REQUIRED REPORTING OF INCIDENTS OR ALLEGATIONS TO ECFMG

As a J-1 program sponsor, ECFMG must monitor the well-being of J-1 program participants and report incidents involving J-1 physicians and/or their accompanying J-2 dependent(s) to the U.S. Department of State (DoS). Therefore, ECFMG must be notified of any serious matter involving a J-1 physician or accompanying J-2 dependent. The DoS has indicated that any incident or event that impacts the health, safety, or welfare of J visa holders or that could bring the DoS J-1 program “notoriety or disrepute” is reportable.

GENERAL GUIDELINES FOR REPORTABLE INCIDENTS OR ALLEGATIONS INVOLVING A J-1 PHYSICIAN OR J-2 DEPENDENT

- Death
- Missing
- Sustains a serious illness or injury
- Litigation
- Incident involving the criminal justice system
- Sexually-related incidents or abuse
- Negative press
- Foreign government involvement
- Other situations impacting safety (i.e., natural disaster, civil unrest, outbreaks of violence)

How to Report a Serious Incident or Allegation to ECFMG

J-1 physicians and/or J-2 dependents must report any serious incident or allegation to their TPL immediately. The TPL and/or J-1 physician must then report the matter to ECFMG. All reporting is expected to take place within one business day of incident occurrence. Failure to do so may be considered to be a violation of the physician’s J-1 status. If you are a J-1 physician reporting an incident, please use the form on page 2 of this document. If you are a TPL reporting an incident, please use the form available at http://www.ecfmg.org/evsp/incident-report-tpl.pdf.
## Incident Report by J-1 Physician to ECFMG Exchange Visitor Sponsorship Program (EVSP)

### J-1 Physician Information

<table>
<thead>
<tr>
<th>Full Name:</th>
<th></th>
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| USMLE/ECFMG ID: |  |

### Other Parties Involved (if applicable)

*Use a separate piece of paper if more than one party is involved.*

<table>
<thead>
<tr>
<th>Name:</th>
<th></th>
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<table>
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<tr>
<th>Relationship (to you):</th>
<th></th>
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### Contact Information:

<table>
<thead>
<tr>
<th>Phone:</th>
<th>E-mail:</th>
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### Description of Incident

*Use a separate piece of paper if additional space is needed.*

### Date of Incident:

#### Has the Incident Been Reported to the Program Director / TPL?

- [ ] Yes  
- [ ] No

If “Yes” provide the date incident was reported:

### Action Taken by Host Institution (if applicable):

#### Required Signature

I certify that the above information is true and correct to the best of my knowledge. I understand that any false statements may be a violation of my J-1 status and could result in cancellation of my sponsorship.

<table>
<thead>
<tr>
<th>Signature</th>
<th>Date</th>
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</table>

E-mail the completed form and any relevant attachments to EVSP-Support@ecfmg.org. Once your report has been reviewed, you will receive a follow-up phone call. However, do not hesitate to contact EVSP with any questions at (215) 823-2121.