or disciplinary action.
 - **Documentation:** Academic transcripts, training certificates, ID proof, application form.
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4. Examination Framework

- **Written Exam: Multiple Choice Questions (MCQs), Short Answer Questions (SAQs).**
 - **Practical / Skills Assessment: Hands-on demonstration, case handling.**
 - **Oral / Viva: Clinical reasoning, scenario-based discussions.**
 - **Blueprint: Covers core competencies, subspecialty areas, and ethical practice.**
 - **Passing Score: Defined cutoff (e.g., 70%) with separate pass in each component.**
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5. Application & Registration Process

- **Online submission with scanned documents.**
 - **Verification by IMCAC staff prior to approval.**
 - **Payment of examination fee through secure channels.**
 - **Admit card issued 7–10 days before examination.**
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6. Examination Conduct & Administration

- **IMCAC Examination Committee oversees smooth conduct.**
 - **Candidate Code of Conduct: Prohibited items, punctuality, behavior expectations.**
 - **Invigilator / Proctor Guidelines: Supervision, conflict handling, record-keeping.**
 - **Online / Hybrid Examinations: Secure login, live monitoring, anti-cheating software.**
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7. Evaluation & Results

- Transparent scoring with documented answer keys.
 - Results published within defined timeline (e.g., 4–6 weeks).
 - Appeals handled within 30 days of result declaration.
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8. Certification & Award

- IMCAC Board Certification issued with unique ID and digital verification QR code.
 - Validity: Typically 5 years; renewal requires evidence of continued competence (CME/CPD).
 - Recognized by partner institutions, healthcare boards, and professional councils.
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9. Ethical Standards & Confidentiality

- Anti-cheating protocols: CCTV, biometric verification, online monitoring.
 - Examiners sign confidentiality and conflict-of-interest agreements.
 - Candidate personal data and exam content are strictly confidential.
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10. Monitoring & Continuous Improvement

- Annual review of syllabus, assessment methods, and question bank.
 - Candidate feedback collected and analyzed.
 - Improvements implemented for fairness, clarity, and relevance.
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11. Annexures

- 1. Examination Application Form Template**
- 2. Candidate Code of Conduct**
- 3. Examiner Guidelines & Confidentiality Agreement**
- 4. Result & Score Sheet Template**
- 5. Board Certification Template**

Annexures – IMCAC Board Certification Examinations

Annexure 1: Examination Application Form Template

International Medical Competency Accreditation Council (IMCAC) Board Certification Examination – Application Form

Candidate Information:

- Full Name: _____
- Date of Birth: _____
- Gender: ☐ Male ☐ Female ☐ Other
- Nationality: _____
- Contact Email: _____
- Contact Phone: _____
- Mailing Address: _____

Educational Qualifications:

Degree	University/Institute	Year of Graduation	Grade/CGPA
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Clinical Experience / Training:

- Total Years of Experience: _____
- Number of Procedures / Cases Handled (if applicable): _____
- Institution(s) of Clinical Training: _____

Board Certification Applied For:

- ☐ Specialty: _____
- ☐ Subspecialty: _____

Supporting Documents (to attach):

1. Copy of Degree Certificate(s)
2. Training / Internship Certificate(s)
3. Professional License / Registration

4. Passport / ID Proof
5. Passport-size Photograph

Declaration:

I hereby declare that all information provided is true and accurate. I agree to abide by IMCAC examination rules.

Signature of Candidate: _____

Date: _____



Annexure 2: Candidate Code of Conduct

Purpose: To ensure fair, ethical, and disciplined behavior during IMCAC examinations.

1. Examination Rules:

- Arrive at least 30 minutes before start time.
- Carry only authorized items (ID card, admit card, writing tools).
- Mobile phones, electronic devices, and unauthorized materials are prohibited.
- Follow all instructions given by invigilators or proctors.

2. Ethical Standards:

- Do not engage in cheating, plagiarism, or impersonation.
- Report any unethical behavior observed.
- Maintain decorum and professionalism.

3. Consequences of Misconduct:

- Warning, cancellation of exam, or disqualification.
- Reporting to licensing or professional authorities if necessary.

Acknowledgment:

I have read and understood the Candidate Code of Conduct and agree to comply.

Signature of Candidate: _____

Date: _____

Annexure 3: Examiner Guidelines & Confidentiality Agreement

Purpose: To ensure impartiality, confidentiality, and ethical evaluation during IMCAC examinations.

Guidelines for Examiners:

1. **Assessment Integrity:** Score candidates based on objective criteria only.
2. **Impartiality:** Disclose any potential conflict of interest; refrain from evaluating if conflicted.
3. **Professional Conduct:** Treat all candidates respectfully.
4. **Confidentiality:** Do not share questions, answer keys, or candidate scores outside IMCAC process.

Confidentiality Agreement:

I, _____ (Examiner Name), agree to:

- Maintain confidentiality of all examination materials and candidate data.
- Avoid any conflict of interest in evaluation.
- Comply with IMCAC rules and reporting requirements.

Signature of Examiner: _____

Date: _____

Annexure 4: Result & Score Sheet Template

IMCAC Board Certification Examination

Candidate Name	Candidate ID	Exam Date	Written Score (%)	Practical Score (%)	Oral Score (%)	Total Score (%)	Result (Pass/Fail)	Remarks
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Instructions:

- Each component (written, practical, oral) must meet the minimum passing threshold.
- Final result is the weighted average of all components.
- Remarks may include special notes, areas for improvement, or distinction awards.

Authorized Signatory (IMCAC): _____

Date: _____

Annexure 5: Board Certification Template

[IMCAC Letterhead / Logo]

Certificate of Board Certification

This is to certify that

Name: _____

Candidate ID: _____

Specialty/Subspecialty: _____

has successfully completed the **IMCAC Board Certification Examination** and has met all required standards of professional competence.

Certification Validity: _____ (e.g., 5 years)

Date of Issue: _____

Authorized Signatory: _____

Director, IMCAC

Seal / Logo

Verification ID / QR Code: _____